



**Office of the Police and Crime Commissioner
for Cleveland**

**Safeguarding Policy
2025**

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Equality Statement

The Office of the Police and Crime Commissioner (OPCC) is committed to the principles of equality and diversity.

No member of the public, member of staff, contractor, volunteer or job applicant shall be discriminated against on the grounds of age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; or sexual orientation.

1. Introduction

- 1.1 Children and vulnerable adults have the right to be protected from harm. We believe that no child, young person or vulnerable adult should experience abuse or harm and we are committed to robust safeguarding practices.
- 1.2 As per [Section 11 of the Children Act 2004](#), the Police and Crime Commissioner has a duty to ensure arrangements are in place to safeguard and promote welfare of children.
- 1.3 This policy outlines the expectations and key principles to safeguarding and promoting the welfare of children and vulnerable adults, and should be read in conjunction with the [OPCC's Protected Disclosure Policy](#).

2. Scope

- 2.1 This policy applies to all aspects of our work and to everyone working for the OPCC including permanent and temporary employees, contractors and volunteers (OPCC staff).
- 2.2 It contains the relevant information and training guidance to understand roles and responsibilities regarding safeguarding, and includes reference to OPCC commissioned services.
- 2.3 The welfare of children and vulnerable adults is paramount and as part of our responsibilities, we will ensure that any safeguarding issues that are encountered as part the work we commission, are handled in accordance with policy and legislation.
- 2.4 This policy is in addition to the principles and expectations for conduct found in the [Police Staff Code of Conduct](#) and other policies that set expectations on conduct and behaviour.

3. Legislative Framework

3.1 This Policy is underpinned and shaped by the relevant legislation and guidance including:

- [The Children Act 1989](#)
- [The Education Act 2002](#)
- [The Children Act 2004](#)
- [The Human Rights Act 1998](#)
- [Equality Act 2010](#)
- [Mental Capacity Act 2005](#)
- [“Safeguarding Adults” – National Framework of Standards, Association of Directors of Social Services 2005](#)
- [Safeguarding Vulnerable Groups Act 2006](#)
- [Safeguarding Adults – Teeswide Safeguarding Adults Board Interactive Procedures 2021](#)
- [Keeping children safe in education – 2023](#)
- [Working Together to Safeguard Children – 2018](#)
- [Sexual Offence Act 2003](#) (position of trust offence)
- [Counter Terrorism and Security Act 2015](#)
- [FGM Act 2003](#) (further Serious Crime Act 2105)
- [Care Act 2014](#)¹
- [The Data Protection Act 2018](#)
- [The Children and Families Act 2014](#)
- Prevent duty guidance: for further education institutions in England and Wales (2015) (Updated 7th September 2023)

4. Definitions

4.1 For the purpose of this policy, the following definitions apply:

Safeguarding Children

In terms of this policy, a child is defined as anyone who has not reached their 18th birthday.

Safeguarding and promoting the welfare of children is defined in ‘Keeping Children Safe in Education (2023) as:

- Protecting children from maltreatment.
- Preventing impairment of children’s mental and physical health or development.
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

¹ This sets out a clear legal framework on how local authorities and other organisations should protect adults at risk of abuse of neglect.

Safeguarding Adults

An adult at risk of abuse or neglect is defined as someone who has needs for care and support, who is experiencing, or at risk of, abuse or neglect and as a result of their care needs - is unable to protect themselves. For the purposes of this policy, an adult is a person, aged 18 years and over who is at a greater risk of suffering abuse or neglect because of physical, mental, sensory, learning, or cognitive illnesses or disabilities; and substance misuse or brain injury.

The Care Act 2014 describes safeguarding as a means of protecting an adult's right to live in safety, free from abuse and neglect. It further states that it is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.

4.2 Further definitions of abuse, signs and indicators are attached at Appendix A.

5. Roles and Responsibilities

5.1 Safeguarding is everyone's responsibility regardless of the role held within the organisation. All staff should:

- Be aware of this policy.
- Undertake specified training.
- Understand the process for raising concerns.

5.2 The Police and Crime Commissioner has duty under [Section 11 of the Children Act 2004](#) to ensure:

- Their functions are discharged having regard to the need to safeguard and promote the welfare of children; and
- Any services provided by another person pursuant to arrangements made by the person or body in the discharge of their functions are provided having regard to that need.

5.3 As the Senior Responsible Owner (SRO) the OPCC Chief Executive and Monitoring Officer has the responsibility for oversight of this Safeguarding Policy and ensuring statutory requirements are fulfilled. The SRO will:

- Review and maintain this Safeguarding Policy.

- Be contacted as soon as practicable, and within one working day, with the details of any safeguarding allegation or concern.
 - Ensure the DSL and OPCC are appropriately trained.
 - As appropriate, liaise with any local safeguarding partnership or the Police regarding any allegation or concern.
- 5.4 The Designated Safeguarding Leads (DSL) are appointed members of staff who ensures all OPCC employees adhere to the safeguarding policy. The DSL leads within the OPCC are:
- Head of CURV
 - Head of Policy, Partnerships and Delivery.
- 5.5 It is the responsibility of all staff to raise any concern they may have regarding child protection or a safeguarding issue. The primary responsibility of the DSLs is to ensure that on such occasions, they will be taken seriously, and their report will be treated in confidence and brought to the attention of the relevant authority in accordance with [Tees Safeguarding Children Partnership Procedures](#) and [Tees Adult Safeguarding Board Inter-agency Safeguarding Adults Procedure](#).
- 5.6 The DSLs will:
- Maintain knowledge and relationships with local safeguarding partnerships and Cleveland Police.
 - Make arrangements for the referral of allegations or concerns reported by children, adults or staff of safeguarding issues ensuring that confidentiality is maintained in all cases.
 - In the event of a concern or allegation, ensure that the report is immediately (or within one-working day) brought to the attention of the SRO, and agree the appropriate action to be taken.
 - Be responsible for co-ordinating safeguarding training for OPCC staff.
- 5.7 The DSLs must ensure:
- Details of a concern are formally recorded and appropriate action is taken.
 - Any details relating to the concern are kept strictly confidential and stored securely.
 - The employee who reported the disclosure is informed of any action taken and any outcome, where appropriate.
- 5.8 The Head of CURV is required to inform the Home Office of critical incidents whenever an individual(s) known to a VRU commissioned project have been reported:
- homicide as victim or charged as perpetrator.
 - is a victim of suicide.
 - is a victim or perpetrator of assault amounting to attempted murder.
 - is a victim or perpetrator of serious sexual offences including rape.

- safeguarding allegations made against a member of staff funded by the programme.

5.9 Initial notification should be made within 24 hours, and the process for reporting is outlined in **Appendix B**, which also gives indicative examples of the types of serious incidents.

6. Safer Recruitment

6.1 The OPCC is committed to safer recruitment processes, guidance and support is provided by Cleveland Police, Human Resources (HR) which includes managing and advertising job vacancies, processing application forms, checking references and ensuring police vetting is complete following a conditional offer of employment.

6.2 In accordance with College of Policing [Authorised Approved Practice on Vetting 2021](#), as a minimum all roles within the OPCC hold a Recruitment Vetting status with OPCC volunteers/contractors requiring Non-Police Personnel Vetting (NPPV).

6.3 Employment or placement of volunteers/contractors will not commence until police vetting has been approved.

6.4 As an integral part of the OPCC induction process, all staff will be introduced to this safeguarding policy, their responsibilities and mandatory training requirements.

6.5 All staff will receive safeguarding and prevent training, which will be refreshed every two years.

7. Training Requirements

7.1 Accessed via the [Safeguarding All E-learning Hub](#), the following table sets out the mandatory training requirements for OPCC Staff.

OPCC Staff	Training Course	Requirement
All Staff	Safeguarding Children – Level 1	Mandatory
All Staff	Safeguarding Adults – Level 1	Mandatory
All Staff	Safeguarding Children – Refresher Training	Mandatory – annual basis
All Staff	Safeguarding Adults – Refresher Training	Mandatory – annual basis

SRO and DSL	Safeguarding Children – Level 2	Mandatory
SRO and DSL	Safeguarding Adults – Level 2	Mandatory

- 7.2 Training records will be maintained by the OPCC Senior Business Support Officer, where proof of completion of e-learning will be required.
- 7.3 Additional Level 3 Safeguarding Training will be undertaken by the SRO and DSL.

8. OPCC Commissioned Services

- 8.1 There is a specific requirement that OPCC commissioned and grant funded services must have in place a range of processes to enable them to meet their duty of care to safeguard their service users.
- 8.2 In addition to providing high quality and safe care, service providers must ensure that they have in place up to date organisational safeguarding policy and procedures.
- 8.3 Safeguarding policies and procedures must give clear guidance on how to recognise and refer safeguarding cases and they should be consistent with, and make reference to, safeguarding legislation, including in relation to mental capacity and consent, national policy/ guidance and local multi-agency safeguarding processes.
- 8.4 The safeguarding policy must also detail (as a minimum);
- Safeguarding responsibilities and accountability within the service
 - Safer Recruitment
 - Safe working practices
 - Induction and Training
 - Confidentiality and information sharing
- 8.5 All staff must always have access to these policies and procedures and practice in accordance with them.
- 8.6 The provider will ensure there is a designated safeguarding lead within the service who will lead in championing the importance of safeguarding.
- 8.7 All safeguarding concerns relating to a member of staff (including staff on fixed term contracts, temporary staff etc) must be effectively investigated and referred appropriately according to multi-agency safeguarding procedures.
- 8.8 The provider must undertake Disclosure and Barring Service (DBS) checks for all staff employed by the service and comply with its duties to refer information

to the Independent Safeguarding Commissioner (ISA) under the Safeguarding Vulnerable Groups Act 2006.

- 8.9 Services must provide a copy of their current Safeguarding Policy prior to the award of a contract or grant. Safeguarding arrangements will be annually reviewed as part of the OPCC contract/grant monitoring arrangements.

9. Safeguarding allegations against OPCC staff

- 9.1 As a public body, we expect high standards from all employees and aspire to the highest standards of excellence and professionalism when representing the OPCC. This is underpinned by the Police Staff Code of Conduct linked to all OPCC staff employment terms and conditions.
- 9.2 Concern may be raised if a member/s of staff, contractor or volunteer behave in a way which demonstrates unsuitability or concerns of working with children or vulnerable adults in their present position, or in any capacity.
- 9.3 Allegations or concerns may arise either in their work or private life. Examples include but are not limited to:
- Commitment of a criminal offence against or related to children or vulnerable adult
 - Behaving towards children or vulnerable adults in an inappropriate manner or poses a risk to children or vulnerable adult.
 - Where an allegation or concern arises about a member of staff from their private life.
 - Where an allegation of abuse is made against someone closely associated with a member/s of staff such as a colleague, partner, member of the family or other household member.
- 9.4 In the event of such cases, the safety of the child and vulnerable adult at risk is of paramount importance. Immediate action may be required to safeguard them.
- 9.5 Any concern that the child or vulnerable adult may be at risk of harm or abuse must be immediately reported to the Designated Safeguarding Lead who in the first instance, where necessary will take advice from the relevant Local Authority Designated Officer (LADO).
- 9.6 A police investigation of a possible criminal offence may be required and if appropriate, disciplinary action/suspension pending investigation will be considered.
- 9.7 Any concerns relating to the Police and Crime Commissioner will be handled in accordance with The Elected Local Policing Body (complaints and misconduct) Regulations 2012.

- 9.8 Anyone who has concerns about the behaviour of a colleague must always raise this with the Designated Safeguarding Lead as quickly as possible.

10. Acting on Safeguarding Concerns

- 10.1 It is not the responsibility of the OPCC to investigate concerns about individual children or vulnerable adults who are or may be being abused or who are at risk. Rather it is everyone's responsibility within the OPCC to make sure that concerns about children and vulnerable adults are passed to the agency that can help them without delay.
- 10.2 If anyone is concerned that a child or vulnerable adult is at risk of being abused or neglected, they should not ignore their suspicions and should not assume that someone else will take action to protect that person.

If there are concerns that a child or vulnerable adult is currently suffering, or is likely to suffer from, significant harm, then immediate action should be taken and the police should be contact immediately, call 101 or 999.

- 10.3 In all circumstances the DSL should be informed of concerns at the earliest opportunity and the safer [referral form](#) (for children) or [concern form](#) (vulnerable adult) should be completed as soon as possible if a child, young person or adult at risk discloses, or a member of staff has reason to believes there is a safeguarding concern.
- 10.4 Concerns about children should be referred to the relevant Children's Multi-Agency Safeguarding Hub in the local authority area where the child lives.
- Middlesbrough and Redcar - [Make a safeguarding report | South Tees Safeguarding Children Partnership \(stscp.co.uk\)](http://stscp.co.uk)
 - Hartlepool and Stockton - [Hartlepool and Stockton-on-Tees Safeguarding Children Partnership \(HSSCP\)](#)
- 10.5 Similarly, concerns about vulnerable adults should be referred to the relevant local authority adult social care safeguarding service.
- Tees Adult Safeguarding Board - [Report Abuse | Teeswide Safeguarding Adults Board \(tsab.org.uk\)](http://tsab.org.uk)
- 10.6 In summary, if a child or vulnerable adult tells you they are being abused you should:
- Show them you have heard what they have said and that you take the allegation seriously.
 - If possible, ascertain if whether there are any immediate issues of safety for the person making the disclosure or any children/adults at risk.
 - Encourage them to talk but not ask leading questions as this could be seen as corruption of evidence.
 - Not interrupt when they are recalling events and not ask them to repeat their account - Explain to them what you will need to do with this information.

- Not promise to keep what has been disclosed a secret as you have a duty to report it.
- Record everything they tell us as accurately as possible using the exact words if possible and send it to your Designated Safeguarding Lead.
- Follow the local safeguarding partnership procedures for the local authority area where the child lives
- Inform the LADO in cases of professional misconduct
- In an emergency call the Police on 101 or 999.

You should not:

- Confront the alleged abuser.
- Ask leading questions or try to investigate.
- Contact parent or carer before receiving advice.
- Promise to keep it a secret.
- Assume somebody else is dealing with it.

11. Prevention of Violent Extremism – The Prevent Duty

11.1 The [Prevent Strategy](#) seeks to stop people being drawn into or supporting terrorism. This duty is held in law under the Counter Terrorism and Security Act 2015 with revised [Prevent Duty Guidance](#).

11.2 Objectives of the Prevent duty are to:

- Ideology. Respond to the ideological challenge of terrorism and the threat we face from those who promote and support it.
- Institutions. Increase the resilience of institutions to resist terrorists and extremists. Priority areas; education, health, criminal justice system, faith institutions, internet, charitable sector, youth justice system.
- Individuals. Stop people from being drawn into terrorism and protect those vulnerable individuals who are at risk of radicalisation, ensuring they are given appropriate advice and support.

If there are concerns that a child or vulnerable adult is about to put themselves or others in immediate danger or appears to be involved in planning to carry out a criminal offence, immediate action should be taken and the police should be contact immediately, call 101 or 999.

11.3 Potential indicators of radicalisation are attached at **Appendix C**.

11.4 If there are concerns that a young person or adult at risk is becoming radicalised and involved in an organisation which could ultimately harm them and the community, this needs to be reported to the DSL who will refer them for support, in accordance with the [Tees Prevent and Channel Referral Process](#).

12. Confidentiality and Information sharing

- 12.1 Information will be gathered, recorded and stored in accordance with Data Protection Legislation and the [OPCC privacy notice](#).
- 12.2 All OPCC staff have a professional duty to share information with other agencies in order to safeguard children and adults at risks.
- 12.3 The Data Protection Act 2018 provides a number of bases for sharing personal information. It is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child provided that there is a lawful basis to process any personal information required.
- 12.4 The data protection legislation does not prevent the sharing of information for the purposes of keeping children safe and vulnerable adults safe. Fears about sharing information must not be allowed to stand in the way of the need to promote safeguarding.

13. Monitoring of the Policy

- 13.1 The Senior Responsible Owner has responsibility for the monitoring and review of this policy, with an annual report submitted to the Police and Crime Commissioner. The Policy will be reviewed on an annual basis.

14. Contact Details

Senior Responsible Owner
Chief Executive & Monitoring Officer
Tel: 01642 301483
lisa.oldroyd3@cleveland.police.uk

Designated Safeguarding Lead
Head of CURV
Tel: 01642 301208
john.holden@cleveland.police.uk

Designated Safeguarding Lead
Head of Policy, Partnerships and Delivery
rachelle.kipling@cleveland.police.uk
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Definitions, signs and indicators of child abuse and neglect

If you are concerned about possible abuse, please seek immediate advice from the Designated Safeguarding Lead. **It is not the OPCC's responsibility to decide if abuse is taking place, but it is our responsibility to act on our concerns.**

Physical Abuse

A form of abuse which 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 feigns the symptoms of, or deliberately induces illness in a child.

Signs and indicators may include:

- Multiple bruising/ scratching, adult bite marks, outline bruising (e.g. belt, hand, finger tips), bruises to the eyes and ears;
- Burns and scalds, cigarette burns;
- Difficulty in moving limbs;
- Poor concentration.
- Blood in the white of the eye; injuries to 'not-yet mobile' babies;
- Injury to the mouth;
- Drowsiness from head injury or poisoning;
- Aggressive or withdrawn behaviour;

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.

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 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.

It may involve seeing or hearing the ill-treatment of another. It may involve 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.

Signs and indicators may include:

- Self-harm;
- Developmental delay;
- Eating disorders;
- Poor self-image;
- May bully others;
- Difficulty in forming relationships;
- Fear of new situations;
- Obsessive rocking/ thumb sucking;

- Unwillingness to join in;
- Fear of failure, lack of confidence;
- Few friends;
- Low self-esteem;
- Attention seeking behaviour; witnessing domestic violence; frozen watchfulness.

Sexual abuse

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 abuse may involve physical contact, including assault by penetration (e.g. rape or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

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 (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.

The Police must be informed immediately of any sexual activity involving a child under 13 years of age.

Signs and indicators may include:

- Injuries to genital and or anal area;
- Sexually transmitted disease;
- Unwanted pregnancy;
- Bruises, scratches, burns or bites;
- Eating disorders;
- Self-harm;
- Bleeding from the vagina or anus;
- Pain in passing urine or faeces;
- Persistent discharge;
- Frequent masturbation;
- Wetting, soiling, smearing excreta;
- Sexual awareness inappropriate to developmental stage; acting out sexual activity; aggression/ withdrawal.

Neglect

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 occur during pregnancy as a result of maternal substance abuse.

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

- provide adequate food, clothing and shelter (including exclusion from home or abandonment); or
- protect a child from physical or emotional harm or danger; or
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment.

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

Signs and indicators may include:

- Delayed physical development;
- Underweight and small structure;
- Overweight or obese;
- Chronic nappy rash;
- Slow growth;
- Frequently smelly;
- Persistently dirty;
- Persistent hunger;
- Impairment of health;
- Infections slow to clear;
- Persistent head lice;
- Low self-esteem; destructive tendencies; stealing or hiding food.

Exploitation

Child exploitation is when someone uses a child for financial gain, sexual gratification, labour or personal advantage.

Using cruel and violent treatment to force a child to take part in criminal or sexual activities often leads to physical and emotional harm to the child, to the detriment of their physical and mental health, education, and moral or social development.

The exploitation of children can take a number of different forms and perpetrators may subject children and young people to multiple forms of abuse at the same time, such as criminal exploitation (including county lines) and sexual exploitation.

Signs and indicators may include:

- Skipping school
- Regularly missing from home
- Staying out late or overnight
- Unexplained gifts/new possessions
- Drugs and alcohol misuse
- Secretive behaviour
- Inappropriate or sexualised behaviour
- Friendship or relationships with older adults
- Significant changes in mood or behaviour changes in appearance (clothes, hygiene, etc).
- Becoming withdrawn or isolated, poor mental health/self-harm etc.
- Lots of time spent on social media talking to 'friends' they haven't met or that you don't know.
- Unexplained injuries
- They own a second mobile phone from which they are receiving a high volume of calls or need to leave urgently after receiving a text/call

Bullying

Bullying is defined as 'behaviour by an individual or group, usually repeated over time, which intentionally hurts another individual or group either physically or emotionally'. A child who bullies is defined as 'a person who habitually seeks to harm or intimidate those whom they perceive as vulnerable'.

Bullying is 'the repetitive, intentional hurting of one person or group by another person or group, where the relationship involves an imbalance of power'

While bullying often involves children as both target and perpetrator, it can occur at any age. Professionals should be just as alert to cases of bullying which might involve an adult perpetrator bullying a child, or a child perpetrator bullying an adult.

Bullying often starts with apparently trivial events such as teasing and name calling which nevertheless rely on an abuse of power. Such abuses of power, if left unchallenged, can lead to more serious forms of abuse, such as domestic violence and abuse, racial attacks, sexual offences and self-harm or suicide.

- Being frightened of walking to and from school or changing their usual route.
- Being frightened of social media activities.
- Feeling ill in the mornings or before activities
- Beginning truanting and not wanting to take part in activities they usually enjoy.
- Beginning to perform poorly in their schoolwork.
- Coming home regularly with clothes or possessions damaged or destroyed.
- Becoming withdrawn, starting to stammer, lacking confidence, being distressed and anxious and stopping eating.
- Attempting or threatening suicide.
- Unable to sleep, crying themselves to sleep, having nightmares.
- Having their possessions go missing.
- Asking for money or starting to steal (to pay the bully) or continually 'losing' their pocket money.
- Refusing to talk about what's wrong.
- Unwillingness to share information about online accounts & activity.
- Having unexplained bruises, cuts, scratches.
- Beginning to bully other children/siblings.
- Becoming aggressive and unreasonable.

Types of abuse which could give risk to a safeguarding concern for a vulnerable adult.

If you are concerned about possible abuse, please seek immediate advice from the Designated Safeguarding Lead. **It is not the OPCC's responsibility to decide if abuse is taking place, but it is our responsibility to act on our concerns.**

Abuse is a violation of an individual's human and civil rights by another person or persons. Adults at risk may be abused by a wide range of people including family members, professional staff, care workers, volunteers, other service users, neighbours, friends, and individuals who deliberately exploit their vulnerability.

Abuse may occur when an adult at risk lives alone or with a relative, within nursing, residential or day care settings, hospitals and other places assumed to be safe, or in public places.

The following are examples of abusive or exploitative behaviours which could give rise to a safeguarding concern:

Physical abuse - including assault, hitting, slapping, pushing, misuse of medication, restraint, or inappropriate physical sanctions.

Domestic abuse – including psychological, physical, sexual, financial, emotional abuse and so called ‘honour’ based violence. This may not happen in a structured setting, such as a club or centre, but this could be occurring in a home situation.

Sexual abuse - including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, exposure to pornography or witnessing sexual acts and sexual assault or sexual acts to which the adult has not consented.

Psychological abuse - including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, ‘gaslighting’ and coercion, harassment, verbal abuse, isolation or unreasonable and unjustified withdrawal from services or supportive networks.

Financial or material abuse - including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, such as wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. People with learning disabilities or dementia are particularly vulnerable to this type of abuse; sometimes by perpetrators who befriend victims with the intention of exploiting them.

Discriminatory abuse - including forms of harassment, slurs or similar treatment due to race, gender and gender identity, age, disability, sexual orientation or religion.

Neglect and acts of omission - including ignoring medical, emotional or physical care needs, failure to provide appropriate health and social care and support or educational services; the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Self-neglect – this covers a wide range of behaviour neglecting to care for one’s own personal hygiene, health or surroundings. Self-neglect might indicate that the person is not receiving adequate support or care or could be an indication of poor mental health.

Organisational abuse – including neglect and poor care practice within an institution or specific care setting such as a hospital or care home. This may range from one-off incidents to on-going ill-treatment arising from structure, policies, processes and practices within an organisation.

Modern slavery – encompasses slavery, human trafficking, forced 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.

In terms of recognising abuse, patterns of abuse vary and include:

- Serial abusing in which the perpetrator seeks out and 'grooms' victims. Sexual abuse and financial abuse often follow a sustained pattern of behaviour
- Long-term abuse in the context of an ongoing family relationship such as domestic violence between partners or generations; or
- Opportunistic abuse, such as theft occurring because money or valuable items have been left lying around.

The signs and indicators are similar to those for children and young people but may also include:

- Self-harming;
- A person's belongings or money go missing;
- The person is not attending or no longer enjoying their sessions;
- A person has a fear of a particular group or individual;
- An allegation – someone tells you or another person that they are being abused.

Adults at risk or any adult who finds themselves in vulnerable circumstances are assumed to have the *capacity* to make decisions about their own situation. This requires informed consent from the individual concerned regarding any actions that may be taken regarding concerns or allegations. For example, an adult at risk may choose to remain in an abusive situation, and this will limit how a report or information about concerns is shared.

The Mental Capacity Act 2005 describes *capacity* or *mental capacity* as the ability to make a decision at a particular time and proposes five guiding principles²:

1. **A presumption of capacity:** Every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise; it cannot be assumed that someone cannot make a decision for themselves just because they have a particular medical condition or disability.
2. **Individuals being supported to make their own decisions:** A person must be given all practicable help before anyone treats them as not being able to make their own decisions.
3. **Unwise decisions:** People have the right to make decisions that others might regard as unwise or eccentric.

Where it has been judged, by professionals who are trained and qualified to make such a judgement, that an adult lacks capacity then decisions should consider:

² See <https://www.scie.org.uk/mca/introduction/mental-capacity-act-2005-at-a-glance>

4. **Best interests:** Anything done for or on behalf of a person who lacks mental capacity must be done in their best interests.
5. **Less restrictive option:** Someone making a decision or acting on behalf of a person who lacks capacity must consider whether it is possible to decide or act in a way that would interfere less with the person's rights and freedoms of action, or whether there is a need to decide or act at all.

It is not the responsibility of OPCC staff to judge whether an adult at risk 'lacks capacity' but we should be mindful of our duty of care in considering the individual's wishes outlined in the principles 1. to 3.

Home Office Serious Incident Reporting

The Home Office (and YEF where appropriate) expect the following incidents involving an individual(s) known to a VRU-funded project to be reported:

- homicide as victim or charged as perpetrator.
- is a victim of suicide.
- is a victim or perpetrator of assault amounting to attempted murder.
- is a victim or perpetrator of serious sexual offences including rape.
- safeguarding allegations made against a member of staff funded by the programme.

Beyond these, below are some indicative examples (though not exhaustive) of types of serious incident to report to the Home Office (and YEF where appropriate) where these take place during or on the premises of the project interventions, or where a staff member observes the incident only:

- Use of weapon or possession of offensive weapon, including acid/corrosive substances to cause harm. Report on the possession of weapon only occurs after support has been accepted. Possession should be evidenced (arrested/charged/ convicted) as opposed to just being intel led.
- Abduction or attempted abduction.
- Supplying large quantities of drugs or possession with intent to supply.
- Staff/volunteer being found with child abuse images on device(s).
- Immediate risk (perpetrator and victim) of honour-based violence, criminal and/or sexual exploitation, female genital mutilation. Only report on the risk of exploitation if this risk arises or escalates after the initial reason for referral and is an imminent risk.
- Immediate risk of self-harm requiring hospital support.
- Discovering that an employee or volunteer coming into contact with children or vulnerable adults is a registered sex offender.

Safeguarding and Incident Report Form

Please use this form to record any child protection or safeguarding incidents that:

- directly arise from the Project, are of a high level of severity (please refer to the guidance on the previous page) and fall within any of the Home Office definitions of a 'Critical Incident'³. This should be done within **24 hours** of the incident; or
- (for any incident that is related to the Youth Endowment Fund (YEF)'s own staff, contractors, or YEF-funded staff members of the project) falls within any of the definitions of abuse – please refer to Appendix 1 of the YEF Safeguarding Policy. This should be done within 24 hours of the incident.

In an emergency, do not delay in informing the emergency services.

All the information on this form must be treated as confidential and anonymised. The form should be sent within 24 hours to:

- The relevant Home Office SPOC
- Serious Violence Fund Mailbox SeriousViolenceFund@homeoffice.gov.uk
- YEF Programme Manager (where appropriate if related to a YEF-funded project)
- YEF serious incident mailbox serious.incident@youthendowmentfund.org.uk (where appropriate if related to a YEF-funded project)

When completing this form, keep the information included as factual as possible and do not include any subjective observations e.g. 'the child seemed confused'.

In the event of a critical incident occurring outside of working hours (at weekends and on bank holidays for example) please also copy your form and email to our Emergency Response Team at the Home Office at: PSGERT@homeoffice.gov.uk using the subject header, '**Notification of a Critical Incident to SVRU on call contact**' in your email. If you need to call the team urgently, please do so at: 0300 071 2364.

Please ensure any personal level data i.e. full name, is redacted when submitting the form.

Please complete this form as fully as possible and include any additional information not specified in the template which you believe is relevant to providing the Home Office and YEF (where appropriate) with a comprehensive understanding of any wider risks presented by the incident or its handling.

³ A "Critical Incident" means any incident where the outcome or consequence of that incident is likely to result in serious harm to any individual; or significant community impact; or significant impact on public confidence in the Home Office, including the provision of the Purpose of the Grant. This definition applies to serious Safeguarding incidents, such as those that result from any immediate risk of harm to a child or young person, or those involving any member of staff or volunteer from either the VRU or a delivery partner

Your name and position	
Your email and telephone	
Date of disclosure (or date the funded organisation became aware of the incident)	
Time of disclosure (or time the funded organisation became aware of the incident)	
Location of disclosure (where applicable)	
Date (or range of dates) of incident	
Time of incident (if known)	
Is the incident still ongoing?	
Where did the incident take place?	
Age of the person or persons who have been (or are alleged to have been) abused or mistreated, or who have been involved in the incident	
Describe the connection to the funded organisations of the person(s) who has been or is alleged to have been abused/ mistreated (e.g. beneficiary, trustee, volunteer, staff member) or who have been involved in the incident. Please include how long they have been involved in the programme, what pathway they were in at the time of the incident (e.g. engagement, disengaged, disruption), whether they are still engaging with the programme and if the incident has caused them to move pathways.	
Details of people involved (if known) – please do not provide personal information such as name	
Brief description of incident including:	

<ul style="list-style-type: none"> - type of abuse or mistreatment (e.g. sexual, physical, psychological) - anything said during the incident (verbatim if possible) - physical appearance or behaviour of those involved - observations of parents and/or carers present - The extent of any injuries 	
<p>Please describe any security, safeguarding or safety plan measures that have been put in place or are being considered</p>	
<p>Details of any witnesses including contact details:</p>	
<p>Do you know or suspect that a crime has been committed?</p> <p>If yes, have the police been informed?</p> <p>If yes, what police action has been taken?</p>	
<p>Have you reported the incident to any other regulator(s) or statutory agencies (e.g., the local authority, or clinical commissioning group)?</p>	
<p>Detail the action you have/will take (e.g. notify Home Office SPOC and policy officials (YEF DSO where appropriate), notify project lead)</p>	
<p>Did you notify anyone else? If so, who?</p>	
<p>Any other information (please detail anything else that you believe to be helpful or important) such as: Any changes to the provision to respond to the relevant behaviour.</p> <ul style="list-style-type: none"> - has the young person/people involved in the incident had contact with other VRU services? If so please what form did that contact take, including when it took place, the duration of the contact (e.g. how long they had been receiving interventions), how regularly etc. 	

(if this is not known at the time of the incident report, information can be provided in a follow up to the Home Office by the VRU)	
Are you aware of any arising media coverage?	

Prevention of Violent Extremism – potential indicators of radicalisation

As detailed in the Tees Prevent and Channel Guidance, the following indicators may support professionals to understand and identify factors that may suggest an adult, young person or their family could be vulnerable to being drawn into extremism;

- Identity crisis – distance from culture, religious heritage and uncomfortable with their place in the society around them.
- Personal crisis – family tensions, sense of isolation, adolescence low self-esteem, disassociation from existing friendship groups and becoming involved with a new and different group of friends searching for answers to questions about identity, faith and belonging.
- Personal circumstances – migration, local community tensions, events affecting Country and region of origin, alienation from UK values having a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy, unmet aspirations, perceptions of injustice, perceived grievance, feeling of failure, rejection of civic life, criminality, experiences of imprisonment, poor resettlement, reintegration, previous involvement with criminal groups.

It is however important to note that children and young people may display behaviours indicative of radicalisation for other reasons including:

- Alcohol
- Drug abuse
- Family breakdown / bereavement
- Domestic abuse

The process of radicalisation is different for every individual and can take place over an extended period or within a very short time frame. Potential indicators of radicalisation may include:

- Use of inappropriate language
- Possession or accessing violent extremist literature
- Behavioural changes
- The expression of extremist views
- Advocating violent actions and means
- Association with known extremists
- Articulating support for violent extremist causes or leaders
- Using extremist views to explain personal disadvantage
- Joining or seeking to join extremist organisations
- Seeking to recruit others to an extremist ideology

The examples above are not exhaustive and vulnerability may manifest itself in other ways. It is important to be cautious in assessing these factors to avoid inappropriate

labelling or stigmatising individuals because they possess a characteristic to fit a specific profile.

The risk of radicalisation is the product of a number of factors and identifying this risk requires practitioners to exercise their professional judgements and seek further advice where necessary as it may be combined with other vulnerabilities that need to be considered.

There is no such thing as a typical extremist and those involved in extremism come from a range of backgrounds and experiences.