Children/Young People and Adults Protection and Safeguarding Policy

1.1. Introduction

NSCM recognises its responsibilities in safeguarding and take all reasonable steps to promote safe practice, to protect young people and adults from abuse, neglect, and exploitation.

We adhere to the principle that "safeguarding is everyone's responsibility" and we all have a role to play. Safeguarding includes measures to prevent or minimise the potential for abuse to occur. Protection is a statutory responsibility in response to individual cases where risk of harm has been identified.

This policy applies to all staff, the term staff will be used throughout this policy and will include will staff working directly or indirectly with young people/adults and who are employed by NSCM and those working on behalf of NSCM such as agency workers and volunteers.

The aim of this policy is to ensure safeguarding issues are identified at the earliest opportunity and referred appropriately where necessary and that staff are competent and confident in contributing to multi-agency meetings, in the best interest of young people/adults.

Local authorities have Local Safeguarding Children Partnership to support effective interagency working, their responsibilities are set out in the statutory guidance 'Working Together to Safeguard Children' (2023).

The nature of NSCM business means we work with young people/adults who are moving towards independence. They may have been abused, neglected and / or exploited in the past or are at risk and their behaviour may be indicative of abuse and trauma suffered. We expect to receive a full risk assessment at the point of referral, to guide our efforts to safely support young people/adults in our care.

NSCM staff are trained and recruited via a safer recruitment process to work with young people/adults in line with our Statement of Purpose. Candidates are interviewed and recruited by a panel which includes at least one member who has undertaken Local Safeguarding Children Partnerships (LSCP) or nationally recognised safer recruitment training.

1.2. NSCMs safeguarding culture and ethos.

Regulation 5

We have developed a safeguarding culture and ethos across NSCM and to achieve and maintain a safeguarding culture and ethos staff will:

- Listen to, respect, and involve young people/adults in the decisions about their supported accommodation package and service development.
- Build positive relationship with young people/adults and listen to concerns young people/adults express about their safety and support them to be aware and manage their safety both inside and outside.
- Encourage young people/adults to develop positive relationships with multi-agency professionals, outreach floating support staff.

- Support young people/adults to access advocacy services, Independent Reviewing Officers, placing authority, and Ofsted if they have concerns about their safety.
- Encourage open communication between young people/adults, staff, placing authority and multi-agency professional working with young people/adults promoting a culture of trust and support.
- Implement preventative measures to minimise risks, manage their own safety, and promote the well-being of young people/adults in supported accommodation.
- Build and maintain good professional relationships with multi agency organisations that can support and help young people/adults.
- Have access to and complete up to date training to enhance their skills in recognising signs of abuse, neglect, and exploitation, as well as understanding the unique risks faced by vulnerable young people/adults.
- Have regular supervision and are aware of their responsibilities in relation to safeguarding and the steps required to protect and prevent harm
- Have clear reporting and follow up procedures for staff to follow when they suspect abuse, neglect, or exploitation, including escalation process to NSCMs Lead Safeguarding Designated officer, placing authority and Ofsted without delay.
- Have clear policies and procedures that outline the responsibilities and expectations
 of staff regarding safeguarding and protection and that staff understand them.
- Have access to polices & procedures that are reviewed and updated annually to ensure they remain relevant and effective in addressing emerging risks and challenges.

1.3. Working Together

Regulation 5

Working together with multi-agency professionals is crucial in safeguarding and protecting young people/adults.

It is the responsibility of all professional agencies to work together to identify and address young people/adults needs and manage risks. The placing authority, health care professional, police and other relevant multi-agency professionals will ensure that there is a coordinated and effective response to safeguarding and protecting young people/adults.

By sharing information and expertise, we can work towards ensuring that young people/adults are supported, empowered, and able to thrive in a safe and nurturing environment.

Working together with multi-agency professionals is one of NSCMs core principles, it is embedded in our day-to-day practice, and this is referenced throughout our policies and procedures.

The duties and responsibilities of local authorises and others who deliver services to children and YP with regard to safeguarding, are set out in the statutory guidance 'Working Together to Safeguard Children' (2023).

1.4. NSCMs Responsibilities

NSCM acknowledges its responsibility and takes all reasonable steps to promote safe practice, to safeguard and protect young people/adults from harm, abuse, or exploitation.

To safeguard young people/adults NSCM will ensure:

- Safe recruitment standards are always applied, checking the suitability and experience of candidates to work with vulnerable young people/adults.
- Checking candidates work and personal histories through Enhanced CRB.

- All staff have an induction covering Safeguarding, Child Protection and ongoing training and refresher updates.
- All staff receive appropriate training from LSCP's or nationally recognised provider in Safeguarding and Child Protection as part of their induction programme.
- Support and supervise staff to identify ongoing and future Safeguarding and Child Protection training.
- Continue to develop procedures for identifying and to report cases, or suspected cases, of abuse in line with current legislation.

To properly safeguard and protect young people/adults, staff need to:

- Understand their role and responsibilities for safeguarding young people/adults.
- Be aware and recognise safeguarding, child protection and adult protection concerns.
- Know how to refer their concerns and be clear about arrangements that exist for seeking advice within NSCM.
- Contribute to whatever actions are needed to safeguard and protect young people/adults.
- Work co-operatively with placing authority and multi-agency professionals.
- Raise awareness of safeguarding issues and equip young people/adults with the skills needed to keep themselves safe.
- Support young people/adults who have been abused to implement, his/her agreed plan.
- Establish a safe environment in which young people/adults can learn and develop.

Regional managers must notify the registered service manager (NSCM lead designated safeguarding officer) and refer safeguarding and child protection concerns, by phone and followed up in writing to the allocated placing authority or duty team and Ofsted without delay:

- If young people/adults are involved, suspected of or subject to being involved in, exploitation.
- Police involvement occurs which the regional manager considers to be serious.
- There is an allegation of abuse against staff.
- Any other incident relating to young people/adults which the regional manager considers to be serious.

Regional managers will contribute to whatever actions are needed and agreed, to safeguard and protect young people/adults in the care of NSCM.

NSCM recognise that because of the day-to-day contact with young people/adults' staff are well placed to observe the outward signs of abuse. We recognise that young people/adults regardless of age, disability, gender, racial or ethnic origin, religious belief or sexual identity have a right to protection from harm or abuse.

We will therefore:

- Establish and maintain an environment where young people/adults feel secure, are encouraged to talk, and are listened to.
- Ensure young people/adults know where to go, or who to approach to disclose issues of abuse provide practical help and support for young people/adults to develop the skills they need to recognise and stay safe from abuse.

- Work closely with other agencies involved in the care of young people/adults in ways
 which promote their own protection and safety whilst considering young
 people/adults human rights to dignity privacy and confidentiality.
- Notify placing authority if there are any unexplained absences.
- Notify placing authority if there are any significant changes in circumstance or behaviour which give cause for concern for the safety of the young person/adult or are deemed to be possible signs of abuse.
- If there are any significant changes in circumstance or behaviour which give cause for concern for the safety of young people/adults or are deemed to be possible signs of abuse.
- Developing effective links with relevant multi-professional agencies.
- Co-operate as required with enquiries regarding safeguarding and child or adult protection matters.
- Attend case conferences.
- Keep written records of concerns about young people/adults, even where there is no need to refer the matter immediately.
- Ensure all records are kept securely, in line with data storage procedures.
- Investigate where an allegation is made against a member of staff or contractor working on NSCM behalf.

1.5. Good practice – safe care practice

These guidelines have been developed to:

- Set out guidance, procedures and protocols ensuring that young people/adults and staff are aware of the boundaries within which staff work and young people/adults are supported.
- Provide advice which will help to protect young people/adults.
- Help identify any practices which are or may be interpreted as abuse.
- Help identify behaviours which may be a sign of abuse.
- Reduce the possibility of anyone using their role within NSCM to gain access to young people/adults to abuse them.
- Give clear procedures to adopt which do not jeopardise the investigation of abuse.
- Provide a safe and supportive environment for young people/adults to disclose issues of abuse.

While it is not intended that this code should restrict staff's normal ways of working, e.g., comforting a distressed young person/adult, there is much that can be done to avoid situations which may give rise to misinterpretation, which will also work to protect young people/adults.

Staff should:

- Empower young people/adults to take positive risks by identifying the benefits and harm which could result from an activity, action, and choices being made.
- Consider how an action or activity may be perceived, as opposed to how it may be intended.
- Never enter a young person/adult's room without a co-worker present and only in an emergency or where this has been agreed by the young person/adult.
- Never agree to do things of a personal nature for young people/adult's such as toileting, bathing, personal care or changing nappies of for their baby/child. These must always remain the responsibility of young people/adults, though verbal support and encouragement should be given.

- Always listen to what young people/adults have to say if they are disclosing information.
- Listen to young people/adults' point of view when designing services to meet their needs, take account of their wishes and feelings in decision making.
- Develop a culture in which staff feel comfortable enough to point out inappropriate attitudes and behaviours to each other.
- Develop an open and honest working relationship with young people/adults where they feel able to stay in touch and check in with staff if they are out for the day.
- Not engage in or allow any sexually provocative games involving or observed by young people/adults, whether based on talking or touching.
- Never make suggestive remarks or discriminatory comments to young people/adults.
- Not engage in or tolerate any bullying of young people/adults, either by adults or other youths.
- Always treat young people/adults with respect, regardless of age, gender, sex, ethnicity, disability, religious beliefs, or sexual identity.
- Never trivialise abuse.
- Never let allegations by young people/adults go unreported; including any made against themselves.
- Report missing and unauthorised absences to the placing authority, and police.
 Notify Ofsted where this is deemed to be serious.
- Always bring all safeguarding and child/ young people protection issues / concerns to the attention of the regional manager.
- Read, understand, and follow NSCM staff Code of Conduct.

1.6. **Legal Definition**

(1) Child (includes young people) - Child Protection

A child is legally defined as any person under the age of 18. The fact that a child/YP has reached 16 years of age, is living independently or is in further education, is member of the armed forces, is in hospital or in custody in the secure estate for children and young person, does not change his or her status or entitlement to service or protection under the <u>Children Act 1989</u>.

Children are deemed to be in need protection if they have suffered or likely to suffer significate harm. Section 47 of the Children Act 1989 gives Local Authorities the duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering or likely to suffer significate harm.

The overarching statutory guidance is outlined in "Working Together to Safeguard Children" (2023) and for children in care in "Promoting the Health and Wellbeing of Looked after Children" (2015).

(2) Adults – Safeguarding

A vulnerable adult is someone aged 18 years or over who 'is or may be in need of community care services by reasons of mental health <u>Mental Capacity Act 2005</u> and Deprivation of Liberty Safeguards or other disability, age or illness' and 'is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

Adult safeguarding is the process of protecting adults with care and support needs from abuse or neglect. The Care Act 2014 puts adult safeguarding on a legal footing and from

April 2015 local authorities have specified responsibilities for the protection and welfare of vulnerable adults.

The statutory guidance enshrines the six principles of safeguarding:

- (a) Empowerment: presumption of person led decisions and informed consent.
- (b) Prevention: it is better to take action before harm occurs.
- (c) Proportionality: proportionate and least intrusive response appropriate to the risk presented.
- (d) Protection: support and representation for those in greatest need.
- (e) Partnerships: local solutions through services working with their communities.
- (f) Accountability: accountability and transparency in delivering safeguarding.

This signals a major change in practice; a move away from the process-led, tick box culture to a person-centred approach which achieves the outcomes that people want. Staff must take a flexible approach and work with the adult all the way through the enquiry and beyond where necessary.

1.7. Definition of Abuse – Children and Young People

It is generally accepted that there are four main forms of abuse against children / young people. The following definitions are based on those <u>from "Working Together to Safeguard Children"</u>. (2023)

(1) Physical Abuse

May involve, hitting, shaking, throwing, poisoning, burning, or scalding, drowning, suffocating, or otherwise causing physical harm to a child/young person. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately causes ill health to, a child/young person whom they are looking after.

(2) Emotional Abuse

Persistent emotional ill treatment of a child/young person: such as to cause severe and persistent adverse effects on the child/young person emotional development. It may involve making a child/young person feel or believe that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person. It may include not giving the child/young person opportunities to express their views, deliberately silencing them or 'making fun' of what they say or communicate. It may feature age or developmentally inappropriate expectations being imposed on the child/young person. It may also involve causing a child/ young person to frequently feel frightened or in danger, or the exploitation or corruption of a child/young person. Some level of emotional abuse is involved in all types of ill treatment of a child/young person, though it may occur alone.

(3) Sexual Abuse

Involves forcing or enticing a child/young person to take part in sexual activities, regardless of whether the child/young person is aware of, or consents to, what is happening. The activities may involve physical contact, including penetrative acts such as rape, buggery or oral sex or non-penetrative acts such as fondling, masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving the child/young person in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging the child/young person to behave in sexually inappropriate ways or grooming a child/young person in preparation for abuse (including via social media and the internet). Boys and girls can be

sexually abused by males and/or females, by adults and by other children/young people and by people from all different walks of life.

Grooming is the term used to describe the befriending of a child/young person with the purpose of sexually abusing or exploiting a child/young person.

(4) Neglect

Neglect is the persistent failure to meet a child/young person basic physical and/or psychological needs, likely to result in the serious impairment of the child/young person health or development. Neglect may occur during pregnancy because of maternal substance misuse. Once the child is born, neglect may involve a parent or carer failing to provide adequate food; shelter and clothing, leaving a young child "home alone" or the failure to ensure a child/young person gets appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child/young person's basic emotional needs.

(5) Bullying

Bullying is not an official definition of child/young person abuse, but is damaging, harmful and oppressive.

Bullying may be defined as deliberately hurtful, hostile, and aggressive behaviour towards another person. Usually repeated over a period, where it is difficult for those being bullied to defend themselves. The outcome is usually painful and distressing for the victim. Bullying can escalate rapidly and can damage the child/young person significantly.

Bullying may take many forms and may include:

- (a) Physical bullying
- Unprovoked assault on a child/young person or group which can range from a 'prod' to grievous bodily harm.
 - (b) Psychological
- Reduction of a child/young person's self-esteem or confidence through threatening behaviour, taunting, or teasing about race, gender, sexual orientation, disability, family circumstances, appearance, or any other feature of their lives.
 - (c) Social Ostracism/rejection by peer group.
 - (d) Verbal
- The use of language in a derogatory or offensive manner, such as swearing, racist or sexist abuse, homophobic abuse, sexual innuendo, spreading rumours, etc.
 - (e) Homophobic bullying
- Any hostile or offensive action against lesbians, gay males, bisexuals or transgender or those perceived to be lesbian, gay, bisexual, or transgender.
 - (f) Cyber bullying
- The use of mobile phones and the internet to deliberately upset someone else.

(6) Online abuse

Online abuse is any sort of abuse that occurs via the internet, via any devise that is connected to the internet. This may include:

Cyberbullying

- Emotional abuse
- Grooming
- Sexual abuse

1.8. Recognising signs of abuse

Recognising child/young people abuse is not easy, and it is not an individual member of staff responsibility to decide whether child/young person abuse has taken place or if a child/young person is at significant risk. Staff do, however, have a responsibility to act if they have a concern and to share these concerns with the regional manager who is the named designated safeguarding officer for the region.

NSCM are also aware that a child/young person from minority ethnic group, disabled child/young person and a child/young person with learning difficulties are more vulnerable to this form of abuse and may well be targeted. Staff should be aware at all times of the vulnerabilities of this group of children/young people.

These indicators are not meant to be definitive but only to serve as a guide to assist staff. It is important to remember that many children/young people will exhibit some of these indicators at some time, and that the presence of one or more should not be taken as proof that abuse is occurring. There may well be other reasons for changes in behaviour such as a death or the birth of a new baby in their family, relationship problems between their parents/carers etc.

This information should be assessed, where possible in conjunction with historical information, information provided by the placing authority and multi-agency professionals involved in the care and support of the child/young person, promoting a multidisciplinary approach to child protection issues.

The following information should help staff to be more alert to the signs of possible abuse.

(a) Physical Abuse

Most children/young people will collect cuts and bruises in their daily life. These are likely to be in places where there are bony parts of their body, like elbows, knees, and shins. Some children/young people, however, will have bruising which can almost only have been caused non-accidentally. An important indicator of physical abuse is where bruises or injuries are unexplained, or the explanation does not fit the injury or when it appears on parts of the body where accidental injuries are unlikely, e g, on the cheeks or thighs. A delay in seeking medical treatment when it is obviously necessary is also a cause for concern. Bruising may be more or less noticeable on a child/young person with different skin tones or from different racial groups and specialist advice may need to be taken.

The physical signs of abuse may include:

- 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.

Changes in behaviour which can also indicate physical abuse:

- Fear of parents/carers being approached for an explanation.
- Aggressive behaviour or severe temper outbursts.
- Flinching when approached or touched.
- Reluctance to get changed, for example in hot weather.
- Depression.
- Withdrawn behaviour.
- Running away from home.

(b) Emotional Abuse

Emotional abuse can be difficult to measure, and often children/young people who appear well cared for may be emotionally abused by being taunted, put down or belittled. They may receive little or no love, affection or attention from their parents or carers. Emotional abuse can also take the form of a child/young person not being allowed to mix/play with other children/young people.

The physical signs of emotional abuse may include:

- A failure to thrive or grow, particularly if the child/young person puts on weight in other circumstances e.g., in hospital or away from their parent's care.
- Sudden speech disorders.
- Developmental delay, either in terms of physical or emotional progress.

Changes in behaviour which can also indicate emotional abuse include:

- Neurotic behaviour e.g., sulking, hair twisting, rocking.
- · Being unable to play.
- Fear of making mistakes.
- Self-harm.
- Fear of parent being approached regarding their behaviour.

(c) Sexual Abuse

Adults use children/young people to meet their own sexual needs, abuse both girls and boys of all ages, including infants and toddlers. Usually, in cases of sexual abuse it is the child/young person's behaviour which may cause you to become concerned, although physical signs can also be present. In all cases, a child/young person who tells about sexual abuse do so because they want it to stop. It is important, therefore, that they are listened to and taken seriously.

The physical signs of sexual abuse may include:

- Genital area pain, itching, bruising, or bleeding near genital area.
- 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 aggressive or withdrawn.
- Fear of being left with a specific person or group of people.
- Having nightmares.

- Running away from home.
- Sexual knowledge which is beyond their age, or developmental level.
- Sexual drawings or language.
- Bedwetting.
- Eating problems such as overeating 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.
- Not allowed to have friends (particularly in adolescence).
- Acting in a sexually explicit way towards adults.
- Neglect

Neglect can be difficult to recognise yet has some of the most lasting and damaging effects on children/young people.

The physical signs of neglect may include:

- Constant hunger, sometimes stealing food from other children/young people.
- · Constantly dirty or 'smelly'.
- Loss of weight or being constantly underweight.
- Inappropriate dress for the conditions.
- Changes in behaviour which can also indicate neglect may include:
- Complaining of being tired all the time.
- Not requesting medical assistance and/or failing to attend appointments.
- Having few friends, mentioning being left alone or unsupervised.

(d) Bullying

Bullying can take many forms and a child/young person may be reluctant or scared to discuss what is happening. The impact of bullying can have lasting and damaging effects and, in some case, extreme consequence as the child/young person may attempt to commit suicide or take their own life.

The signs of bullying may include:

- Unexplained bruising, marks, or injuries on any part of the body
- · Self-harm.
- Fear of parent being approached regarding injuries or behaviour.

Changes in behaviour which can also indicate bullying:

- Fear of being approached for an explanation.
- Sudden or unexplained changes in behaviour e.g., becoming aggressive or withdrawn.
- Depression.
- Withdrawn behaviour.
- Suddenly needing more money or stealing money.

Note: NSCM lead designated safeguarding officer (registered service manager) will, from time to time, issue new safeguarding documents, research material or legislative changes; these should be read in conjunction with NSCM Safeguarding and Child Protection Policy.

(e) Online abuse

If a child/young person is experiencing online abuse, they may be:

- More secretive about when using the internet.
- Spend more time or less time than usual online.
- Appear upset, angry, or agitated after using the internet.

(f) Forced Marriage

Forced marriage is when pressure is applied to a child/young person or adult marrying against their will. Pressure may be applied, for example emotionally, physically, or using violence or sexual violence. Warning signs that a child/young person has been forced into a marriage include:

- Absence or truancy.
- Health issues e.g., eating disorder, depression, and attempted suicide.
- Poor performance at school / college.
- Announcement of a sudden engagement to a stranger.
 - (g) Female Genital Mutilation (FGM)

World Health Organisation definition:

'Comprises all procedures (not operations) that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons.' (WHO – 2008)

Female genital mutilation (FGM) is child/young person abuse and constitute significant harm. The practice of FGM, has serious short and long term medical and psychological implications. We also recognise the practice of FGM in the UK is a criminal offence.

Female Genital Mutilation is a form of child/young people abuse.

For more details please refer to the <u>'Multi agency statutory guidance on female genital mutilation'</u>

1.9. Definition of Abuse - Adults

A vulnerable adult is someone over 18 who may require community care services and may be being cared for by NSCM. Adults with care and support needs or adults with disabilities are more likely to be abused or neglected. They may be considered an easy target and can be less likely to identify or report abuse themselves. Adults with communication difficulties can be at risk particularly, because they may be unable to alert others. Sometimes they may not even be aware that they are being abused, and this is especially likely if they have a cognitive impairment. Abusers may try to prevent access to the adults they abuse.

Signs of abuse can often be difficult to detect. Staff who encounter adults with care and support needs should be aware and able to identify abuse and recognise possible indicators.

Abuse is the violation of an individual's human and civil rights by another person or persons. It may involve something that is done to the person, or something not done when it should have been.

(a) Physical Abuse

This can include being assaulted, hit, slapped, pushed, restrained, being forcibly fed, or withholding of food or not being helped to go to the bathroom when needed. It can also include misuse of medication.

(b) Psychological or Emotional Abuse

This may include someone emotionally abusing or threatening to hurt or abandoning someone, humiliating, or blaming, controlling, intimidating or harassment. It also includes verbal abuse, cyber bullying and isolation, or an unreasonable and unjustified withdrawal of help, services, or support networks.

(c) Domestic Abuse

Domestic violence and abuse include 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 physical or sexual abuse, violent or threatening behaviour, psychological, emotional, and so called 'honour' -based violence, female genital mutilation and forced marriage.

Coercive or controlling behaviour is a core part of domestic violence and behaviour may 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.

(d) Sexual Abuse

This may include indecent exposure, sexual harassment, inappropriate looking or touching, as well as rape. Sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts. Non-consensual sexual acts that the adult has not agreed to or is pressured into consenting to all count as sexual abuse.

(e) Neglect

Neglect is also a form of abuse. Neglect includes not being provided with enough food or the right kind of food, or not being taken proper care of. Leaving you without help to wash or change dirty or wet clothes, not getting you to a doctor when you need one, or not making sure you have the right medicines all count as neglect.

(f) Financial or material abuse

This could be someone stealing money or other valuables, or it might be someone who is appointed to look after money preventing a person from accessing their own money, benefits, or assets. Using the money inappropriately or coercing the person into spending it in a way they are not happy with. Moving into a person's home and living rent free without agreement or under duress.

Internet scams and doorstep crime are also common forms of financial abuse.

(g) Modern slavery

This may involve:

- Human trafficking is considered a form of modern slavery. Trafficked young people/adults are vulnerable to all types of abuse e.g., prostitution, forced marriage, criminal activity, domestic servitude.
- Forced labour.
- 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.

1.8. Recognising signs of abuse – Adults

These indicators are not definitive and only to serve as a guide to assist staff. It is important too, to remember that vulnerable adults will exhibit some of these indicators at some time, and that the presence of one or more should not be taken as proof that abuse is occurring. Staff should always be mindful that there may well be other reasons for changes in behaviour. This information should be assessed, where possible in conjunction with historical information, information provided by multi-agency professionals involved in the care and support of adults, promoting a multidisciplinary approach to adult protection issues.

The following information should help staff to be more alert to the signs of possible abuse.

(a) Physical Abuse

This may include:

- No explanation for injuries or inconsistency with the account of what happened.
- Injuries are inconsistent with the person's lifestyle.
- Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps.
- Frequent injuries.
- Unexplained falls.
- Subdued or changed behaviour in the presence of a particular person.
- Signs of malnutrition.
- Failure to seek medical treatment or frequent changes of GP.

(b) Psychological and Emotional Abuse

This may include:

- An air of silence when a particular person is present.
- Withdrawal or change in the psychological state of the person.
- Insomnia.
- Low self-esteem.
- Un-cooperative and aggressive behaviour.
- A change of appetite, weight loss/gain.
- Signs of distress: tearfulness, anger.
- Apparent false claims, by someone involved with the person, to attract unnecessary treatment.

(c) Domestic Abuse

This may include:

- Low self-esteem.
- Feeling that the abuse is their fault when it is not.
- Physical evidence of violence such as bruising, cuts, broken bones.

- Verbal abuse and humiliation in front of others.
- Fear of outside intervention.
- Damage to home or property.
- Isolation not seeing friends and family.
- Limited access to money.

(d) Sexual Abuse

This may include:

- Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck
- Torn, stained or bloody underclothing.
- Bleeding, pain or itching in the genital area.
- Unusual difficulty in walking or sitting.
- Foreign bodies in genital or rectal openings.
- Infections, unexplained genital discharge, or sexually transmitted diseases.
- Pregnancy in a woman who is unable to consent to sexual intercourse.
- The uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude.
- Incontinence not related to any medical diagnosis.
- Self-harming.
- Poor concentration, withdrawal, sleep disturbance.
- Excessive fear/apprehension of, or withdrawal from, relationships.
- Fear of receiving help with personal care.
- Reluctance to be alone with a particular person.

(e) Neglect

This may include:

- Constant hunger, sometimes stealing food from other young people/adults.
- Constantly dirty or 'smelly'.
- · Loss of weight or being constantly underweight.
- Inappropriate dress for the conditions.
- Not requesting medical assistance and/or failing to attend appointments.
- Having few friends, mentioning being left alone or unsupervised.

(f) Financial or material abuse

This may include:

- Missing personal possessions.
- Unexplained lack of money or inability to maintain lifestyle.
- Unexplained withdrawal of funds from accounts.
- Power of attorney or lasting power of attorney (LPA) being obtained after the person has ceased to have mental capacity.
- The person allocated to manage financial affairs is evasive or uncooperative.
- The family or others show unusual interest in the assets of the person.
- Signs of financial hardship in cases where the person's financial affairs are being managed by a court appointed deputy or attorney.
- Recent changes in deeds or title to property.
- Rent arrears and eviction notices.
- A lack of clear financial accounts held by a care home or service.

- Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person.
- Disparity between the person's living conditions and their financial resources, e.g., Insufficient food in the house.
- Unnecessary property repairs.
 - (g) Modern slavery

This may include:

- Signs of physical or emotional abuse.
- Appearing to be malnourished, unkempt or withdrawn.
- Isolation from the community, seeming under the control or influence of others.
- Living in dirty, cramped, or overcrowded accommodation and or living and working at the same address.
- Lack of personal effects or identification documents.
- Always wearing the same clothes.
- Avoidance of eye contact, appearing frightened or hesitant to talk to strangers.
- Fear of law enforcers.

1.9. Consequence of child/young people and adult abuse

Abuse has long-lasting consequences for the child /young person and adult concerned such as

- Alcohol misuse.
- Substance misuse.
- Mental ill- health.
- Physical ill-health.

Even if a child/YP or adult is not directly involved with the abuse, witnessing it can still have damaging consequences.

Long lasting, traumatic, negative effects, which may damage a child/young pesron's and adult's physical, social, and emotional development may be linked to

- Chronic health conditions.
- Low life potential.
- Early death.

Some children /young people and adults may go onto develop Post Traumatic Stress Disorder (PTSD), leading to for example:

- Anxiety
- Bedwetting.
- Poor concentration.
- Eating disorders.
- Irritability.
- Nightmares

These may continue throughout their childhood and into their adult life.