

# Safeguarding Procedures for Team Members

2026-27

## 1. Introduction

The purpose of this document is to provide direction to Challenge Partners' team members who have a concern they think may be related to safeguarding. It outlines how you can recognise, respond safely and report situations when you reasonably suspect or are told that someone is being, has been or is likely to be harmed.

The Appendices give you guidance about recognising abuse and neglect of children ([Appendix A](#)) and in adults, especially amongst adults at risk of harm ([Appendix B](#)).

Your key safeguarding contacts are:

- Designated Safeguarding Lead: **Nikita Vyas, Head of Programmes and Networks:**  
**[nikita.vyas@challengepartners.org](mailto:nikita.vyas@challengepartners.org)**
- Emergency and out of hours contact: **020 8017 3760**
- In the absence of the DSL, the deputy DSLs will act as the main point of contact and receive concerns by email or on the emergency and out of hours contact number above:

**Georgina Lambton, Partnership Experience Manager**  
**[georgina.lambton@challengepartners.org](mailto:georgina.lambton@challengepartners.org)**

**Jane l'Anson, Head of Partnership Reach and Experience**  
**[jane.l'anson@challengepartners.org](mailto:jane.l'anson@challengepartners.org)**

**Junia Charlton, Programmes Manager**  
**[junia.charlton@challengepartners.org](mailto:junia.charlton@challengepartners.org)**

- The Safeguarding Concern Form can be downloaded [here](#) and instructions on how to record safeguarding concerns can be found in [Section 8](#).

Note, throughout this guidance, where a disclosure, concern or allegation implicates the Designated Safeguarding Lead or Deputy Designated Safeguarding Lead, their role will be fulfilled by Laura Lewis-Williams, Managing Director ([laura.lewis-williams@challengepartners.org](mailto:laura.lewis-williams@challengepartners.org)). If a disclosure, concern or allegation implicates the Managing Director, this should be escalated to Alison Beane, Challenge Partners' Trustee for Safeguarding ([alison.beane@challengepartners.org](mailto:alison.beane@challengepartners.org)).

### 2. Responsibility for implementation

This procedure applies to anyone engaged or acting on behalf of Challenge Partners supported or directed activities, including employees, agency workers, secondees, interns, those on work experience, volunteers and consultants. For ease, we call these people "team members".

You must take immediate action as set out in this procedure. You have a responsibility to:

- report all concerns, allegations or disclosures of abuse, harm and neglect. Failure to report may (a) put individuals at risk and (b) imply a breach of your contractual duty, including the need for disciplinary action.
- assist the statutory protection investigation agencies.
- avoid impeding an investigation, e.g., by publicising the allegation or providing the opportunity for evidence to be obscured or destroyed.

If you have a concern or complaint, you will be taken seriously. You are not obliged to report harm you have experienced; Challenge Partners is committed to supporting you if you want to share this.

### 3. About safeguarding concerns

A safeguarding concern could be anything relating to an individual's safety or welfare, or it could be about the risk a person poses. It may be where:

- Someone tells you something (sometimes called a disclosure)
- You see a sign or symptom which makes you concerned (this can happen in a face to face environment or online)
- You observe or become aware of another person's behaviour which makes you concerned

### 4. If someone is in imminent and serious risk of harm

Rarely, you may be in a situation where you have seen, read, or heard about something which indicates an individual is experiencing or is at risk of life-threatening or imminent and serious harm. You may need to take immediate action.

Imminent and serious risks of harm include, but are not limited to, the following examples:

- A person has said that they intend to self-harm or are having suicidal thoughts.
- The alleged abuse or harm is being carried out at a place where the person is about to go (e.g., their home)
- The person has a life-threatening physical or psychological injury or condition.
- Someone who is causing the person harm is coming to collect them at the end of the activity.

Every situation will be different, and your response may depend on the capacity and capability of the team or your own background knowledge of the individual(s) at risk of harm.

If at any time the urgency of the situation does not allow you to contact the Designated Safeguarding Lead, then you should call emergency services (police, paramedics, out of hours mental health crisis

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support services and out of hours social services response teams) and inform the Designated Safeguarding Lead as soon as practically possible afterwards.

If your concern involves a member of Central Team staff, please refer it to the HR Manager (or in their absence, the Director of Finance and Operations), who will assess whether it needs to be raised with the Designated Safeguarding Lead.

## 5. Recognising and responding to safeguarding concerns

### 5.1. If someone tells you they are being harmed ('disclosure')

People may share their experiences of harm and abuse to you, even when they may not be explicit. Be aware that the person's ability to recount their concern or allegation will depend on age, culture, language and communication skills, and disability.

You should:

- Listen and acknowledge what is being said.
- Be reassuring and calm; reinforce positive messages about seeking help (e.g., that seeking help is a sign of strength).
- Avoid expressing your own views on the matter. A reaction of shock or disbelief could cause them to 'shut down', retract or stop talking. Take an unbiased approach when responding to disclosures – never endorse their allegation or statement but recognise that it has value to them.
- Focus on open questions; allow the person to share their story. Do not press for details – some cases of abuse need further and extensive investigation.
- Let them know they have done the right thing. Reassurance can make a big impact on the person who is sharing.
- At the end of the discussion, and where appropriate, reflect on what they have said to check your understanding – use their language to show that it's their experience. Do not ask and probe for any further details as this may cause distress and hinder a formal investigation.
- Explain what you'll do next. If appropriate, explain to the individual you'll need to report the abuse to someone who can help. Give them a timescale for when, by whom and how they will be contacted again. Do not promise to follow up with the person yourself.
- Contact the DSL as soon as possible.

### 5.2. If you spot a sign and symptom of harm

You may see something in someone's appearance, behaviour or their ways of communicating that makes you concerned that they may be experiencing abuse, neglect or harm.

Consider the following points:

- A series of events or indicators may be a concern when considered together, which is why individual events or indicators, even if minor, should never be ignored.

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- If you are unsure, it is always best to share your concern directly with the Designated Safeguarding Lead. If in doubt, always share.
- Never examine an individual specifically for any physical marks or injuries - only do what you would normally do as part of your duties.
- Signs or symptoms of harm do not necessarily mean that an individual is being abused. There could be other things happening in their life affecting their behaviour, which could still cause harm. The Designated Safeguarding Lead can best help you understand what you have seen. Do not ignore potential signs and symptoms of harm. You must never feel inhibited to seek advice and guidance about concerns for the safety or well being of another person.

### 5.3. If you are concerned that someone in our team is a risk of harm

You may be told that a team member at Challenge Partners has caused harm or poses a risk of harm to others.

In general, where an allegation has been made, or someone has been implicated as inflicting harm, they must **not** be directly or indirectly alerted that a concern has been raised. This might prejudice any police investigations and important evidence may be lost. Formal investigations will be carried out by the police and relevant statutory social care services.

When you become aware of an allegation, breach of position of trust and/or professional conduct issue we will take immediate steps to act in the best interests of those we are in contact with; especially children and adults at risk of harm. This will be led by the Challenge Partners Designated Safeguarding Lead.

Where you are unable to contact the Designated Safeguarding Lead, you should take steps to prevent the individual from having access to these groups. This may include the implicated team member being asked to step down from the event or being removed from access to the digital platform. In doing so, it should be made clear that the individual is not admitting any guilt or misconduct. Do not share details of why they are being asked to stand down from the role.

There are other circumstances where a team member could pose a risk of harm to others, including allegations of them harming others outside of work, especially if related to a child or vulnerable individual or an allegation of a serious crime. You must report this to the Designated Safeguarding Lead.

### 5.4. If you observe harm in an online environment

Activity online and on digital platforms can vary significantly. It can happen across any device connected to the internet, like computers, tablets and mobile phones and on a wide variety of contexts such as social media platforms, via text messages and messaging apps, through online chats, games and live-streaming sites, and AI-generated images and content.

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- If the incident is happening in a digital context, it may be appropriate to take direct action and call out the negative behaviour, ask the person to stop or inquire whether they need further help. You may need to end the contact if exposed to hate or illegal or illicit images.
- Depending on the type of harm it may be necessary to report the incident immediately to the police. If it is a potentially illegal incident like the sharing of child sexual abuse material immediately end the session and report the incident to the Internet Watch Foundation.
- If it is a bullying incident or if you are observing harm online you must take steps to gain evidence e.g. username and screenshotting. Always save this information securely and delete the materials after reporting.
- You can flag and report content in violation of social media networks' community standards. All platforms (e.g. YouTube, Facebook, Twitter, Instagram, Snapchat, etc) provide guidance on reporting content within their application. More information may be found in the specific network's help centre.
- Always inform the Designated Safeguarding Lead and record the incident.

### **5.5. If you receive information from a third party that someone could be harmed**

At times, organisations external to Challenge Partners may seek to share information of an individual experiencing abuse, neglect or harm with you.

We can only hold and process personal data for valid and lawful reasons. When you are offered information, consider the following questions:

- Are we an appropriate agency to receive this information?
- Has the person to whom this information relates given informed consent for this information to be shared with us?
- Is there a strong reason to receive this information without consent – is it in the public interest or required by law?

If you are not sure what information to receive, who to share it with or how best to manage any risk associated with sharing information onwards, please speak to the Designated Safeguarding Lead immediately for advice and guidance.

At times you may proactively receive information from a third party about experiences of abuse, neglect or harm. You should confidentially store this information and ensure that it is passed to the Designated Safeguarding Lead as soon as possible. You should follow their guidance regarding how this information is transferred and deleted.

## **6. Your responsibility to report concerns**

You must report any safeguarding concerns where an individual is at risk of or experiencing harm to the Designated Safeguarding Lead. You should act as urgently as necessary and no later than 24 hours. Where concerns arise outside normal working hours, you must refer the issue to Designated Safeguarding Lead.

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The Designated Safeguarding Lead will discuss with you who else may need to be informed and advise you on what information can be shared internally. For example, you may need to share details with your line manager or provide information on the concern to the partner organisation. You should discuss this with the relevant Designated Safeguarding Lead before doing so.

If the concern is about a member of staff in the central team, please refer the issue to the HR Manager (or in their absence, the Director of Finance and Operations), who will assess whether it needs to also be raised with the Designated Safeguarding Lead.

## 7. Reporting to other organisations

Challenge Partners team members may work in a wide variety of settings. This may affect how you best report a safeguarding concern:

- Where you are involved in an activity where there is a third party who has clear responsibility for the individual's welfare. For example, when you are visiting a school; they have responsibility for the children at the school.
- Where Challenge Partners has an agreement with an organisation(s) responsible for the individual's welfare to deliver activity on our behalf. We call these partner organisations. For example, where we commission another organisation to run activities on our behalf (eg. Hubs). In most instances, the partner organisation will lead any response to safeguarding concerns for those they have responsibility for. This will be detailed in our written agreement with the organisation.

In these situations, you should judge whether you report your concern by following their procedures before reporting to the Designated Safeguarding Lead at Challenge Partners.

In some situations, you may be aware that someone in contact with Challenge Partners is in contact with another organisation and has a key worker or equivalent offering them support. You must only share information with these referral organisations **after** reporting to the Designated Safeguarding Lead and with their permission.

## 8. Recording your concern

You must report the concern by completing the Challenge Partners [\*\*Safeguarding Concern Form\*\*](#) and send this to the Designated Safeguarding Lead. You should act as urgently as necessary and send the form no later than 24 hours. You should record the concern accurately and factually.

The following steps should be observed in every case:

- Whenever possible and practical, take notes during any conversation; where appropriate, ask for consent to do this and explain the importance of recording information;
- Where it is not appropriate to take notes at the time, make a written record immediately afterwards, and before the end of the day;
- Record the time, date, location, format of information (e.g. letter, telephone call, online, direct contact) and the persons present when the information was given;

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- In the cases of digital it may be appropriate to save the evidence through taking screenshots or saving the usernames. However, where it may be potentially illegal content (e.g., child sex abuse imagery) never screenshot the evidence as this itself could be an offence. Make a note of the URL or the content directly to the Internet Watch Foundation and record the incident in safeguarding records
- Include as much information as possible including the context and background leading to the disclosure.
- Be as factual as possible. If you need to give your own or somebody else's opinion, make sure it is clearly differentiated from fact. You should identify whose opinion is being given and record their exact words. If you include any 'hearsay' or underlying unsubstantiated concerns, state these but make clear their status.
- Use language that is clear and precise. Remember, different agencies may use and understand terminology differently so if needed define what you mean
- Always include full details of all other people involved (name, dates, job titles)
- Where relevant, always include full details of any concerns:
  - o visible injuries or marks
  - o general demeanour and appearance
  - o unusual/different behaviour or behaviour not appropriate to the individual's age, development or context
  - o changes in behaviour and/or mood
  - o relevant relationships with peers and adults
- Attach any statements, stories, drawings, emails, etc.

## 9. Maintaining confidentiality

Confidentiality is about privacy and respect for a person's wishes. Details of reported safeguarding concerns will remain confidential and only be shared on a "need-to-know" basis with those who take action and make decisions when responding. You do not need consent to share information about safeguarding with the Designated Safeguarding Lead.

The Designated Safeguarding Lead will establish who else any details may need to be shared with to understand better and respond to the concern. If you need to discuss something with your Line Manager or other personnel before reporting, ensure they know not to discuss this further and know that you will be speaking to the Designated Safeguarding Lead.

Ordinarily, if you have taken notes relating to your concern, you should delete or destroy them once you have shared details with the Designated Safeguarding Lead. The Designated Safeguarding Lead may instruct you to retain this information or transfer to another in the organisation (e.g. in the case of a near-miss accident or a wellbeing matter).

### 10. Help for you when dealing with safeguarding concerns

Challenge Partners has a duty of care to any employee or volunteer affected by a safeguarding concern or complaint. To support affected individuals, you can expect the Designated Safeguarding Lead to:

- Thank you for reporting this concern or complaint and explain that you have fulfilled your responsibility in doing so
- Update you on actions and progress as appropriate
- Be reminded of confidentiality requirements and not sharing information further
- Discuss with you what additional support you may require. This may include them informing your line manager that they have dealt with a difficult situation and/or accessing confidential support through the Health and Wellbeing Service.
- Depending on the circumstances, the Designated Safeguarding Lead may explore other support options including: specialist psycho-social counselling, medical support, legal support, and/or access to other specialist and appropriate support as needed.
- Consider contacting those affected later to check on their continued welfare.

You have the right to feedback on your experiences with reporting a safeguarding concern if you wish. The Designated Safeguarding Lead manages any feedback and may proactively ask you for your views and experiences.

### 11. Responding to inaction

If you feel safeguarding concerns are not being acted upon by the Designated Safeguarding Lead, it is your responsibility to act. You should seek to escalate the issue internally, seeking information on what action has been taken.

If you are concerned that the Designated Safeguarding Lead are implicated, are not responding appropriately or erred in their decisions, you should raise the issue with the Managing Director.

If you are concerned that the Challenge Partners are not taking a safeguarding concern seriously, you can report through whistleblowing channels in line with the *Whistleblowing Policy*.

### Appendix A: Recognising Abuse and Neglect of children

The abuse or neglect of a child can be caused by inflicting harm or by failing to act to prevent harm being inflicted. Children may be abused in a family, in a community or institutional setting, by those known to them or, much more rarely, by a stranger.

The following definitions are taken from *Working Together to Safeguard Children 2018 (updated December 2020)*. They have been included to assist those providing services to children in assessing whether a child may be suffering actual or potential harm

You can also seek further guidance from: What to do if you're worried a child is being abused: advice for practitioners.

#### Indicators of Significant Harm

The following guidance is intended to help all professionals who come into contact with children. It should not be used as a comprehensive guide, nor does the presence of one or more factors prove that a child has been abused; it may, however, indicate that further enquiries should be made. This is not an exhaustive list.

- An unexplained delay in seeking treatment that is obviously needed;
- An unawareness or denial of any injury, pain or loss of function;
- Incompatible explanations offered or several different explanations given for a child's illness or injury;
- A child reacting in a way that is inappropriate to his/her age or development;
- Reluctance to give information or failure to mention previous known injuries;
- Frequent attendances at Accident and Emergency Departments or use of different doctors and Accident and Emergency Departments;
- Frequent presentation of minor injuries (which if ignored could lead to a more serious injury);
- Unrealistic expectations/constant complaints about the child;
- Alcohol misuse or other substance misuse;
- A parent's request to remove a child from home or indication of difficulties in coping with the child;
- Domestic violence;
- Parental mental ill health;
- The age of the child and the pressures of caring for a number of children in one household.

#### Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

#### *Recognising Physical Abuse*

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It can sometimes be difficult to recognise whether an injury has been caused accidentally or non-accidentally, be alert to the possibility that an injury may not be accidental and seek appropriate expert advice. Medical opinion will be required to determine whether an injury has been caused accidentally or not.

Consider:

- Children with frequent injuries
- Children with unexplained or unusual fractures or broken bones; and
- Children with unexplained bruises, cuts, burns or scald and bite marks.

### **Emotional Abuse**

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 a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
- feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.
- 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.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

### *Recognising Emotional Abuse*

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse. They may include:

- Developmental delay;
- Abnormal attachment between a child and parent/carer, e.g., anxious, indiscriminate or no attachment;
- Indiscriminate attachment or failure to attach;
- Aggressive behaviour towards others;
- A child scapegoated within the family;
- Frozen watchfulness, particularly in pre-school children;
- Low self-esteem and lack of confidence;
- Withdrawn or seen as a 'loner' with difficulty relating to others.

### Sexual Abuse

- 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 (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.
- They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse.
- Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

#### *Recognising sexual abuse*

Children of all genders and of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child / family.

Recognition can be difficult unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional / behavioural. Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct;
- Sexual knowledge inappropriate for the child's age;
- Sexually explicit behaviour, play or conversation, inappropriate to the child's age;
- Continual and inappropriate or excessive masturbation;
- Self-harm (including eating disorder), self-mutilation and suicide attempts;
- Running away from home;
- Poor concentration and learning problems;
- Loss of self-esteem;
- Involvement in child sexual exploitation or indiscriminate choice of sexual partners;
- An anxious unwillingness to remove clothes for - e.g., sports events (but this may be related to cultural norms or physical difficulties).

Some physical indicators associated with this form of abuse are:

- Pain or itching in genital area;
- Recurrent pain on passing urine or faeces;
- Blood on underclothes;
- Pregnancy in a younger girl where the identity of the father is not disclosed and/or there is secrecy or vagueness about the identity of the father;
- Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted infection, presence of semen on vagina, anus, external genitalia or clothing.

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### **Neglect**

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

Neglect may occur during pregnancy as a result of maternal substance misuse.

Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food and clothing, 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 caregivers);
- Ensure access to appropriate medical care or treatment.

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

#### *Recognising Neglect*

The growth and development of a child may suffer when the child receives insufficient food, love, warmth, care and concern, praise, encouragement, and stimulation.

Apart from the child's neglected appearance, other signs may include:

- Short stature and underweight;
- Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold;
- Swollen limbs with sores that are slow to heal, usually associated with cold injury;
- Recurrent diarrhoea;
- Abnormal voracious appetite at school or nursery;
- Dry, sparse hair;
- A child seen to be listless, apathetic and unresponsive with no apparent medical cause,
- Indiscrimination in relationships with adults (may be attention seeking).

A clear distinction needs to be made between organic and non-organic failure to thrive. This will always require a medical diagnosis. Non-organic failure to thrive is the term used when a child does not put on weight and grow and there is no underlying medical cause for this.

### **Radicalisation or exposure to extreme views**

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Extremism is defined in the 2011 Prevent strategy as vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

#### *Recognising radicalisation and extremism*

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There are a number of behaviours which may indicate a child is at risk of being radicalised or exposed to extreme views. These include;

- Spending increasing time in the company of other suspected extremists.
- Changing their style of dress or personal appearance to accord with the group.
- Day-to-day behaviour becoming increasingly centred on an extremist ideology, group or cause.
- Loss of interest in other friends and activities not associated with the extremist ideology, group or cause.
- Possession of materials or symbols associated with an extremist cause.
- Attempts to recruit others to the group/cause.
- Communications with others that suggest identification with a group, cause or ideology.
- Using insulting to derogatory names for another group.
- Increase in prejudice-related incidents committed by that person – these may include;
  - physical or verbal assault
  - provocative behaviour
  - damage to property
  - derogatory name calling
  - possession of prejudice-related materials
  - prejudice related ridicule or name calling
  - inappropriate forms of address
  - refusal to cooperate
  - attempts to recruit to prejudice-related organisations
  - condoning or supporting violence towards others.

### Online abuse

Online abuse is abuse that happens via the internet or digital technologies. It can happen across a variety of devices, platforms, apps, social media, via messaging or emails, through online gaming and via live streaming sites and services. Children and young people can be at risk from people they do and don't know, it can be linked with offline abuse or it can solely take place online.

The types of online abuse can include online bullying, grooming online, radicalisation online, the making or sharing of nudes or semi-nudes, including digitally altered images and those wholly generated by AI ('deepfakes' or 'deepnudes'), sexting, sexual abuse and exploitation online.

### Recognising radicalisation and extremism

The signs of online abuse can be hard to spot and they may be very similar to the signs associated with other forms of abuse but there are some things to watch out for including – more time online than usual, seeming distant angry or upset especially after being online, being secretive about what they are doing online and who they are talking to and having new devices or a number of extra devices, along with new email addresses.

### Appendix B: Recognising Abuse and Neglect of adults

Many types of abuse of adults are criminal offences and should be treated as such. This guidance covers how to respond to concerns, observations or allegations in relation to the safeguarding of an adult at risk. Abuse is a violation of a person's human rights or dignity by someone else.

An adult at risk is a person aged 18 or over who has needs for care and support and is experiencing, or is at risk of, abuse or neglect. As a result of those care and support needs, they may be unable to protect themselves. This might include disabled people, those frail due to age, has mental health needs including dementia or personality disorder, has a long-term illness/or condition or who misuses substances or alcohol.

Mental Capacity refers to a person's ability to make decisions for themselves or about their own life. Some people have difficulties in making such decisions. This is called 'lacking capacity'. Under the Mental Capacity Act (MCA) there are laws governing who can make decisions on someone else's behalf which help to safeguard adults at risk.

Any of these forms of abuse can be either deliberate or be the result of ignorance or lack of training, knowledge or understanding. Often if a person is being abused in one way they are also being abused in other ways.

The person who is responsible for the abuse may be a stranger but is often well known to the person abused and could be:

- A relative / family member
- Professional employees
- Paid care worker
- Volunteer
- Other service user
- Neighbour
- Friend or associate

Some of the general signs of harm to look for are:

- multiple bruising or finger-marks;
- injuries the person cannot give a good reason for;
- deterioration of health for no apparent reason;
- loss of weight;
- inappropriate or inadequate clothing;
- withdrawal or mood changes;
- a carer who is unwilling to allow access to the person;
- an individual who is unwilling to be alone with a particular carer;
- unexplained shortage of money.

**Physical abuse, includes:**

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

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- Unauthorised restraint, restricting movement (e.g., tying someone to a chair)

### ***Domestic violence or abuse***

Domestic violence and abuse includes any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been, intimate partners or family members regardless of gender or sexuality.

It also includes so called 'honour' -based violence, female genital mutilation and forced marriage.

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

- acts of assault, threats, humiliation and intimidation
- harming, punishing, or frightening the person
- isolating the person from sources of support
- exploitation of resources or money
- preventing the person from escaping abuse
- regulating everyday behaviour

### **Sexual abuse**

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

### **Psychological or emotional abuse, can include:**

- Enforced social isolation – preventing someone accessing services, educational and social opportunities and seeing friends
- Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance
- Preventing someone from meeting their religious and cultural needs
- Preventing the expression of choice and opinion
- Failure to respect privacy
- Preventing stimulation, meaningful occupation or activities
- Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse
- Addressing a person in a patronising or infantilising way
- Threats of harm or abandonment
- Cyber bullying

### **Financial or material abuse, can include:**

- Theft of money or possessions
- Fraud, scamming
- Preventing a person from accessing their own money, benefits or assets
- Employees taking a loan from a person using the service
- Undue pressure, duress, threat or undue influence put on the person in connection

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with loans, wills, property, inheritance or financial transactions

- Arranging less care than is needed to save money to maximise inheritance
- Denying assistance to manage/monitor financial affairs
- Denying assistance to access benefits
- Misuse of personal allowance in a care home
- Misuse of benefits or direct payments in a family home
- Someone moving into a person's home and living rent free without agreement or under duress

### **Modern slavery, can include:**

- Human trafficking
- Forced labour
- Domestic servitude
- False representation, using another person's bank account, cards or documents
- Exploitation of a person's money or assets, e.g. unauthorised use of a car
- Misuse of a power of attorney, deputy, appointeeship or other legal authority
- Rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repair or poor workmanship
- Sexual exploitation, such as escort work, prostitution and pornography
- Debt bondage – being forced to work to pay off debts that realistically they never will be able to

### **Discriminatory abuse, can include:**

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

### **Organisational or institutional abuse, can include:**

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

## CHALLENGE PARTNERS

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

### ***Neglect or acts of omission, can include:***

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

## CHALLENGE PARTNERS

**Self-neglect**, can include:

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

### **Radicalisation**

There are a number of behaviours which may indicate a person is at risk of being radicalised or exposed to extreme views. These include;

- Spending increasing time in the company of other suspected extremists.
- Changing their style of dress or personal appearance to accord with the group.
- Day-to-day behaviour becoming increasingly centred on an extremist ideology, group or cause.
- Loss of interest in other friends and activities not associated with the extremist ideology, group or cause.
- Possession of materials or symbols associated with an extremist cause.
- Attempts to recruit others to the group/cause.
- Communications with others that suggest identification with a group, cause or ideology.
- Using insulting to derogatory names for another group.
- Increase in prejudice-related incidents committed by that person – these may include;
  - physical or verbal assault
  - provocative behaviour
  - damage to property
  - derogatory name calling
  - possession of prejudice-related materials
  - prejudice related ridicule or name calling
  - inappropriate forms of address
  - refusal to cooperate
  - attempts to recruit to prejudice-related organisations
- condoning or supporting violence towards others.