

King's Church Safeguarding Policy Appendix

APPENDIX 1

Statutory Definitions of Abuse (Children)

What is abuse and neglect?

Child abuse is 'a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children.' Working Together D.H. 2018.

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Spiritual Abuse

'Spiritual abuse is a form of emotional and psychological abuse. It is characterized by a systematic pattern of coercive and controlling behaviour in a religious context. Spiritual abuse can have a deeply damaging impact on those who experience it.'

This may include: manipulation, exploitation, enforced accountability, censorship of decision making, requirements for secrecy and silence, coercion to conform, control through the use of sacred texts or teaching, requirement of obedience to the abuser, the suggestion that the abuser has a 'divine' position, isolation as a means of punishment, and superiority and elitism.' (Lisa Oakley, 2018)

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Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

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

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

Child Sexual Exploitation

'Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.' Dept. of Education 2017.

Signs of Possible Abuse (children & young people)

The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life.

Physical

- Injuries not consistent with the explanation given for them.

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- Injuries that occur in places not normally exposed to falls, rough games, etc.
- Injuries that have not received medical attention.
- Reluctance to change for, or participate in, games or swimming.
- Repeated urinary infections or unexplained tummy pains.
- Bruises on babies, bites, burns, fractures etc. which do not have an accidental explanation.
- Cuts/scratches/substance abuse.

Sexual

- Any allegations made concerning sexual abuse.
- Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour.
- Age-inappropriate sexual activity through words, play or drawing.
- Child who is sexually provocative or seductive with adults.
- Inappropriate bed-sharing arrangements at home.
- Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations.

Emotional and spiritual

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging.
- Depression, aggression, extreme anxiety.
- Nervousness, frozen watchfulness.
- Obsessions or phobias.
- Sudden under-achievement or lack of concentration.
- Inappropriate relationships with peers and/or adults.
- Attention-seeking behaviour.
- Persistent tiredness.
- Running away/stealing/lying.

Neglect

- Under nourishment, failure to grow, constant hunger, stealing or gorging food.
- Untreated illnesses.
- Inadequate care, etc.

Child Sexual Exploitation

- Evidence of drug, alcohol and/or substance use – abusers may use drugs and alcohol to help and control children and young people

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- Unexplained physical injuries or suffering from physical injuries (e.g. bruising suggestive of either physical or sexual assault)
- Children or young people who are self-harming and demonstrating suicidal thoughts and tendencies
- Children or young people displaying inappropriate sexualised behaviours such as being overfamiliar with strangers or sending sexualised images via the internet or mobile phone
- Changes in physical appearance (e.g. losing weight, being malnourished)
- Being absent or truanting from school or showing signs of disengagement
- Changes in temperament/depression – mood swings or changes in emotional wellbeing, secretive behaviour
- Association with other young people involved in exploitation and with older boyfriends/girlfriends
- Getting involved in petty crime such as shoplifting or stealing
- Appearing with unexplained gifts or new possessions
- Change in appearance, e.g. different clothes
- Children or young people becoming estranged from their family
- Becoming physically aggressive towards family and friends
- Involvement in exploitative relationships or associations with risky adults
- Becoming detached from age-related activities and social groups
- Phone calls and/or text messages from unknown adults
- Children or young people who appear to be recruiting others into exploitive situations.

Other harm

- Eating disorders - anorexia, bulimia.
- Self-harming
- Unmanaged mental health difficulties.

Statutory Definitions of Abuse (for Adults)

The following definition of abuse is laid down in 'No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse (Department of Health 2000):

'Abuse is a violation of an individual's human and civil rights by any other person or persons. In giving substance to that statement, however, consideration needs to be given to a number of factors:

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it'.

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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 any action. This must recognize that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances ('Care and Support Statutory Guidance,' Sec 14, D.H & S.C. 2020).

Who may be vulnerable?

The Care Act 2014 applies to an adult who:

- Needs care and support (whether or not the local authority is meeting any of those needs); and
- Is experiencing, or at risk of, abuse or neglect; and
- As a result of those care and support needs, is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

Abuse of an adult may include:

Physical Abuse

This is the infliction of pain or physical injury, which is either caused deliberately, or through lack of care.

Sexual Abuse

This is the involvement in sexual activities to which the person has not consented or does not truly comprehend and so cannot give informed consent, or where the other party is in a position of trust, power or authority and uses this to override or overcome lack of consent.

Psychological or Emotional Abuse

These are acts or behaviour, which cause mental distress or anguish or negates the wishes of the vulnerable adult. It is also behaviour that has a harmful effect on the vulnerable adult's emotional health and development or any other form of mental cruelty.

Spiritual Abuse

This abuse may include: manipulation and exploitation, enforced accountability, censorship of decision making, requirements for secrecy and silence, coercion to conform, control through the use of sacred texts or teaching, requirement of obedience to the abuser, the suggestion that the abuser has a 'divine' position, isolation as a means of punishment, and superiority and elitism. (Lisa Oakley, 2018)

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Financial or Material Abuse

This is the inappropriate use, misappropriation, embezzlement or theft of money, property or possessions.

Neglect or Act of Omission

This is the repeated deprivation of assistance that the vulnerable adult needs for important activities of daily living, including the failure to intervene in behaviour which is dangerous to the vulnerable adult or to others. A vulnerable person may be suffering from neglect when their general wellbeing or development is impaired.

Discriminatory Abuse

This is the inappropriate treatment of a vulnerable adult because of their age, gender, race, religion, cultural background, sexuality, disability etc. Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies opportunity to some groups or individuals. Discriminatory abuse links to all other forms of abuse.

Institutional Abuse

This is the mistreatment or abuse of a vulnerable adult by a regime or individuals within an institution (e.g. hospital or care home) or in the community. It can be through repeated acts of poor or inadequate care and neglect or poor professional practice.

Signs of Possible Abuse (vulnerable adults)

Physical

- A history of unexplained falls, fractures, bruises, burns, minor injuries.
- Signs of under or over use of medication and/or medical problems unattended.

Sexual

- Pregnancy in a woman who is unable to consent to sexual intercourse.
- Unexplained change in behaviour or sexually implicit/explicit behaviour.
- Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting.
- Infections or sexually transmitted diseases.
- Full or partial disclosure or hints of sexual abuse.
- Self-harming.

Psychological, emotional or spiritual

- Alteration in psychological state e.g. withdrawn, agitated, anxious, tearful.
- Intimidated or subdued in the presence of the carer.
- Fearful, flinching or frightened of making choices or expressing wishes.
- Unexplained paranoia.

Financial or Material

- Disparity between assets and living conditions.
- Unexplained withdrawals from accounts or disappearance of financial documents.

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- Sudden inability to pay bills.
- Carers or professionals fail to account for expenses incurred on a person's behalf.
- Recent changes of deeds or title to property.

Neglect or Omission

- Malnutrition, weight loss and /or persistent hunger.
- Poor physical condition, poor hygiene, varicose ulcers, pressure sores.
- Being left in wet clothing or bedding and/or clothing in a poor condition.
- Failure to access appropriate health, educational services or social care.
- No callers or visitors.

Discriminatory

- Inappropriate remarks, comments or lack of respect.
- Poor quality or avoidance of care.

Institutional

- Lack of flexibility or choice over meals, bed times, visitors, phone calls etc.
- Inadequate medical care and misuse of medication.
- Inappropriate use of restraint.
- Sensory deprivation e.g. denial of use of spectacles or hearing aids.
- Missing documents and/or absence of individual care plans.
- Public discussion of private matter.
- Lack of opportunity for social, educational or recreational activity.

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APPENDIX 2

Reporting Safeguarding Concerns

'I need to report something, what is the correct procedure?'

Safeguarding concerns arise when we are concerned that a child, young person or vulnerable person may be being mistreated or abused by others or not receiving proper care.

- 1) The person in receipt of allegations or suspicions of abuse should report concerns as soon as possible to **Ruth Wainman** (hereafter the "Safeguarding Officer") tel no: 01494 459901, or safeguarding@kchw.co.uk, who is nominated by the leadership to act on their behalf in dealing with the allegation or suspicion of neglect or abuse, including referring the matter on to the statutory authorities.
- 2) In the absence of the Safeguarding Officer or, if the suspicions in any way involve the Safeguarding Officer, then the report should be made to **Rich Horne** (hereafter the "Deputy") tel no: 01494 459901 or safeguarding@kchw.co.uk.
- 3) If the suspicions implicate both the Safeguarding Officer and the Deputy, then the report should be made in the first instance **Ian Stokoe** (hereafter the trustee with responsibility for safeguarding. Contact details may be obtained through church office 01494 459901.
- 4) Alternatively, thirtyone:eight can be contacted on tel: 0303 0031111. Or, the concerned person can call social services or the police.

Upon receiving information about a safeguarding concern, whether relating to an adult or to a child, the Safeguarding Officer will first call thirtyone:eight to get their advice.

Disclosure Guidelines

- Never promise confidentiality. If a child, young person or adult with care & support needs makes a serious disclosure, or you have reason to believe that they are being abused or neglected, you must report it.
- Listen carefully to the person. Avoid expressing your own views, shock or disbelief. This could cause them to 'shut down'.
- Reassure them that they've done the right thing in telling you.
- Reassure them that you are taking them seriously.
- Write down what you have been told straight away, while details are still fresh in your mind.
- **Report what you have been told as soon as possible to the safeguarding officer** so that action can be taken quickly.
- **Do not talk to anyone named in the disclosure**, even if it concerns a person you know well and like. Talking to them could make the situation a lot worse for the person who has made the disclosure and could also prejudice any future investigation.

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- Please do not speak to anyone else about your concerns (including family members or friends of those who you are concerned about) until the safeguarding officer or deputy have had an opportunity to consider the best way forward.
- Where possible, we will seek to gain consent to pass information on, and to involve an individual in any decision which will affect their life, whether they are an adult or a child. Where safe to do so, we will tell the person making the disclosure that we will have to pass this information on in order to try to keep them safe. However, there are times when telling someone that we plan to pass on information, may put that person, or someone else, at greater risk. If you judge that this is the case, you should pass the information to the safeguarding officer without telling the person that you are doing so. If you are unsure, speak to the safeguarding officer without speaking to the person first.

If you have any reason to be concerned, from a safeguarding point of view, about the conduct of anyone on the team in which you are serving, you may speak with the safeguarding officer or deputy.

Effective Listening

Ensure the physical environment is welcoming, giving opportunity for the child or vulnerable adult to talk in private but making sure others are aware the conversation is taking place.

- It is especially important to allow time and space for the person to talk
- Above everything else listen without interrupting
- Be attentive and look at them whilst they are speaking
- Show acceptance of what they say (however unlikely the story may sound) by accurately reflecting back words or short phrases **they have used**
- Try to remain calm, even if on the inside you are feeling something different
- Be honest and don't make promises you can't keep regarding confidentiality
- If they decide not to tell you after all, accept their decision but let them know that you are always ready to listen.
- Use language that is age appropriate and, for those with disabilities, ensure there is someone available who understands sign language, Braille etc.

It is NOT your role to take a statement from a suspected victim nor confront the person who It is not your role to take a statement from a suspected victim nor confront the person who may be accused of carrying out the harm. Once a disclosure of harm has been made you should report your concerns to the designated safeguarding coordinators who will then report the matter to the appropriate authority.

HELPFUL RESPONSES

- You have done the right thing in telling
- I am glad you have told me
- I will try to help you

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DON'T SAY

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure this is true?
- Why? How? When? Who? Where?

- I am shocked, don't tell anyone else

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APPENDIX 3

Practice Guidelines

King's Church has developed practice guidelines for its ministries that work closely with children and with adults who have care and support needs. These ministries are:

- King's Kids (0-11s)
- Youth work (11-18s)
- Newday
- Youth residential trips
- Christians Against Poverty Debt Centre
- Chosen
- King's Table
- Learning English
- Little Stars
- Operations Team
- Production team
- Welcome Team

Team leaders will ensure that team members are given these guidelines to read and sign. Guidelines are updated regularly as appropriate and a copy of these can be obtained by contacting the church office.