

Shepshed Word of Life Church

Safeguarding Policy - Adults at Risk (AAR)

Version 0.5 March 2025



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1.0 INTRODUCTION

Safeguarding is a term we use to describe how we protect adults and children from abuse or neglect. Safeguarding is about protecting certain people who may be at risk in certain circumstances. These people may be at risk of abuse or neglect due to the actions (or lack of action) of another person. In these cases, it is vital that we work together to identify people at risk and put steps in place to help prevent abuse or neglect.

Recognising that all human beings are made in the image of God, that each life is of immense value to Him, that our Lord Jesus Christ welcomed all who would come to Him, and that He showed special concern for those at risk, we make it our aim to follow his example. Thus, we at Shepshed Word of Life Church (**SWOLC**) value and encourage the participation in all our activities of people who may be at risk. We are committed to their well-being, to safeguarding their health, safety and general welfare while in the company or care of our employees and volunteers (**workers**).

An AAR (in this document AAR is used for both plural and singular) is a person 18 years or over and has need for care or support and is experiencing or is at risk of experiencing neglect or abuse and as a result of their support needs is unable to protect themselves from either the risk or experience of abuse or neglect. Whether or not a person is at risk in these cases will depend upon the circumstances and each case must be judged on its own merits.

It should be recognised that people with special needs are able to cope perfectly well in many situations, so sensitivity and common sense should be exercised

2.0 PURPOSE

Through the implementation of this policy SWOLC aims to ensure that: -

- All AAR have a safe environment with people they can trust.
- All risks that they encounter are carefully assessed and all necessary steps are taken to minimise and manage them.

This policy sets out agreed guidelines relating to the following areas: -

- Responding to allegations of abuse, including those made against workers
- Recruitment and vetting of workers
- Supervision of organisational activities
- Code of Conduct
- Support and Training

This policy applies to all workers who have contact with AAR. However, it is recognised that, whilst the principles are relevant to all aspects of church life, some aspects of the policy will be more relevant to specific groups and activities. The Safeguarding Lead (**SL**) will define the applicability where it is not clear, considering issues of practicality etc.

3.0 PRINCIPLES

This policy is based on the following principles:

- The prime concern at all stages will be the interests and safety of AAR.
- All AAR have a right to be protected and their decisions respected even if that decision involves risk.
- The aim will be to support and minimise distress to any AAR.
- Everyone will be treated sensitively at all stages of any investigation.
- AAR who have been abused need the same care and sensitivity, whoever the alleged abuser.
- The responsibility to refer the AAR thought to be at risk rests with the person who has the concern.
- Confidential information in the context of an AAR investigation will be shared with the appropriate agencies and any decisions made about sharing this information will give priority to the best interests of the AAR and in consultation with him/her and any representative that may be appointed.
- Procedures provide a framework to ensure that everything possible is done to ensure the protection of AAR.
- AAR have the right to have an independent advocate if they wish, at any stage in the process.
- All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately.
- All workers have a responsibility to report concerns to the SL who has the responsibility for safeguarding AAR.
- Workers are not trained to deal with situations of abuse or to decide if abuse has occurred.

4.0 DEFINITIONS OF ABUSE

Abuse may occur in domestic, institutional and public settings: including their own home or another person's home.

Abuse of AAR occurs in all cultures, all religions and all levels of society. Appendix 1 defines in more detail the various types of abuse that may occur.

5.0 ROLES AND RESPONSIBILITIES

5.1 AAR Safeguarding Head (SH)

The SH must be a Trustee, normally the Pastor. Ultimately, he is responsible for all aspects of Safeguarding AAR at the church. Along with the Elders, he will appoint an AAR Safeguarding Lead (SL).

5.2 AAR Safeguarding Lead (SL)

The role of the SL is to:

- Establish contact with Social Services staff responsible for safeguarding AAR.
- Provide information and advice on safeguarding AAR within the organisation.
- Ensure safeguarding AAR policies and procedures are followed.
- Liaise with statutory organisations as required.
- Keep workers and the Elders informed about any action taken and any further action required.
- Ensure that case records are maintained and stored confidentially.
- Advise the Elders of any safeguarding training needs.

6.0 PROCEDURES

6.1 Recognising and Responding to Abuse

Appendix 2 details the signs that may or may not be indicators that abuse has taken place; however, the possibility of other signs should also be considered.

6.2 Reporting cases of suspected abuse

Concerns **must be reported immediately** to the SL.

If for any reason it is believed that the nominated persons have not responded appropriately to the concerns, Social Services may be contacted directly. It is the right of any individual to make direct referrals to Social Services.

The role of the SL is to:

- Obtain information from workers, the AAR and carers who have safeguarding concerns and to record this information.
- Assess the information quickly and carefully and ask for further information as appropriate.
- Consult with a statutory AAR protection agency such as the local social services department to clarify any doubts or worries.

The SL should make a referral when there is an incident or concern to a statutory adult protection agency or the police without delay.

- Where appropriate a referral should also be made to the ISA (Independent Safeguarding Authority).
- The SL has been nominated by SWOLC to refer allegations or suspicions of neglect or abuse to the statutory authorities. In the absence of the SL the matter should be brought to the attention of one of the Elders.
- Suspicions will not be discussed with anyone other than those nominated above.

6.3 Allegations of physical injury, emotional abuse or neglect

If an AAR has a symptom of physical injury or neglect, where it's not clear that the carers aren't involved (i.e. there's a possibility that the carers may be involved), the SL will:

- Contact Social Services for advice in cases of deliberate injury or concerns about the safety of the AAR. The carers should not be informed by the church in these circumstances.
- Where emergency medical attention is necessary it will be sought immediately. The designated person will inform the doctor of any suspicions of abuse.

In other circumstances the carers should be contacted, and it be suggested that medical help/attention is sought for the AAR. The doctor will then initiate further action if necessary.

- If appropriate, the carer will be encouraged to seek help from Social Services.
- If the carer fails to act, the SL should in cases of real concern contact Social Services for advice.
- Where the SL is unsure whether to refer a case to Social Services then advice from the Elders will be sought.

6.4 Allegations of sexual abuse

In the event of allegations or suspicions of sexual abuse, the SL will:

- Contact the Social Services directly. The SL will not speak to the carer (or anyone else).
- If the SL is unsure whether to follow the above guidance, then advice from the Elders will be sought.
- Under no circumstances should the SL attempt to carry out any investigation into the allegation or suspicions of sexual abuse. The role of the SL is to collect and clarify the precise details of the allegation or suspicion and to provide this information to Social Services whose task it is to investigate the matter.
- Whilst allegations or suspicions of sexual abuse should normally be reported to the SL, their unavailability should not delay referral to Social Services.

6.5 Responding to an AAR making an allegation of abuse

Where an AAR makes a disclosure, the person to whom it is being disclosed should stay calm and **listen carefully to what is being said**.

- Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others. Do not promise to keep secrets.
- Allow the AAR to continue at his/her own pace.
- Ask questions for clarification only and always avoid asking questions that suggest a particular answer.
- Reassure the AAR that they have done the right thing in telling them. Tell them what you will do next and with whom the information will be shared.
- Record in writing what was said using the AAR's own words. As soon as possible, note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated.

There are some helpful statements that a worker may make when listening to an allegation:

- I accept what you say (or similar language which shows acceptance of what the AAR is saying)
- Thank you for telling me
- No-one is blaming you
- I will help you

There are some things that should not be said:

- Why didn't you tell anyone before
- I can't believe it!

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- Are you sure that this is true?
- Why? Who? When? Where?
- Never make false promises

6.6 Recording disclosures

- Make notes as soon as possible (ideally within 1 hour of being told). Write down as exactly as possible what the AAR said and what was said in reply and what was happening immediately before being told (i.e. the activity being undertaken).
- Record the dates, times and when the record was made. All handwritten notes should be kept securely.
- Report the discussion to the SL as soon as possible. However, if this person is implicated, then report to an Elder who will refer it to Social Services.
- Under no circumstances discuss your suspicions or any allegations with anyone other than those nominated above.
- After an AAR has disclosed abuse, the SL should carefully consider whether it is safe for an AAR to return home to a potentially abusive situation. On rare occasions it may be necessary to take immediate action to contact Social Services to discuss putting safety measures into effect.

7.0 RECRUITMENT AND APPOINTMENT OF WORKERS

In approaching workers to participate in activities with AAR, SWOLC will be responsible for the following:

- Identifying the tasks and responsibilities involved and the type of person most suitable for the job.
- Drawing up the selection criteria, based upon appropriate qualifications, skills and experience.
- All workers should set out in writing their personal details, and any previous and current experience relevant to the role.
- Always give proposed workers a copy of the Safeguarding AAR Policy. Appointees should read and signify their agreement with the Policy.
- All workers require an initial DBS check which should be renewed at least every 3 years.
- All workers need to sign a declaration stating that there is no reason why they should be considered unsuitable to work with AAR. The Rehabilitation of Offenders Act (1974) requires that people engaged in activities which give them “substantial, unsupervised access on a sustained or regular basis” to AAR must declare all previous convictions. They are also required to declare any pending case against them. It is important that applicants in this category understand that all information will be dealt with confidentially and will not be used against them unfairly. Such a person will undergo an enhanced DBS check.

8.0 ALLEGATIONS AGAINST A WORKER

SWOLC assures all workers that it will fully support and protect anyone, who in good faith reports his or her concern that a colleague is, or may be, abusing an AAR. Where there is a complaint against a worker, there may be three types of investigation:

- A criminal investigation,
- An AAR protection investigation,
- An internal misconduct investigation.

The results of the police and AAR protection investigation may well influence the internal investigation, but not necessarily.

- In the event of a serious allegation against a worker or another person, the Elders will appoint one of their number to act as a designated support contact for that person, once liaison with the Police and/or Social Services has been established.
- The role of the support contact is to provide an objective and honest point of support, recognising that whether the allegation or suspicion is confirmed, there is a clear duty of pastoral care towards that person. However, it is vital that this does not, or is not perceived to, interfere with any ongoing investigation.
- Every effort should be made to ensure that the church's supportive role is recognised throughout by the statutory agencies, and wherever possible that the Elders and the SL are involved in the decision-making processes.
- Details of allegations and those involved must be kept confidential.

8.1 Action if there are concerns about poor practice

- If, following consideration, the allegation is clearly about poor practice, this will be dealt with as an internal misconduct issue.
- If the allegation is about poor practice by the SL or if the matter has been handled inadequately and concerns remain, it should be reported to the Elders who will decide how to deal with the allegation and whether the church should initiate any further action.

8.2 Action if there are concerns about suspected abuse

- Any suspicion that an AAR has been abused by a worker or another person should be reported to the SL, who will take such steps as considered necessary to ensure the safety of the AAR in question and any other adult who may be at risk.
- The SL will refer the allegation to Social Services who may involve the Police or go directly to them if out-of-hours. The carers of the AAR will be contacted as soon as possible following advice from the Social Services department.
- If the SL is the subject of the suspicion/allegation, the report must be made to an Elder who will refer the allegation to Social Services.

The welfare of the AAR should remain of paramount importance throughout.

9.0 SUPERVISION FOR ACTIVITIES AND SERVICES

SWOLC will aim to protect AAR from abuse and our workers from false allegations by adopting the following guidelines:

- Keep a register of all AAR attending our activities, except for church services.
- Keep a register of all workers.
- Registers will include arrival and departure times and the names of others in the building at the time (e.g. speakers).
- Workers will record any unusual events in a records book (e.g. unusual behaviour by an attendee; arguments between attendees; special comments made by others who bring people to activities; etc.).
- Where possible, workers will not be alone with an AAR, although it is recognised that there may be times when this may be necessary or helpful.
- Workers may escort AAR of the same sex to the toilet but are not expected to be involved with toileting, unless they have a special need that has been brought to our attention by the carer.
- All workers will treat AAR with dignity and respect in attitude, language and actions.

10.0 CODE OF CONDUCT

Workers should not, where practical: -

- Be alone with an AAR unless it is necessary for spiritual or personal counsel – another worker should be advised if this is the case.
- Transport AAR in a car or minibus without another adult being present unless this has been agreed with the person or his/her carer.
- Take an AAR to their home without approval of the SL.
- Make inappropriate contact or develop inappropriate relationships with AAR, including away from the church premises.
- Leave AAR unattended.
- Leave AAR in the presence of anyone not known to the worker.
- Show favouritism to AAR within the church.

11.0 ANTI-BULLYING POLICY

SWOLC does not accept or condone any form of bullying. All forms of bullying will be addressed. Bullying can include:

- Physical pushing, kicking, hitting, pinching etc
- Name-calling, sarcasm, spreading rumours, persistent teasing and emotional torment through ridicule, humiliation and continuing ignoring of individuals
- Racial taunts, graffiti, gestures
- Sexual comments or suggestions
- Unwanted physical contact
- E-mails/ text messages, telephone calls that are not part of the activity or approved by the SL.

Any witnessed or reported incident of bullying will be thoroughly investigated and will involve listening to all those involved.

12.0 SUPPORT AND TRAINING

SWOLC is committed to the provision of Safeguarding training for all workers. All new workers will receive a copy of the latest Safeguarding AAR Policy and will sign a register to confirm that they have read and agreed with it. They will have an opportunity to discuss the policy with the SL.

13.0 NAMED SAFEGUARDING LEAD (SL)

The name of the current SL will be displayed on church noticeboards. The current SL at the date of this version of the policy is Jenny Fredou.

VERSIONS

This policy should be reviewed annually.

| Version | Date | Comments | Status/Amendments |
|----------------|-------------|--|--|
| 0.1 | 2013 | Original template supplied by Roger Hitchings | Initial draft |
| 0.2 | Aug 2015 | Initial amendments to Ver. 0.1 made by Chris Jones | Draft |
| 0.3 | Feb 2017 | Further amendments made to Ver. 0.2 subsequent to Elders' meeting of 7 Feb 2017. | Draft agreed at Elders meeting 25 Feb 2017 |
| 0.4 | Apr 2023 | Amendments including change of title to 'Adults at Risk'. | |
| 0.5 | Mar 2025 | Definition of AAR amended DBS renewed at least every 3 years | Agreed by Officers March 2025 |

APPENDIX 1 - DEFINITIONS OF ABUSE

Domestic violence

Actual or threatened physical, emotional, psychological and sexual abuse which takes place in the context of a close relationship between adults. Domestic violence involves the use of power and exercise of control by one person over another. Abuse is a violation of an individual's human and civil rights by any other person or persons. 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 an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

Abuse can be broadly defined under the following categories:

Physical abuse

The non-accidental infliction of physical force that results (or could result) in bodily injury, pain or impairment.

Examples of behaviour: hitting, slapping, pushing, burning, physical restraint, harassment, enforced sedation, inappropriate use of medication, and catheterisation for management ease.

Sexual abuse

Direct or indirect involvement in sexual activity without consent.

Examples of behaviour:

Non-contact - looking, photography, indecent exposure, harassment, serious teasing or innuendo, pornography.

Contact - coercion to touch or be touched on any sexual organ and may include penetration or attempted penetration of the vulnerable person's body.

Neglect

Ignoring or withholding physical or medical care needs.

Examples of behaviour: failure to provide appropriate food, shelter, heating, clothing, medical care, hygiene, personal care; inappropriate use of medication or over-medication.

Psychological / emotional abuse

Psychological abuse is that which impinges on the emotional health and development of individuals. It also presents with other forms of abuse.

Examples of behaviour: shouting, swearing, insulting, ignoring, threats, intimidation, harassment, humiliation, depriving an individual of the right to choice and privacy.

Financial / material abuse

The unauthorised, fraudulent obtaining and improper use of funds, property or any resources of an AAR.

Examples of behaviour: misappropriating money, valuables or property, forcing changes to will, denying the vulnerable adult the right to access personal funds.

Abuse of individual rights / discriminatory abuse / racial abuse

Abuse of individual rights is a violation of human and civil rights by any other person or persons.

Discriminatory abuse consists of abusive or derisive attitudes or behaviour based on a person's gender, faith or religion, sexuality, ethnic origin, race, culture, age, disability or any other discriminatory abuse.

Professional abuse

Professional abuse is the misuse of therapeutic power and abuse of trust by professionals, the failure of professionals to act on suspected abuse/crimes, poor care practice or neglect in services, resource shortfalls or service pressures that lead to service failure and culpability because of poor management systems/structures.

Examples of behaviour: entering into a sexual relationship with a patient/client, failure to refer disclosure of abuse, poor, ill-informed or outmoded care practice, failure to support vulnerable adult to access health care/treatment, denying AAR access to professional support and services such as advocacy, service design where groups of users living together are incompatible, punitive responses to challenging behaviours, failure to whistle-blow on issues when internal procedures to highlight issues are exhausted.

APPENDIX 2 - SIGNS OF ABUSE

Physical signs of abuse

- Any injuries not consistent with the explanation given for them
- Injuries which occur to the body in places which are not normally exposed to falls or games
- Unexplained bruising, marks or injuries on any part of the body
- Bruises which reflect hand marks or fingertips (from slapping or pinching)
- Cigarette burns
- Bite marks
- Broken bones
- Scalds
- Injuries which have not received medical attention
- Neglect, under nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care
- Repeated urinary infections or unexplained stomach pains

Changes in behaviour which can also indicate physical abuse:

- Fear of parents or carers being approached for an explanation
- Aggressive behaviour or severe temper outbursts
- Flinching when approached or touched
- Reluctance to get changed or remove clothing when they normally would do so, for example, wearing long sleeves in hot weather
- Depression
- Withdrawn behaviour

Emotional signs of abuse

The physical signs of emotional abuse may include:

- A failure to thrive when there is no known physical cause
- Sudden speech disorders
- Persistent tiredness not related to a physical condition

Changes in behaviour which can also indicate emotional abuse include:

- Obsessions or phobias
- Sudden deterioration in performance or lack of concentration
- Inappropriate relationships with others
- Attention seeking behaviour
- Fear of making mistakes
- Self-harm
- Fear of carer being approached regarding their behaviour

Sexual Abuse

The physical signs of sexual abuse may include:

- Pain or itching in the genital/anal area
- Bruising or bleeding near genital/anal areas
- Sexually transmitted disease
- Vaginal discharge or infection
- Stomach pains
- Discomfort when walking or sitting down
- Pregnancy

Changes in behaviour which can also indicate sexual abuse include:

- Sudden or unexplained changes in behaviour e.g. becoming withdrawn or aggressive
- Fear of being left with a specific person or group of people
- Having nightmares
- Eating problems such as over-eating or anorexia
- Self-harm or mutilation, sometimes leading to suicide attempts
- Saying they have secrets they cannot tell anyone about
- Substance or drug abuse
- Suddenly having unexplained sources of money

Neglect

The physical signs of neglect may include:

- Constant hunger, sometimes stealing food from others
- Constantly dirty or smelly
- Loss of weight or being constantly underweight where there is no underlying physical cause
- Inappropriate dress for the conditions

Changes in behaviour which can also indicate neglect include:

- Complaining of being tired all the time where there is no known physical cause
- Not requesting medical assistance and/or failing to attend appointments
- Mentioning being left alone or unsupervised