

# 1. Children/Young People and Adults Protection and Safeguarding Policy (Regulation 20)

## 1.1. Introduction

NSCM recognises its responsibilities in safeguarding and take all reasonable steps to promote safe practice, to protect YP/A 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 working directly or indirectly with YP/A and who are employed by NSCM and those working on behalf of NSCM such as agency workers and volunteers.

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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 YP/A.

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.

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) .

## 1.2. NSCMs Safeguarding culture and ethos (Regulation 5)

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

- Listen to, respect, and involve YP/A in the decisions about their supported accommodation package and service development.
- YP/A advised of safe space being in the staff office or their own bedroom within shared accommodation. Whilst in solo accommodation YP/A the property as a whole is a safe space.
- Build positive, stable relationships with YP/A and listen to the concerns of YP/A on their safety and support them to be aware and manage their safety both inside and outside.
- Vigilant and notice when things are troubling YP/A.
- Encourage YP/A to develop positive relationships with multi-agency professionals, outreach floating support staff.
- Support YP/A how to access advocacy services, Independent Reviewing Officers, placing authority, and Ofsted if they have concerns about their safety.
- Encourage open communication between YP/A, staff, placing authority and multi-agency professional working with YP/A promoting a culture of trust and support.
- Implement preventative measures to minimise risks, manage their own safety, and promote the well-being of YP/A in supported accommodation.
- Build and maintain good professional relationships with multi agency organisations that can support and help YP/A.
- 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 YP/A. (Staff should refer NSCM P&Ps, Section 8 Staff, Workforce and Continuous Professional Development Strategy, Workforce Plan and Training, Learning and Development Policy)
- Have regular supervision and are aware of their responsibilities in relation to safeguarding and the steps required to protect and prevent harm. (Staff should refer NSCM P&Ps, Section 8 Staff, Staff Supervision and Support)
- 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 policies & 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 of YP/A. It is the responsibility of all professional agencies to work together to identify and address YP/A 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 YP/A. By sharing information and expertise, we can work towards ensuring that YP/A 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 authorities 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 YP/A from harm, abuse, or exploitation.

To safeguard YP/A NSCM will ensure:

- Safe recruitment standards are always applied, checking the suitability and experience of candidates to work with YP/A.
- 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 LSCB'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 YP/A, staff need to:

- Understand their role and responsibilities for safeguarding YP/A.
- 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 YP/A.
- Work co-operatively with placing authority and multi-agency professionals.
- Share information and data about safeguarding issues and concerns.
- Raise awareness of safeguarding issues and equip YP/A with the skills needed to keep themselves safe.
- Support YP/A who have been abused in accordance with his/her agreed plan.
- Establish a safe environment in which YP/A can learn and develop.

RMs must refer safeguarding and child protection concerns, by phone and followed up in writing to the RSM who is also NSCM nominated safeguarding lead officer, the placing authority or duty team and Ofsted without delay:

- If YP/A are involved, suspected of or subject to being involved in, exploitation.
- Police involvement occurs which the RMs considers to be serious.
- There is an allegation of abuse against staff.
- Any other incident relating to YP/A which the RM considers to be serious.

RMs will contribute to whatever actions are needed and agreed, to safeguard and protect YP/A in the care of NSCM.

NSCM recognise that because of the day-to-day contact with YP/A staff are well placed to observe the outward signs of abuse. We recognise that YP/A 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 YP/A feel secure, are encouraged to talk, and are listened to.
- Ensure YP/A know where to go, or who to approach to disclose issues of abuse provide practical help and support for YP/A to develop the skills they need to recognise and stay safe from abuse.
- Work closely with other agencies involved in the care of the YP/A in ways which promote their own protection and safety whilst considering YP/A 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 YP/A or are deemed to be possible signs of abuse.
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- 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 records of an allegation, and the action taken in response.
- Keep written records of concerns about YP/A, 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 YP/A and staff are aware of the boundaries within which staff work and YP/A are supported.
- Provide advice which will help to protect YP/A.
- 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 YP/A, to abuse them.
- Give clear procedures to adopt which do not jeopardise the investigation of abuse.
- Provide a safe and supportive environment for the YP/A 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 YP/A, there is much that can be done to avoid situations which may give rise to misinterpretation, which will also work to protect YP/A.

Staff should:

- Empower YP/A to take positive risks by identifying the benefits and harm which could result from an activity, action, and of choices being made by the YP/A.
- Consider how an action or activity may be perceived, as opposed to how it may be intended.

Never enter a YP/A room without a co-worker present and only in an emergency or where this has been agreed by YP/A.

- Never agree to do things of a personal nature for a YP/A such as toileting, bathing, personal care or changing nappies of YP/A child/YP. These must always remain the responsibility of YP/A, though verbal support and encouragement should be given.
- Always listen to what YP/A have to say if they are disclosing information.
- Listen to YP/A 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 YP/A 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 YP/A, whether based on talking or touching.
- Never make suggestive remarks or discriminatory comments to YP/A.
- Not engage in or tolerate any bullying of YP/A, either by adults or other youths.

- Always treat YP/A with respect, regardless of age, gender, sex, ethnicity, disability, religious beliefs, or sexual identity.
- Never trivialise child or YP/A abuse.
- Never let allegations by YP/A go unreported; including any made against themselves.
- Report missing and unauthorised absences to the placing authority and police.
- Always bring all safeguarding and child / YP/A protection issues / concerns to the attention of the RM or RSM in the RMs absence.
- Read, understand, and follow NSCM staff Code of Conduct.

## 1.6. Legal Definition

### 1.6.1. 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 [Children Act 1989](#).

Children are deemed to be in need protection if they have suffered or likely to suffer significant 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 significant 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).

### 1.6.2. Adults – Safeguarding

An adult at risk is someone aged 18 years or over who 'is or may be in need of community care services by reasons of mental health [Mental Capacity Act 2005](#) 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 adults at risk.

The statutory guidance enshrines the six principles of safeguarding:

- Empowerment: presumption of person led decisions and informed consent.
- Prevention: it is better to act before harm occurs.
- Proportionality: proportionate and least intrusive response appropriate to the risk presented.

- Protection: support and representation for those in greatest need.
- Partnerships: local solutions through services working with their communities.
- 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 / Person (YP)

The following definitions are based on those [from "Working Together to Safeguard Children". \(2023\)](#)

**Abuse:** Mistreatment towards a child/YP can manifest in various ways. Someone might harm or neglect a child/YP through direct actions causing injury, or by neglecting to prevent harm. Harm is not only physical mistreatment but also witnessing mistreatment inflicted on others. This becomes particularly pertinent in cases of domestic abuse affecting children/YP, where they may witness, hear, or experience its effects. Abuse can occur within a family, institutional setting, or beyond familial boundaries, perpetrated by individuals known to the child/ YP or, less commonly, by strangers. The abuse might occur exclusively online, or technology may be employed to facilitate offline mistreatment. Children/YP can be mistreated by adults, a group of adults, or even by other children/YP.

**Bullying:** Bullying is not an official definition of child/YP 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/YP significantly.

Bullying may take many forms and may include:

➤ **Physical bullying**

Unprovoked assault on a child/YP or group which can range from a 'prod' to grievous bodily harm.

➤ **Psychological**

Reduction of a child/YP 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.

➤ **Social Ostracism/rejection by peer group.**

➤ **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.

➤ **Homophobic bullying**

Any hostile or offensive action against lesbians, gay males, bisexuals or transgender or those perceived to be lesbian, gay, bisexual, or transgender.

➤ **Cyber bullying**

The use of mobile phones and the internet to deliberately upset someone else.

**Child criminal exploitation** is described as where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child/YP under the age of 18 into any criminal activity in exchange for something for the financial or other advantage of the perpetrator or facilitator and/or through violence or the threat of violence. The victim may be criminally exploited even if the activity appears consensual. Criminal exploitation does not always involve physical contact; it can also occur through using technology.

**Child sexual exploitation** is described as where a child/YP is coerced, manipulated, or deceived into sexual activity by an individual or group, in exchange for something that the victim wants, financial advantage or status. The child/YP may have been sexually exploited even if the sexual activity appears consensual. Sexual exploitation of a child/YP does not always involve physical contact; it can also occur using technology.

**Controlling or coercive behaviour** is described as a form of abuse using tactics which hurt, humiliate, intimidate, exploit, isolate, and dominate the child/YP. Controlling or coercive behaviour is often accompanied by other forms of abuse such as physical, sexual, or economic abuse.

**County lines** describe gangs and organised criminal networks involved in exporting illegal drugs into identified area, using dedicated mobile phone lines or other form of communication. Children/YP are often exploited to move and store the drugs and money. Gangs or gang members will often use coercion, intimidation, violence (including sexual violence) and weapons.

**Domestic abuse** directed towards a child/ YP 16 years of age or over, may be a single incident or a course of conduct which can encompass a wide range of abusive behaviours, including physical or sexual abuse; violent or threatening behaviour; controlling or coercive behaviour; economic abuse; and psychological, emotional, or other abuse. Children/YP can experience domestic abuse within their own intimate relationships. This form of child-on-child abuse may be referred to as teenage relationship abuse.

**Emotional abuse** is the persistent emotional ill treatment of a child/YP: such as to cause severe and persistent adverse effects on the child/YP emotional development.

It may involve making a child/YP 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/YP 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/YP. It may also involve causing a child/YP to frequently feel frightened or in danger, or the exploitation or corruption of a child/YP. Some level of emotional abuse is involved in all types of ill treatment of a child/YP, though it may occur alone.

**Extra-familial harm** is described as children/YP who may be at risk of / or experiencing physical, sexual, or emotional abuse and exploitation from outside of their families / homes. This may involve the child/YP being subject to harm and may include criminal exploitation (such as county lines and financial exploitation), serious violence, modern slavery and trafficking, online harm, sexual exploitation, child-on-child (non-familial) sexual abuse and other forms of harmful sexual behaviour displayed by children/YP towards their peers, abuse, and/or coercive control, children/YP may experience in their own intimate relationships (sometimes called teenage relationship abuse), and the influences of extremism which could lead to radicalisation.

Environments outside of the home may include college, and community/public spaces, including known places in the community where there are concerns about risks to children/YP (for example, parks, housing estates, shopping centres, takeaway restaurants, or transport hubs), as well as online, including social media or gaming platforms.

**Extremism** is described as a vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs or death of members of the armed forces.

**Financial exploitation** is described as exploitation which takes place for the purpose of Money laundering. This is when criminals target child/YP and adults and power is used to coerce, control, manipulate or deceive a child/YP to move illegal funds. This can include physical cash and/or payments.

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

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

**Sexual Abuse** involves forcing or enticing a child/YP to take part in sexual activities, regardless of whether the child/YP 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/YP in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children/YP to behave in sexually inappropriate ways or grooming a child/YP 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/YP and by people from all different walks of life.

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

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

- Cyberbullying
- Emotional abuse
- Grooming
- Sexual abuse

## 1.8. Recognising signs of abuse

**Bullying** can take many forms and a child/YP 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/YP 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: Registered Service Managers 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

**Emotional Abuse** can be difficult to measure, and often children/YP 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/YP not being allowed to mix/play with other children/YP.

The physical signs of emotional abuse may include:

- A failure to thrive or grow, particularly if the child/YP 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.

**Forced Marriage** is when pressure is applied to a child/YP 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/YP 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.

## **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/YP 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/YP abuse.

**For more details please refer to the 'Multi agency statutory guidance on female genital mutilation'**

**Physical Abuse** is described where children/YP 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/YP, 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 noticeable on a child/YP 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.

**Sexual Abuse** is described when adults use children/YP 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/YP's behaviour which may cause you to become concerned, although physical signs can also be present. In all cases, a child/YP 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** can be difficult to recognise yet have some of the most lasting and damaging effects on children/YP.

The physical signs of neglect may include:

- Constant hunger, sometimes stealing food from other children/YP.
- 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.

**Online abuse** is where a child/YP 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.

## 1.9. Definition of Abuse – Adults

An adult at risk 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.

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

**Financial or material abuse** can be described when someone is stealing money or other valuables, or it might be 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.

**Modern slavery** may involve:

- Human trafficking is considered a form of modern slavery. Trafficked YP/A 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.

**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.

**Physical Abuse** 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.

**Psychological or Emotional Abuse** 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.

**Sexual Abuse** 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.

### 1.10. 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 adults at risk 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.

**Domestic Abuse** 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.

**Financial or material abuse** 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.

**Modern slavery** 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.

**Neglect** may include:

- Constant hunger, sometimes stealing food from other YP/A.
- 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.

**Physical Abuse** 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.

**Psychological and Emotional Abuse** 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.

**Sexual Abuse** 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.

### **1.11. Consequence of child/YP and adult abuse**

Abuse has long-lasting consequences for the child /YP, and adult concerned such as

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

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

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

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

Some children /YP 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.