



# Safeguarding Policy and Procedure

## Safeguarding Children

### **Purpose:**

The policy sets out the statutory requirements that apply to Unique Support for Unique People (US4UP) to ensure the safeguarding of children, young people and adults at risk of harm and abuse. Ellie Richards is responsible for all safeguarding duties that US4UP need to manage. Ellie has completed Safeguarding Lead Training for Children and Vulnerable Adults through Smart Horizons and is due to be renewed by 13/06/2026. To ensure safety and suitability, I can confirm that my role with US4UP has been subject to an enhanced Disclosure and Barring Check (DBS) which includes a barred list check, and I am registered on the update service. I am committed to the key principles of the Care Act in Safeguarding. This policy includes; definitions of abuse for both adults and children, those that may be at risk, mental capacity, information sharing and US4UP Safeguarding procedure.

### **Responsibilities:**

US4UP has a duty to safeguard and promote the welfare of all the individuals I come into contact with. Any safeguarding concerns will also be reported to the commissioner the child is assigned too.

If the concern is about an adult working with a child, the duty desk for LADO (Local Authority Designated Officer) triage service can be contacted on 01603 307797.

Safeguarding processes and procedures are reviewed annually.

I recognize that safeguarding is a shared responsibility and therefore will work with other professionals and agencies who may have different areas of expertise.

### **Legislation:**

The key legislative framework supporting this policy for children includes; Keeping Children Safe in Education 2025, The Children Act 1989, The Children Act 2004, United Nations convention on the Rights of the Child 1992, The Children and Families Act 2014, The Equality Act 2010 and Working Together to Safeguard Children 2023.

The key legislative framework supporting this policy for adults includes; The Mental Capacity Act 2005, The Care Act 2014, The Health and Social Care Act 2012, Human Rights Act 1998 and The Equality Act 2010.

### **Procedure:**

- Protecting the safety of everyone US4UP work with is our priority and it is our responsibility to act on any suspicion or evidence of harm and abuse.
- When taking a child out in the community, US4UP will only allow the child to use the disabled toilet to reduce the risk of harm.
- If an individual discloses to US4UP they are being harmed or abused, this will be taken seriously and concerns will be dealt with promptly, calling 999 if the threat is immediate.
- If it is believed the child is at risk of immediate harm, the police will be contacted on 999.
- US4UP may need to seek guidance to see if it is appropriate to make a safeguarding referral. Calling Norfolk's Children Advice and Duty Service (CADS) on 0344 800 8021. CADS are a team of experienced professionals in social work, police, probation and health. They will share information to decide if the child has been harmed or is likely to be harmed, sharing information to the appropriate team (ie; the police-to stop a crime). CADS will decide if the child would benefit from further support.

- We may contact The Multi-Agency Safeguarding Hub (MASH) for advice or Customer First, whichever is most appropriate.
- If required a referral will be made to Norfolk/Suffolk County Council, detailing either the disclosure or stating the concerns. Attaching a body map if necessary.
- US4UP can discuss any concerns with the parents if appropriate. However, if it is believed that the child is being harmed by a parent, this is not possible.
- Safeguarding concerns will be recorded on a password protected electronic file, along with a body map (if appropriate). This information will be deleted when US4UP are no longer supporting you. Review if and when appropriate.
- US4UP have a safeguarding record form they use for reporting concerns and allegations.

### **Definition of individuals at risk of harm:**

Everyone has the right to live in a safe environment, free from harm and abuse. US4UP have the responsibility to safeguard the individuals we support and extra care will be taken to those whom are least able to protect themselves.

### **Safeguarding Children**

For the purposes of this policy a child is an individual under the age of 18 years. Safeguarding is the action that is taken to promote the welfare of children and protect them from harm. Safeguarding means:

- protecting children from abuse and maltreatment
- preventing harm to children's health or development
- ensuring children grow up with the provision of safe and effective care
- taking action to enable all children and young people to have the best outcomes.

Child protection is part of the safeguarding process. It focuses on protecting individual children identified as suffering or likely to suffer significant harm. This

includes child protection procedures which detail how to respond to concerns about a child.

Abuse can happen to anyone, but research shows that some children who have experienced abuse share similar characteristics. This means they may be more vulnerable. Having one or more of these characteristics doesn't automatically mean a child will experience abuse or neglect – and not having any of them isn't a guarantee that a child will never be harmed.

Risk factors may include;

- A child with a disability
- Living or affected by domestic abuse
- Parental mental health
- Parental substance abuse
- Children in care
- Grooming

A child missing from education or home educated children are also considered to be a warning sign for safeguarding concerns when absent and not engaging as mentioned in the 2023 update of 'Working Together to Safeguard Children.'

Adults working with SEND children must be aware that due to their disability, they may not understand healthy relationships and personal boundaries. Dependant on their needs they may also lack understanding of what is safe to share and with whom. US4UP manage this by having sensitive conversations with children and parents, setting appropriate boundaries of what is acceptable and not, reinforcing this by using picture cards if this communication method works best for the child.

## **Prevent**

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children, young people and vulnerable adults:

- Keeping Children Safe in Education 2025
- Sexual Harassment between children in schools and colleges 2021

- Children Act 1989 and 2004
- Safeguarding Vulnerable Groups Act 2006
- Counter Terrorism and Security Act 2015
- Equality Act 2010

**We will keep our people safe by**

- All concerns and allegations of abuse (physical or mental) will be taken seriously and reported appropriately (to the police or Social Care Services).
- Any influences of extremism leading to radicalisation will be reported to the appropriate public authorities. With specific reference to Prevent, US4UP will:
  - respond to indications of ideological challenge of terrorism and the threat faced by those who promote it
  - report concerns to enable people from being draw into terrorism and get appropriate advice and support from relevant specialists
  - identify sectors and institutions where there are risks of radicalisation that need to be addressed.
  - Be aware of the Prevent Duty Guidelines in England and Wales; March 2015.
- We are aware of and implement data protection guidance.
- We do not tolerate bullying or abuse in any form within the workplace.
- We foster good relationships in the workplace which creates an environment where concerns of abuse can be raised. US4UP will take appropriate action in the event of suspected abuse.

**Safeguarding and prevent causes for concern include but are not limited to:**

- Withdrawal from family and friends, or changing circle of friends
- Hostility towards others
- Talking as if from a script
- Being unwilling to discuss their views
- Increased levels of anger
- Being secretive, particularly around what they are doing on the internet
- Using extremist terms to exclude people or incite violence

- Expressing the values of extremist or terrorist organisations (including political or religious based grievances)
- Supporting violence and terrorism towards other cultures, nationalities, or religions
- Writing or creating artwork that promotes extremist values
- Talking about being a 'martyr'
- Possession of extremist literature or other material, or trying to access extremist websites
- Possession of any material about weapons, explosives, or military training

Unique Support for Unique People aim to prevent the people we work with in becoming involved in terrorism and radicalisation. This can be achieved by offering appropriate advice and support at the nearest opportunity and following Safeguarding guidelines.

### **Safeguarding Adults**

For the purposes of this policy, adult at risk refers to someone over 18 years old who, according to paragraph 14.2 of the Care Act 2014:

- has care and support needs
- is experiencing, or is at risk of, abuse or neglect
- as a result of their care and support needs is unable to protect himself or herself against the abuse or neglect or the risk of it.
- If someone has care and support needs but is not currently receiving care or support from a health or care service they may still be an adult at risk

This definition includes individuals that are unable to look after themselves or have the inability to protect themselves from significant harm.

Risk factors may include;

- Mental illness (Including Dementia)
- Disabilities

- Elderly
- Victims of Domestic abuse
- Individuals in hospital
- Injury and/or Illness
- Homelessness
- Substance abuse
- An individual singled out for their ethnicity or religion

**See Appendix below for definitions of categories of harm.**

### **The Mental Capacity Act 2005**

This act is designed to protect and empower individuals over 16 years old who may lack the capacity to make decisions about their care and treatment. Individuals that could lack mental capacity could be but are not limited to; dementia, a brain injury, mental illness, a stroke or a severe learning disability. However, these conditions do not necessarily mean that the individual will lack capacity to make decisions. US4UP will assume everyone has mental capacity unless proven otherwise. We will support individuals to make decisions, when required US4UP will make decisions in their best interests and give the individual the most of their basic rights and freedom as possible.

### **Information sharing:**

It is important that individuals remain confident that US4UP will keep their personal information safe and secure. We will share information appropriately when safeguarding vulnerable individuals. General Data Protection Regulation (GDPR) strengthens personal data for all individuals. US4UP follow the 7 golden rules of information sharing;

- A record of what has been shared and to whom with details of decisions with reasoning.
- When possible US4UP will not disclose the identity of the individual.
- The Data Protection Act will not be a barrier to sharing information.

- US4UP will maintain an open and honest relationship with the individuals we work with. Discussing what information has been shared, with whom and its purpose to the individual and their representative (if appropriate). We would look to gain consent to share information and will only make that decision ourselves if we believe you are at risk of harm and/or abuse, or it is unsafe or inappropriate to do so.
- The safety and wellbeing of the individual is paramount and US4UP will consider them along with others that may be affected by actions taken.
- US4UP will seek your consent to share information wherever possible and your wishes will be respected. However, consent can be overridden if in the public interest.
- All information held and shared will always be relevant, necessary, proportionate, accurate, timely and secure.

**Procedure:**

- Protecting the safety of everyone US4UP work with is our priority and it is our responsibility to act on any suspicion or evidence of harm and abuse.
- If US4UP is concerned for you, we may discuss the possibility of making a welfare referral. We will not do this without your permission as you have the right to be in control of your life.
- When possible US4UP will discuss any concerns with you and your representative if appropriate. However, if we believe you are experiencing harm or abuse, there may be times when this is not possible.
- US4UP will endeavor to openly communicate with everyone that is supported and will listen and respect your decisions, as we want what is best for you.
- If an individual discloses to US4UP they are being harmed or abused, this will be taken seriously and concerns will be dealt with promptly, calling 999 if the threat is immediate.

- US4UP may need to seek guidance to see if it is appropriate to make a safeguarding referral. We would contact The Multi-Agency Safeguarding Hub or Customer First, whichever is most appropriate.
- A referral will be made to Suffolk/Norfolk County Council, detailing either the disclosure or stating the concerns.
- US4UP will always inform you of what personal information they have shared and what decisions have been made. We will be able to explain to you the reasons why it was felt necessary to share your information.
- Safeguarding concerns will be recorded on your electronic file, along with a body map (if appropriate). This information will be deleted when US4UP are no longer supporting you.
- These may change the risk assessment which could mean we are no longer able to support you.
- Any changes and updates will be communicated to you at the nearest opportunity.

**This policy will be reviewed January 2027**

## **Appendix**

### **Definitions of harm and abuse**

#### **Physical harm for adults**

Physical harm is any physical contact that results in discomfort, pain or injury. Examples of physical harm include: • assault, rough handling, hitting, slapping, punching, pushing, pinching, shaking, bruising or scalding • exposure to excessive heat or cold • a failure to treat sores or wounds • inappropriate use of medication (e.g. under- or overuse of medication, or the use of un-prescribed medication) • the use of inappropriate sanctions • the unlawful or inappropriate use of restraint or physical interventions • the deprivation of liberty

## **Physical harm for children**

Physical harm for children can include the examples above. Also supplying drugs to children, or the use of inappropriate or unauthorised methods of restraint, also fall under this definition. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces or causes, illness in a child.

## **Sexual harm and exploitation in adults**

Examples of sexual harm and exploitation can include the direct or indirect involvement of the vulnerable adult in sexual activity or relationships that:

- they do not want or have not consented to
- they cannot understand, and cannot consent to, since they lack the mental capacity
- they have been coerced into because the other person is in a position of trust, power or authority, e.g. a care worker.

Sexual harm can involve bruising or injury to the anal, genital or abdominal area, and the transmission of STD. It also includes inappropriate touching. Being forced to watch sexual activity is also a form of sexual exploitation.

## **Sexual harm and exploitation in children**

Sexual harm is defined as any form of sexual activity involving a child under the age of consent. It involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. Such activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts. They may also include non-contact activities, such as involving children in the looking at, or production of, pornographic material, causing them to watch sexual activities, or encouraging them to behave in sexually inappropriate ways. Downloading child pornography, taking indecent photographs of children, and sexualised texting, are all forms of sexual harm.

## **Psychological and emotional harm in adults**

This is behaviour that causes mental distress or has a harmful effect on an individual's emotional health and development. It can include:

- mocking, coercing, bullying, verbal attacks, intimidation or harassment
- demeaning, disrespectful, humiliating, racist, sexist or sarcastic comments, shouting, swearing or name-calling
- excessive or unwanted familiarity
- the denial of basic human and civil rights such

as self-expression, privacy and dignity • negating the right of the vulnerable adult to make choices • undermining the individual's self-esteem • isolation and over-dependence that has a harmful effect on the person's emotional health, development or well-being • the use of inflexible regimes and lack of choice.

### **Psychological and emotional harm in children**

Emotional harm is defined as action or inaction by others that causes mental distress. It involves the persistent emotional maltreatment of a child, which causes severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. Such harm may feature age or developmentally inappropriate expectations being imposed on a child. These can include interactions that are beyond the child's development capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. Emotional harm may also involve witnessing aggressive, violent or harmful behaviour towards another individual (e.g. domestic violence). It may also involve serious bullying, frequently causing a child to feel frightened or in danger, exploitation or corruption. Some level of emotional harm is involved in all types of maltreatment of a child (e.g. grooming, harassment, or inappropriate emotional involvement), though it may occur alone.

### **Neglect in adults**

Neglect occurs when a person's well-being is impaired because his or her care or social needs are not met. Examples of neglect include: • the failure to allow access to appropriate health, social care and educational services • the failure to provide adequate nutrition, hydration or heating, or access to appropriate medication • ignoring medical or physical needs, e.g. untreated weight loss, or a lack of care that results in pressure sores or uncharacteristic problems with continence • poor hygiene, e.g. lack of general cleanliness or soiled clothes not being changed • the failure to address the vulnerable individual's requests.

Neglect can be intentional or unintentional. Intentional neglect can include: • wilfully failing to provide care • wilfully preventing the vulnerable adult from getting the care

they need • being reckless about the consequences of the person not getting the care they need. Unintentional neglect can include: • a carer failing to meet the needs of the vulnerable adult because they do not understand their needs • a carer lacking knowledge about the services that are available • a carer's own needs preventing them from being able to give the care the person needs • an individual being unaware of, or lacking an understanding of, the possible effect on the vulnerable adult of a lack of action.

### **Neglect in children**

Neglect is a persistent failure to meet a child's basic physical and/or psychological needs, which is likely to result in 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 and/or adequate care-givers • ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

### **Female Genital Mutilation (FGM)**

Female genital mutilation (FGM) is a procedure where the female genitals are deliberately cut, injured or changed, without medical justification. It is also known as 'female circumcision' or 'cutting', and by other terms such as initiation, infibulation, sunna, gudniin, halalays, tahur, megrez and khitan. FGM is usually carried out on young girls between infancy and the age of 15, most commonly before puberty starts. It is very painful and can seriously harm the health of women and girls. It can also cause long-term problems with sex, childbirth and mental health. FGM is a form of child abuse and is illegal in the UK. It is a mandatory duty for a professional to report any concerns they have about a female under 18 years old, and to record when FGM is disclosed.

**These definitions of abuse and harm have been abstracted from Working Together to Safeguard Children 2023.**

**This Policy will be reviewed January 2027**