



# Adult Safeguarding Policy and Procedure

## Foreword

This document has been produced by Salford CVS in partnership with the SSAB

The policy was reviewed & presented to CVS Board of Trustees in August 2022

**Final amendments were agreed and accepted by CVS Board of Trustees on 30<sup>th</sup> August 2022**

Find out more about Adult Safeguarding on the Salford CVS website:

<https://www.salfordcvs.co.uk/adult-safeguarding>

<b>Contents</b>		
<b>1</b>	Policy Statement	<b>Page 4</b>
<b>2</b>	Aim	<b>Page 4</b>
<b>3</b>	Legislation-The Care Act 2014	<b>Page 4</b>
<b>4</b>	Key Principles for adult safeguarding	<b>Page 5</b>
<b>5</b>	Recognising the signs of abuse <ul style="list-style-type: none"> <li>• Sexual abuse</li> <li>• Financial abuse</li> <li>• Psychological and/ or emotional abuse</li> <li>• Neglect and acts of omission</li> <li>• Self-Neglect</li> <li>• Discriminatory abuse</li> <li>• Institutional or Organisational abuse</li> <li>• Domestic abuse</li> <li>• Modern Day Slavery (Human Trafficking)</li> <li>• Radicalisation to Terrorism</li> <li>• Cuckooing</li> <li>• Who might abuse?</li> </ul>	<b>Pages 5 to 10</b>
<b>6</b>	Promoting Adult Safeguarding <ul style="list-style-type: none"> <li>• Safe recruitment</li> <li>• Management and Support</li> <li>• Code of Conduct</li> <li>• Training</li> <li>• Making Safeguarding Personal</li> </ul>	<b>Page 10 to 13</b>
<b>7</b>	Responding and Reporting Safeguarding Concerns	<b>Page 13</b>
<b>8</b>	Child Protection	<b>Page 17</b>
<b>9</b>	Recording	<b>Page 17</b>
<b>10</b>	Designated Safeguarding Leads <ul style="list-style-type: none"> <li>• Date of Review</li> </ul>	<b>Page 18</b>
	Appendices	<b>Page 19 to 22</b>



## **Adult Safeguarding Policy**

### **1) Policy Statement**

The policy exists to ensure that **Salford CVS** implements appropriate arrangements, systems and procedures to ensure that the organisation has the right skills, means and resources to protect and safeguard adults.

**Salford CVS** recognises safeguarding means protecting an adult's right to live in safety, free from abuse and neglect.

### **2) Aim**

#### **The Care Act 2014**

The Care Act 2014 provides a definition and framework for Safeguarding Adults. Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

#### **The aims of adult safeguarding are to:**

- Stop abuse or neglect wherever possible;
- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs;
- Safeguard adults in a way that supports them in making choices and having control about how they want to live
- Promote an approach that concentrates on improving life for the adults concerned
- Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect
- Provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult
- Address what has caused the abuse or neglect

### **3) Legislation - The Care Act 2014**

The practices and procedures within this policy are based on the relevant legislation and government guidance.

- The Care Act 2014  
Care and Support Statutory Guidance (especially chapter 14) 2014

Safeguarding Adults in the UK is compliant with United Nations directives on the rights of disabled people and commitments to the rights of older people. It is covered by:

- The Human Rights Act 1998
- The Data Protection Act 2018
- General Data Protection Regulations 2018

## **Safeguarding Duties**

The Care Act 2014 introduced statutory safeguarding duties. The safeguarding duties apply to an adult who:

- **Has needs for care and support (whether or not the authority is meeting any of those needs),**
- **Is experiencing, or is at risk of, abuse or neglect, and**
- **As a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.**

## **4) Key Principles for adult safeguarding**

In the safeguarding of adults, **Salford CVS** are guided by the principles set out in The Care Act 2014 (See Appendix Two) and aim to demonstrate and promote these principles in our work:

- **Empowerment** – People being supported and encouraged to make their own decisions and informed consent
- **Prevention** – It is better to take action before harm occurs.
- **Proportionality** – The least intrusive response appropriate to the risk presented.
- **Protection** – Support and representation for those in greatest need.
- **Partnership** – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- **Accountability** – Accountability and transparency in delivering safeguarding.

## **5) Recognising the signs of abuse**

Staff / volunteers may be particularly well-placed to spot abuse and neglect, the adult may say or do things that hint that all is not well. It may come in the form of a complaint, or an expression of concern. Everyone within the organisation should understand what to do, and where to go locally to get help, support and advice. It is vital that everyone within the organisation is vigilant on behalf of those unable to protect themselves, including:

- Knowing about different types of abuse and neglect and their signs
- Supporting adults to keep safe
- Knowing who to tell about suspected abuse or neglect and
- Supporting adults to think and weigh up the risks and benefits of different options when exercising choice and control.

*The Care Act 2014* (See Appendix Two) defines the following areas of abuse and neglect; they are not exhaustive but are a guide to behaviour that may lead to a safeguarding enquiry. This includes:

### **Physical abuse**

The physical mistreatment of one person by another which may or may not result in physical injury, this may include slapping, burning, punching, unreasonable confinement, and pinching, force-feeding, misuse of medication, shaking, inappropriate moving and handling.

### **Signs and indicators**

Over or under use of medication, burns in unusual places; hands, soles of feet, sudden incontinence, bruising at various healing stages, bite marks, disclosure, bruising in the shape of objects, unexplained injuries or those that go untreated, reluctance to uncover parts of the body.

### **Sexual abuse**

Any form of sexual activity that the adult does not want and or have not considered, a sexual relationship instigated by those in a position of trust, rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

### **Signs and indicators**

Signs of being abused may include recoiling from physical contact, genital discharge, fear of males or female, inappropriate sexual behaviour in presence of others, bruising to thighs, disclosure, and pregnancy. Abusers may take longer with personal care tasks, use offensive language, work alone with clients, or show favouritism to clients.

### **Financial or material abuse**

Financial or material abuse – including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits

### **Signs and indicators**

This may include not allowing a person to access to their money, not spending allocated allowance on the individual, denying access to their money, theft from the individual, theft of property, misuse of benefits. There may be an over protection of money, money not available, forged signatures, disclosure, inability to pay bills, lack of money after payments of benefits or other, unexplained withdrawals. An abuser may be evasive when discussing finances, goods purchased may be in the

possession of the abuser, there may be an over keenness in participating in activities involving individuals money

### **Psychological and/or Emotional abuse**

This abuse may involve the use of intimidation, indifference, hostility, rejection, threats of harm or abandonment, humiliation, verbal abuse such as shouting, swearing or the use of discriminatory and or oppressive language. A deprivation of contact, blaming, controlling, coercion, harassment, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks. There may be a restriction of freedom, access to personal hygiene restricted, name calling, threat to withdraw care or support, threat of institutional care, use of bribes or threats or choice being neglected

### **Signs and indicators**

Stress and or anxiety in response to certain people, disclosure, compulsive behaviour, reduction in skills and concentration, lack of trust, lack of self-esteem, someone may be frightened of other individuals, there may be changes in sleep patterns

### **Neglect and acts of omission**

Behaviour by carers that results in the persistent or severe failure to meet the physical and or psychological needs of an individual in their care. This may include;

- ignoring medical emotional or physical care needs,
- failure to provide access to appropriate healthcare and support or educational services,
- the withholding of the necessities of life, such as medication, adequate nutrition and heating,
- willful failure to intervene or failing to consider the implications of non-intervention in behaviors which are dangerous to them or others,
- failure to use agreed risk management procedures,
- inadequate care in residential setting,
- withholding affection or communication,
- denying access to services,

### **Signs and indicators**

There may be disclosure. Someone being abused may have low self-esteem, deterioration, depression, isolation, continence problems, sleep disturbances, pressure ulcers. There may be seemingly uncertain attitude and cold detachment from a carer, denying individuals request, lack of consideration to the individuals request, denying others access to the individual health care professionals

### **Self-neglect**

This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

### **Types of self-neglect**

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

### **Indicators of self-neglect**

- Very poor personal hygiene
- Unkempt appearance
- Lack of essential food, clothing or shelter
- Malnutrition and/or dehydration
- Living in squalid or unsanitary conditions
- Neglecting household maintenance
- Hoarding
- Collecting a large number of animals in inappropriate conditions
- Non-compliance with health or care services
- Inability or unwillingness to take medication or treat illness or injury

Resources available on SSAB website –see appendix 1

### **Discriminatory abuse**

This includes forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation, and religion or health status and may be the motivating factor in other forms of abuse. It can be personal, a hate crime or institutional.

### **Signs and indicators**

There may be a withdrawal or rejection of culturally inappropriate services e.g. food, mixed gender groups or activities. Individual may simply agree with the abuser for an easier life, there may be disclosure, or someone may display low self-esteem. An abuser may react by saying "I treat everyone the same", have inappropriate nick names, be uncooperative, use derogatory language, or deny someone social and cultural contact.

### **Institutional or Organisational Abuse**

Neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

### **Signs and indicators**

This may include a system that condones poor practice, deprived environment, lack of procedures for staff, one commode used for a number of people, no or little evidence of training, lack of staff support/supervision, lack of privacy or personal

care, repeated unaddressed incidents of poor practice, lack of homely environment, manager implicated in poor practice. There may be a lack of personal clothing, no support plan, lack of stimulation, repeated falls, repeated infections, unexplained bruises/burns, pressure ulcers, unauthorised deprivation of liberty. Abusers may have a lack of understanding of a person's disability, misuse medication, use illegal controls and restraints, display undue/inappropriate physical intervention, and inappropriately use power/control.

### **Domestic abuse**

The cross-government definition of domestic violence and abuse is: any incident or pattern of incidents of controlling, coercive, 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. The abuse can encompass, but is not limited to:

- Psychological
- Sexual
- Financial
- Emotional

A new offence of coercive and controlling behaviour in intimate and familial relationships was introduced into the Serious Crime Act 2015. The offence will impose a maximum 5 years imprisonment, a fine or both.

### **Signs and indicators**

May include many of those indicators listed under previous categories in this document, including unexplained bruising, withdrawal from activities, work or volunteering, not being in control of finances, or decision making

### **Resources available on SSAB website – Links in Appendices Two**

### **Modern slavery**

Encompasses slavery, human trafficking, and forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

### **Modern Slavery Materials - Duty to Notify**

From 1 November 2015, specified public authorities have a duty to notify the Home Office of any individual encountered in England and Wales who they believe is a suspected victim of slavery or human trafficking. The 'duty to notify' provision is set out in the Modern Slavery Act 2015, and applies to all police forces and local authorities in England and Wales, the Gangmasters Licensing Authority and the National Crime Agency.

### **VOLUNTARY NOTIFICATIONS BY AGENCIES NOT COVERED BY THE DUTY**

Other organisations, including VCSEs, are also encouraged to put forward notifications where they encounter a potential victim of modern slavery.

Resources available on CVS website – Links in Appendices

## **Signs and indicators**

There may be signs of physical or psychological abuse, victims may look malnourished or unkempt, or appear withdrawn. Victims may rarely be allowed to travel on their own, seem under the control, influence of others, rarely interact or appear unfamiliar with their neighbourhood or where they work. They may be living in dirty, cramped or overcrowded accommodation, and / or living and working at the same address. Victims may have no identification documents, have few personal possessions and always wear the same clothes day in day out. What clothes they do wear may not be suitable for their work. People may have little opportunity to move freely and may have had their travel documents retained, e.g. passports. They may be dropped off / collected for work on a regular basis either very early or late at night. Victims may avoid eye contact, appear frightened or hesitant to talk to strangers and fear law enforcers for many reasons, such as not knowing who to trust or where to get help, fear of deportation, fear of violence to them or their family.

## **Radicalisation to terrorism**

The Government through its PREVENT programme has highlighted how some adults may be vulnerable to radicalisation and involvement in terrorism. This can include the exploitation of vulnerable people and involve them in extremist activity. Radicalisation can be described as a process, by which a person to an increasing extent accepts the use of undemocratic or violent means, including terrorism, in an attempt to reach a specific political/ideological objective. Vulnerable individuals being targeted for radicalisation/recruitment into violent extremism is viewed as a safeguarding issue.

## **Signs and indicators**

May include being in contact with extremist recruiters. Articulating support for violent extremist causes or leaders. Accessing violent extremist websites, especially those with a social networking element. Possessing violent extremist literature. Using extremist narratives to explain personal disadvantage. Justifying the use of violence to solve societal issues. Joining extremist organisations. Significant changes to appearance and/or behaviour.

## **Cuckooing**

Cuckooing is when criminals target the home of vulnerable person, often so they can use the property for criminal purposes such as drug-dealing, hiding weapons and other criminal activities.

The term comes from the behaviour of cuckoo birds who take over the nests of other birds.

A criminal will often befriend a vulnerable person in order to exploit them and use their property. The person is usually intimidated and too scared to report it to anyone.

Victims of 'cuckooing' are usually vulnerable in some way. They may be a drug user but can include:

- Older people,

- People living with mental or physical health problems,
- Living with a learning disability or difficulty.
- Sex workers,
- Single parents
- People experiencing poverty.
- People who are isolated
- People living with drug or alcohol addiction.

### Signs and Indicators

Signs of cuckooing at the property can include:	Signs that a person could be affected by cuckooing could include:
<ul style="list-style-type: none"> <li>• High numbers of cars / bikes stopping at the property for a short time</li> <li>• People coming and going from the property at various times of day and night.</li> <li>• Possible increase in noise / anti-social activity in and around the property</li> <li>• Increase in litter outside</li> <li>• Open drug dealing near the property</li> <li>• Not seeing the resident of the property as often</li> <li>• Damage to the property</li> </ul>	<ul style="list-style-type: none"> <li>• Not engaging with services</li> <li>• Unexplained injuries</li> <li>• Paying off debts in full with cash</li> <li>• Misusing substances</li> <li>• Appears withdrawn and fearful</li> <li>• New unidentified associates at the property or when collecting money</li> <li>• Changed appearance - either wearing expensive clothing or appearing unkempt.</li> </ul>

### Who might abuse?

Abuse of adults at risk, may be perpetrated by a wide range of people including relatives, family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates, people who deliberately exploit vulnerable people and strangers.

Incidents of abuse may be one-off or multiple, and affect one person or more. Professionals and others should look beyond single incidents or individuals to identify patterns of harm. Patterns of abuse vary and include:

- Serial abusing in which the perpetrator seeks out and ‘grooms’ individuals. Sexual abuse sometimes falls into this pattern as do some forms of financial abuse;
- Long-term abuse in the context of an ongoing family relationship such as domestic violence between spouses or generations or persistent psychological abuse;
- Or opportunistic abuse such as theft occurring because money or jewelry has been left lying around.

### 6.1) Promoting Adult Safeguarding within Salford CVS

#### Prevention of abuse

To assist in the prevention of abuse the following factors should be considered:

- Rigorous recruitment practices (including volunteers)
- Internal guidelines for staff
- Training
- Making Safeguarding Personal and empowering service users

## 6.2) Safe Recruitment & Selection

We have a policy and procedure that covers all potential Trustees, paid staff and volunteers in **Salford CVS** which ensures that all potential new staff, volunteers and trustees;

- **Complete an application form or a letter of application.** This includes: address, evidence of relevant qualifications paid work and voluntary work experience and all criminal convictions.
- **Provide two pieces of identification, which confirm both identity and address.**
- **Undergo an interview** (formal or informal) involving at least two interviewers.
- **Provide at least two references**, which are followed up before a post is offered. One reference is from the last employer or an organization that has knowledge of the applicant's work.

If undertaking a regulatory activity or if their post is eligible consent **to a Disclosure and Barring Service check** (formally CRB check) and sign up to the update service and agree to **Salford CVS** requesting an annual update.

### **Salford CVS:**

- Understand that a person who is barred from working with children or vulnerable adults is breaking the law if they work or volunteer, or try to work or volunteer with these groups.
- Understand that an organisation, which knowingly employs someone who is barred to work with those groups, will also be breaking the law.
- Understand that if our organisation dismisses a member of staff or volunteer because they have harmed a child or vulnerable adult, or would have done so if they had not left, we must make referral to the Disclosure and Barring Service.
- [About - Disclosure and Barring Service - Inside Government - GOV.UK](#)

## 6.3) Management & Support of Paid Staff & Volunteers

**Salford CVS** has the following items in place for managing its staff and volunteers:

- All staff and volunteers are provided with a job description (paid staff) or a role profile (volunteers) outlining their main responsibilities. This includes a requirement to comply with the Safeguarding Policy and Procedures and Code of Conduct.

- All paid staff and volunteers complete a role review at the end of their induction period before being confirmed in post. Inductions will be completed within 6 months.
- All paid staff are given supervision at least every 6 weeks by their line manager.
- All volunteers are given regular support sessions.
- **Salford CVS** disciplinary and grievance procedures are implemented for all paid staff, which comply with the ACAS2 Code of Practice.
- All trustees, paid staff and volunteers attend regular ongoing safeguarding training appropriate to their role.
- All trustees paid staff and volunteers receive an induction, which includes information on all the organisation's policies and procedures.

#### **6.4) Code of Conduct**

We have a Code of Conduct in place for

- **Trustees**
- **Staff and volunteers**

#### **6.5) Training**

**Salford CVS** will promote awareness of Adult Safeguarding issues, to its Trustees, Staff, Volunteers, broader membership and services users

Trustees, Staff and Volunteer, all receive Adult Safeguarding training appropriate to their role as outlined in the SSAB Competency Framework (see appendix 1).

For all staff who are working or volunteering with adults at risk this requires them as a minimum to have awareness training that enables them to:

- Understand what safeguarding is and their role in Safeguarding Adults
- Recognise an adult potentially in need of safeguarding and take action
- Understand the procedures for making a safeguarding alert
- Understand dignity and respect when working with individuals
- Have knowledge of policy, procedures and legislation that supports safeguarding adults activity

### **7.0) Responding to and Reporting Safeguarding Concerns**

#### **7.1 Safeguarding Adults**

As outlined in Section 3 above, the Care Act clearly defines when safeguarding duties apply.

**Adult at risk** - A person aged 18 or over who is in need of care and support, regardless of whether they are receiving them, and because of those needs are unable to protect themselves against abuse or neglect.

## 7.2 Responding to a disclosure

If an adult at risk discloses to you that they are being abused, or they have recently been abused, it is important to:

Listen to them carefully to ensure you understand what has happened to them, when and how it happened;

- It is okay to ask questions to clarify / check understanding of what you are being told;
- Use open questions, 'tell me what happened...' or "explain what happened to me..."
- If appropriate, ask what they want to happen now; what their wishes and feeling are (or their advocate or representative if they have one);
- Make a written record of what you have been told as soon as possible, using the person's own words;
- Do not investigate the matter yourself. However you may ask questions to clarify what happened and what they want to happen now.
- Under no circumstances should you approach or discuss the matter with the alleged perpetrator.

## 7.3 Action to take when you identify concerns.

Your concerns may not always come from a direct disclosure, but it is still important to respond appropriately.

Any member of staff or volunteer who is alerted to or has concerns that an **adult at risk** is being, or has been, abused should **raise the matter immediately** with their supervisor/ line manager /or with the designated safeguarding lead.

*(Contact details for CVS designated leads below Section 10)*

Early sharing of information is the key to providing an effective response where there are emerging concerns. To ensure effective safeguarding arrangements no member staff or volunteer should assume that someone else would pass on information, which they think may be critical to the safety and wellbeing of the adult.

## 7.4 Involving Adults at risk in the process.

It is important that Adults are involved in decisions about their lives even if there are safeguarding concerns identified. Making Safeguarding Personal, and Capacity to Consent offer clear guidance on how to proceed when a safeguarding concern has been identified

### **Making Safeguarding Personal**

**This** is a sector led initiative which ensures that organisations engage with people about the outcomes they want

Making safeguarding personal means that the way we support people should be person-led and outcome-focused. It engages the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.

We aim to empower our service users and provide them with the information they need to make decisions into how to be safe from abuse and reduce risks.

We recognise that adults may make decisions that might be perceived as risky or unwise.

### **Capacity to Consent**

As outlined in the Mental Capacity Act 2005 Adults must be assumed to have capacity to make their own decisions and be given all practicable help before anyone treats them as not being able to make their own decisions. Where an adult is found to lack capacity to make a decision then any action taken, or any decision made for, or on their behalf, must be made in their best interests.

We need to understand and always work in line with the Mental Capacity Act 2005 (MCA). And seek support and guidance when we have concerns regarding an adult's capacity.

### 7.5 Reporting a Safeguarding Concern to Adult Social Care

If the information shared with line manager/supervisor or designated lead is considered to be a safeguarding concern it may be necessary to make a referral to Adult Social Care.

Guidance outlined in 7.4 should be considered alongside the following action:

Salford CVS procedure for making a safeguarding referral:

- Inform the adult of the action we propose to take.
- Seek their agreement for any referral.
- Ensure that they are kept informed about what will happen next, so they can be reassured about what to expect.
- Endeavour to ensure that they are safe and supported before proceeding with any other action.
- Inform the adult if **Salford CVS** are planning to seek advice from or report concerns to an external agency.

In most situations there will not be an immediate threat and the decision about protecting the person with safeguarding needs will be taken in consultation with themselves and/or Social Services.

### **Worried about an adult**

If you believe or suspect an adult at risk is being abused, it is vital you alert the authorities.

Call 999 in an emergency or where you believe a serious criminal act has taken place

Make a safeguarding referral through the online [portal](#).

You can speak to the Adult Social Care Contact Centre on 0161 631 4777 (Monday to Friday 8.30am to 4.30pm)

If you need to speak to someone urgently outside of office hours call 0161 794 8888 (4.30pm to 8.00am weekdays and 24 hours over weekends and bank holidays)  
You can also email: [worriedaboutanadult@salford.gov.uk](mailto:worriedaboutanadult@salford.gov.uk)

If you are concerned about someone who is feeling suicidal, there is information on help and support available on the [CCG website](#).

Please note that if you believe that a manager may be implicated in the abuse, or your manager is not taking the matter as seriously as it should be, you should report the matter directly to **0161 631 4777** and consult your organisation's whistle blowing policy. You may also want to speak to [Protect](#), a charity that supports whistleblowers.

**Call 999** in a medical emergency or where you believe a serious criminal act has taken place.

Inform the emergency services that you consider this to be a Safeguarding Adult concern

**Adult Safeguarding Procedures link:**

<https://safeguardingadults.salford.gov.uk/professionals/policies-and-procedures/safeguarding-policy/>

## 8) Child Protection

If at any time you become concerned that a Child might be at risk you need to follow the Child Protection Procedure outlined in **Salford CVS** Protection/Safeguarding Policy and Procedure.

Contact your supervisor or one of the designated safeguarding leads If you cannot contact them go straight to the Bridge Partnership

Worried about a child

Every child and young person has the right to be safe.

All reports or enquiries concerning the welfare or safety of a child must go straight to the **Bridge Partnership, call: 0161 603 4500** via the [online portal](#), which you can [access below](#).

### [Children's portal](#)

The Bridge Partnership is available Monday to Friday from 8:30am to 4:30pm. If you need to speak to someone outside of these times, please contact the **Emergency Duty Team (EDT) on 0161 794 8888**.

**If a child is in immediate danger of being harmed or is home alone, call the police on 999.**

## 9) Recording

Whenever there is a safeguarding concern raised by a member of staff or volunteer at CVS a written record should be compiled using the Safeguarding Concerns Record (template stored on Breathe).

This must include details of the person involved, the nature of the concern and the actions taken.

This written record should **not** be stored electronically but instead should be printed off and passed to Kirsten Robinson so that it can be kept confidentially and in a secure place.

## 10) Designated Leads

### Designated Safeguarding Leads for Salford CVS

Alison Page	<b>07436102880</b>
Kirsten Robinson	<b>07854375708</b>
Ben Whalley	<b>07891 214 544</b>

**We are committed to reviewing our policy and good practice annually**

This policy was reviewed in August 2022

Approved by Salford CVS Board of Trustees: 30<sup>th</sup> August 2022

**Date for Review: August 2023**

Signed.....

# Appendices

## **Appendix One – Legislation and Guidance**

Chapter Fourteen of the Care Act 2014. Care and Support Statutory Guidance

[Safeguarding - Care and support statutory guidance - Guidance - GOV.UK](#)

**Safeguarding Adults Competency Framework**

[SSAB Competency Framework endorsed by the SSAB September 2016.PDF](#)

**Adult Safeguarding Policy and Procedures for Salford**

<https://safeguardingadults.salford.gov.uk/professionals/policies-and-procedures/safeguarding-policy/>

[Data Protection Act](#)

[Guide to GDPR](#)

[Human Rights Act](#)

[Mental Capacity Act](#)

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

## **Appendix Two – Types of Abuse Further reading and resources**

### **Self Neglect**

Salford Self – neglect policy and procedures

<https://safeguardingadults.salford.gov.uk/professionals/policies-and-procedures/self-neglect/>

Case study relating to Self-Neglect

<https://safeguardingadults.salford.gov.uk/media/1069/mary-7mb.pdf>

Case Study relating to Self Neglect – Andy

<https://safeguardingadults.salford.gov.uk/media/1070/andy-7mb.pdf>

### **Domestic Abuse**

<https://safeguardingadults.salford.gov.uk/guidance-archive/domestic-abuse/>

Fact Sheet on Domestic Abuse

<https://safeguardingadults.salford.gov.uk/media/1066/pt-domestic-abuse-fact-sheet-final-version-july-2020.pdf>

7 Minute Briefing on Domestic Abuse

<https://safeguardingadults.salford.gov.uk/media/1067/domestic-abuse-7-minute-briefing-final-july-2020.pdf>

### **Modern Day Slavery**

CVS Website

\_\_\_\_\_ Duty of Notice Poster

\_\_\_\_\_ Factsheet Duty to Notify

\_\_\_\_\_ Modern Slavery Briefing

### **Cuckooing**

8 minute video on Cuckooing

7 minute briefing on Cuckooing

### **Government Website**

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/328096/Modern\\_slavery\\_booklet\\_v12\\_WEB\\_2\\_.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/328096/Modern_slavery_booklet_v12_WEB_2_.pdf)

### **Female Genital Mutilation**

7 Minute Briefing

<https://safeguardingadults.salford.gov.uk/media/1075/fgm-7-minute-briefing.pdf>

## **Mental Capacity Act**

Conviction of Care Home staff under Mental Capacity Act

<https://safeguardingadults.salford.gov.uk/media/1071/7-min-briefing-mca-prosecution-final.pdf>

## **Appendix Three – Related Policies**

### **Salford CVS Policies Linked to this Policy**

The following policies are also linked to the Safeguarding Children policies and procedures for Salford CVS. The policies can be accessed via the Breathe HR system.

- Lone Working Policy
- Confidentiality Policy
- Data Protection Policy
- Recruitment Policies ( including recruitment of Volunteers)
- Comments Compliments and Complaints Policy
- Whistleblowing policy
- Trustee Recruitment policy
- Photography Policy – consent to share)
- PIPOT policy – currently being developed

The following policies should also be in place for service delivery organisations. Because Salford CVS are not a service delivery organisation they are not in this organisation's suite of policies:

- Online Safety Policy