



**SOUTH KESTEVEN
DISTRICT COUNCIL**

Safeguarding Policy and Procedures 2024 - 2027



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DISTRICT COUNCIL**

Content	Page
Chapter 1 Introduction and Policy Overview	3
Chapter 2 Safeguarding is Everyone's Business – roles and responsibilities.	7
Chapter 3 Safeguarding Children and Young People	13
Chapter 4 Safeguarding Adults at Risk	29
Chapter 5 Domestic Abuse	44
Chapter 6 Prevent	50
Chapter 7 Hate Crime and Mate Crime	54
Chapter 8 Modern Slavery and Human Trafficking	59
Chapter 9 County Lines and Cuckooing	63
Chapter 10 Stalking	66
Chapter 11 Transient Families	68
Appendices	Page
A – SKDC Corporate Safeguarding Roles and Responsibilities	71
B – Training Structure and Programmes	73
C – Declaration for Staff, Consultants and Volunteers	76
D – safeguarding referral form	77
E – Safeguarding Incident Flow Chart	78

1. INTRODUCTION

1.1 Overview

- 1.1.1 Safeguarding encompasses a range of legal duties and responsibilities designed to protect people's health, wellbeing and human rights. Safeguarding exists so we can support people and help prevent problems from escalating, enabling them to live free from harm, abuse and neglect.
- 1.1.2 South Kesteven District Council has a range of statutory duties to carry out in relation to safeguarding and promoting the wellbeing of individuals and communities. This policy has been written to support the Council in protecting those who need safeguarding by providing a reference point and guidance for staff, elected members, volunteers, key contractors and consultants acting on behalf of the Council. It seeks to provide practical guidance to ensure that the Council plays its full part in safeguarding and promoting the wellbeing of its individuals and communities at all times.
- 1.1.3 Safeguarding involves a number of key agencies. Although not an exhaustive list this would typically include: Criminal Justice Agencies, Children's Services, Adult Services and Health Agencies. Our duties do not extend to areas that would be considered the responsibility of our partners, but we nonetheless have duties to cooperate and to have effective processes in place with regard to collaboration.
- 1.1.4 It is important that a consistent and effective approach is adopted across the Council to ensure we meet our statutory responsibilities, protect the community and protect the reputation of the Council. Broadly speaking, our safeguarding responsibilities include:
 - Having effective safeguarding policies and procedures in place
 - Knowing how to identify concerns
 - Having a properly trained, knowledgeable and capable workforce
 - Referring concerns to partner agencies
 - Working closely with partners such as the police, social services, health agencies and other local authorities
 - Undertaking and participating in regular audit and scrutiny to test our effectiveness

1.2 Policy Commitment

- 1.2.1 This Policy aims to protect: children, young people and adults who need safeguarding, including employees, volunteers, apprentices and students; those who use our services or are cared for by others who use our services; and those with whom our staff, elected members, volunteers and key contractors have contact. It aims to:
 - Ensure that the Council plays its full role in safeguarding and promoting the health, welfare and wellbeing of children, young people and adults at risk, at all times
 - Raise awareness of the duty of care and responsibilities relating to safeguarding throughout the Council
 - Ensure a person-centred approach which puts people's own needs and wishes first, hears their voice, respects their views and upholds their human rights
 - Achieve the best possible outcomes for all individuals, including enabling all children and young people to 'Stay Safe: Be Healthy: Enjoy and Achieve: Make a Positive Contribution and Achieve Economic Wellbeing' (Children Act 2004)
 - Secure stable relationships with professionals built on trust, with consistent support to meet individual needs and with all decisions taken in line with the Children Act 2004, Care Act 2014 and the Mental Capacity Act (MCA) 2005

- Ensure that everyone involved gets the support they need before a problem escalates
- Provide a proportionate, timely, supportive, informed and professional response to anyone experiencing abuse or neglect
- Actively encourage good practice amongst staff and promote wider awareness where possible (for example partner organisations and service user groups)
- Create a safe and healthy environment within all of our services, avoiding situations where abuse or allegations of abuse may occur
- Ensure that we safely recruit, train, supervise and support staff, elected members and volunteers appropriately and in accordance with Disclosure and Barring Service (DBS) guidance and the Council's DBS Policy:
<https://www.gov.uk/government/organisations/disclosure-and-barring-service>

1.3 External Links and Information

1.3.1 Safeguarding is complex and wide ranging. Given the breadth of importance of the areas contained within this policy, it cannot and must not be read and taken in isolation. Links to important external procedures and processes are included throughout the document and must be followed.

1.3.2 The principle external links are:

- [Lincolnshire Safeguarding Children Partnership \(LSCP\) Multi Agency Policy and Procedures:](#)
- [Working Together to Safeguard Children 2023:](#)
- [Lincolnshire Safeguarding Adults Board \(LSAB\) Multi Agency Policy and Procedures:](#)
- [Lincolnshire Multi Agency Domestic Abuse Guidance:](#)
- [Lincolnshire Prevent / Channel:](#)
- [Hate Crime Information and Guidance:](#)
- [Modern Slavery and National Referral Mechanism:](#)
- [Human Trafficking:](#)

1.4 Glossary of Terms

1.4.1 Throughout this document we use, and make reference to, various abbreviations and acronyms so have provided a glossary below.

Term	Initials	Explanation
Anti-Social Behaviour	ASB	Behaviour causing or likely to cause harassment, alarm and distress.
Anti-Social Behaviour Risk Assessment Conference	ASBRAC	Multi-agency risk assessment conference for victims of anti-social behaviour. Targeting high end ASB to protect the most vulnerable.
CHANNEL		Multi-agency approach to protect people at risk from radicalisation
CONTEST		The Government's Counter Terrorism Strategy
Customer Service Centre	CSC	Lincolnshire County Council mechanism to make safeguarding referrals or raise safeguarding queries.
Domestic Abuse (Stalking & Harassment and Honour Based Violence risk assessment)	DASH	Approved risk assessment tool used by professionals to identify risk of domestic abuse and to inform future safety planning and referrals to MARAC. http://www.dashriskchecklist.co.uk
Domestic Abuse Strategic Management Board	DASMB	A multi-agency board focussed on preventing, responding to and reviewing responses to domestic abuse in Lincolnshire
Disclosure and Barring Service	DBS	The DBS helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable individuals.
Independent Domestic Violence Advisor	IDVA	IDVA's support high risk domestic abuse victims at a point of crisis, supporting them to plan appropriate safety management strategies.
Independent Sexual Violence Advisor	ISVA	Similar to the role of an IDVA, but supporting victims of sexual violence to access support and safety planning.
Lincolnshire Safeguarding Adults Board	LSAB	A statutory multi-agency partnership, comprising of a range of organisations that all have stakeholder interest in the safeguarding adult's agenda. https://www.lincolnshire.gov.uk/safeguarding/lisab
Lincolnshire Safeguarding Children Partnership	LSCP	A statutory multi-agency board made up of representatives from the Local Authority, Police, Health Service, Probation Trust, Youth Offending Service, the Voluntary Sector and others. https://www.lincolnshire.gov.uk/safeguarding/lscp
Multi-Agency Risk Assessment Conference	MARAC	Multi-agency meetings where information about high risk domestic abuse victims (those at risk of murder or serious harm) is shared to develop a risk focussed, coordinated safety plan to support the victim.
Mental Capacity Act (2005)	MCA	The Mental Capacity Act 2005 covers people in England and Wales who can't make some or all decisions for themselves. The ability to understand and make a decision when it needs to be made is called 'mental capacity'.
National Referral Mechanism	NRM	The National Referral Mechanism (NRM) is a framework for identifying and referring potential victims of modern slavery and ensuring they receive the appropriate support.
PREVENT		A key strand of the Government's Counter-Terrorism Strategy with statutory Prevent Duty placed on "specified authorities".
Safer Lincolnshire Partnership	SLP	A statutory multi-agency board focussed on reducing crime and promoting community safety in Lincolnshire. https://www.lincolnshire.gov.uk/safer-lincolnshire-partnership/
Vulnerable Adult Panel	VAP	A local multi-agency panel to identify and progress housing and support solutions for households with complex needs.

1.5 Monitoring and Review

- 1.5.1 This policy and its procedures will be fully reviewed every three years and signed off by the **Cabinet**. The Policy will also be reviewed on an annual basis and updated where appropriate: however, if a weakness is identified in procedures or national guidelines change between reviews, the policy will be reviewed and revised by the Deputy Safeguarding Lead and agreed by the Designated Safeguarding Lead.
- 1.5.2 Changes to the policy or procedures will be communicated via management team and communication emails, with details placed on the intranet. Service Managers are responsible for ensuring the timely and accurate dissemination of information to their teams, supported by the Safeguarding Officers.
- 1.5.3 All policy revisions will be dated and recorded in the table below.

Version	Reason for change:	Amended by: (position & date)	Approved by: (position & date)	Published date:
2.0	Updates to legislation and statutory guidance and amendments to safeguarding officer detail	Carol Drury Community Engagement Manager January 2024	Jodie Archer Head of Housing Services February 2024	Feb 2024
2.1	Amendments to Safeguarding Officer detail	Carol Drury Community Engagement Manager April 2024	Sarah McQueen Interim Head of Service (Housing Options) May 2024	

2. SAFEGUARDING IS EVERYONE'S BUSINESS

"I don't work directly with customers, so does this policy apply to me"?

Yes, it does. Safeguarding is everyone's responsibility

2.1 Introduction

- 2.1.1 This policy provides guidance for anyone working on behalf of the Council who may come into contact with children, young people, vulnerable adults and their families. This policy affects every South Kesteven District Council staff member, elected member, volunteer and anyone working on behalf of and / or representing the Council.
- 2.1.2 All individuals to whom this policy and procedures apply must know where and how to access it, have a clear understanding of how, why and who to contact with their concerns and complete appropriate training in order to fulfil their responsibility in being able to identify and respond to wellbeing concerns, abuse or alleged abuse and poor practice. All officers who visit people's homes must be particularly alert to signs of abuse or neglect. All officers must always report and respond to concerns, doing so swiftly to ensure the safety and wellbeing of anyone at risk or suspected of being at risk. All employees should discuss concerns with the appropriate person or organisation as set out throughout this policy and its associated procedures. Please see the safeguarding incident flowchart at **Appendix E**.
- 2.1.3 It is the responsibility of those who have a role in engaging services, e.g. Directors, Assistant Directors and Heads of Service, to ensure that volunteers, key contractors and consultants meet these requirements.
- 2.1.4 If anyone subject to this policy finds they do not believe that they can fully comply with all requirements they must notify the Designated Safeguarding Lead immediately:

Designated Safeguarding Lead

Sarah McQueen – Interim Head of Service (Housing Options)

Email: sarah.mcqueen@southkesteven.gov.uk

Tel : 07917 455 375

Prevent Lead and Deputy Safeguarding Lead

Carol Drury – Community Engagement Manager

Email: carol.drury@southkesteven.gov.uk

Tel : 07712 199 085

Deputy Safeguarding Officer

Kati Conway – Senior Neighbourhoods Officer

Email: k.conway@southkesteven.gov.uk

Tel: 01476 406 307

2.2 Corporate Safeguarding Structure

- 2.2.1 Whilst safeguarding is everyone's business, the Council has named officers who take specific responsibility for:
- Supporting staff to report concerns
 - Developing and reviewing policies and procedures
 - Working in partnership with other organisations to develop best practice and shared learning
 - Providing, coordinating and monitoring training for staff
 - Providing training to elected members as part of the Council's induction process
 - Ensuring engagement and compliance with audit frameworks
 - Implementing audit recommendations and changes to legislation
 - Engaging in serious case reviews and domestic homicide reviews
- 2.2.2 The South Kesteven District Council corporate safeguarding roles and responsibilities are set out and summarised in **Appendix A**.

2.3 Training and Development

- 2.3.1 It is essential that everyone to whom this safeguarding policy applies is able to recognise and respond to possible safeguarding risks and issues. The level of training and knowledge required is determined by each person's role and their level of contact with vulnerable customers.
- 2.3.2 All training is delivered either face-to-face or via e-learning modules which are delivered and endorsed by the respective safeguarding, domestic abuse, Prevent boards and strategic groups. **Safeguarding training, appropriate to your role, is mandatory.** If you are unsure which level of training is relevant to your role or if you have any questions, please contact the Deputy Safeguarding Lead or your line manager for advice.
- 2.3.3 Depending on the level of training it is a requirement to complete, officers will either follow a 3 year or a 6 year rolling programme. The e-learning modules relating to the safeguarding of children and adults can be accessed via the Lincolnshire Safeguarding Children Partnership ([LSCP](#)) website. To find out which training you need to complete, please see **Appendix B**.
- 2.3.4 All elected members will be offered safeguarding training when they are elected, as part of the induction process. They will also be required to complete the e-learning induction module 'Introduction to Safeguarding Everyone in Lincolnshire' during their first year in office. Elected Members are also required to increase their safeguarding awareness during their term of office by use of the e-learning modules available on the [LSCP](#) website.
- 2.3.5 All staff without IT access will need to attend safeguarding briefing sessions. The briefing will cover general safeguarding principles, personal responsibilities and who to contact with any concerns.
- 2.3.6 Certain roles, mainly those listed for "officers with regular contact with the public", will require more in-depth, face-to-face or virtual training. This is will be a decision for line managers in relevant service areas e.g. Public Protection; Housing, Revenues and Benefits. All training can be accessed via the [LSCP](#) website. Please speak to your line manager if you feel any of these modules may be beneficial for you.

2.4 Reporting Concerns

- 2.4.1 Throughout this policy you will see the logo below. To access information and forms to enable you to report a concern (that is not an immediate risk of harm), you can click on this logo anywhere in the policy. The link will take you to the intranet. The appropriate reporting form must then be completed - childrens or adults (as appropriate) and forwarded to safeguarding@southkesteven.gov.uk . Once your concern has been received, the next steps and appropriate action will be decided. You must advise the Designated Safeguarding Lead if you have NOT made a direct referral to children's or adult services.



- 2.4.2 Alternatively, and for staff without IT access, please speak to your supervisor/line manager to report a concern.
- 2.4.3 **If you feel that a child, young person or vulnerable adult is at immediate risk of significant harm**, call the Police on 999. If however you think they are at risk but that risk is not immediate, you must take appropriate action, calling 101 if you think a crime has been committed, and by reporting the matter to Children's or Adult Services through the LCC Customer Services Centre (CSC) on 01522 782111 for children, 01522 782155 for adults, or emergency out of hours 01522 782333.
- 2.4.4 In all cases you should report the incident, giving details of how you responded, to the Designated Safeguarding Lead via safeguarding@southkesteven.gov.uk
- 2.4.5 Customer facing, front line services are most likely to come across safeguarding concerns in their day to day roles and should have an enhanced level of awareness. These staff groups/services will be more experienced in engaging with external agencies to report safeguarding concerns and should do so wherever possible (this should still be logged through the Designated Safeguarding Lead who will record it in the Council's tracker system).

2.5 Confidentiality

- 2.5.1 Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and disseminated on a need to know basis only. It is extremely important that allegations or concerns are not discussed, as any breach of confidentiality could be damaging to the child, young person or vulnerable adult, to their family and any child protection, adult safeguarding or police investigations that may follow.
- 2.5.2 Informing the parents of a child or young person you have concerns about needs to be dealt with in a sensitive way and should be done in consultation with children's services and the police (if appropriate). Any individual under suspicion has the right to be notified about the cause for concern. However, informing parents, carers or the person under suspicion (if this person is not the parent or carer) should never be done if it would put the person about whom you have a concern at further/greater risk. It is also important that the timing of any disclosure does not prejudice any investigation.

- 2.5.3 Recorded information (both paper and electronic) should be stored in a secure place, with access limited to officers named within the corporate safeguarding structure, in line with data protection laws.
- 2.5.4 If enquiries arise from the public (including parents) or any branch of the media, it is vital that staff, elected members, volunteers and anyone working for or on behalf of the Council is briefed as required so that they do not make any comments regarding the situation. The Designated Safeguarding Lead will be the designated spokesperson in the event of any public/media enquiries. In the absence of the Designated Safeguarding Lead, the query should be escalated to the Chief Executive.

2.6 Information Sharing

- 2.6.1 SKDC is signed up to Information Sharing Agreements with the Safer Lincolnshire Partnership and the Lincolnshire Safeguarding Adults Board, allowing full sharing of information between signatories within the constraints of the GDPR. SKDC is also signed up to specific information sharing agreements referring to Multi-Agency Risk Assessment Conference (MARAC), Anti-Social Behaviour Risk Assessment Conference (ASBRAC) and E-CINS.
- 2.6.2 The Seven Golden Rules of Information Sharing:
- Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing but provide a framework to ensure that personal information about living individuals is shared appropriately.
 - Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
 - Seek advice from other practitioners, or your information governance lead, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
 - Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.
 - Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
 - Necessary, proportionate, relevant, adequate, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely (see principles).
 - Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

2.7 Curiosity and Uncertainty

- 2.7.1 Professional curiosity has been a recurring theme in Serious Case Reviews (SCR) across Lincolnshire. Professional curiosity is about having the capacity and communication skills to explore and understand what is happening with an individual or family. It is about enquiring more deeply and using proactive questioning and challenge. It is about challenging your own responsibility and knowing when to act rather than making assumptions or taking things at face value.
- 2.7.2 Respectful uncertainty is about considering and where necessary challenging responses, looking beneath the surface and testing the facts and 'gut feelings' rather than accepting an explanation, however plausible.

2.8 Inter-Agency Disputes and Escalation Policies

- 2.8.1 When working in the arena of safeguarding, it is inevitable that at times there will be professional disagreement. Whilst this is accepted, it is vital that such differences do not affect the outcomes for children, young people and vulnerable adults or detract from ensuring that they are safeguarded.
- 2.8.2 Disagreements could arise in a number of areas of multi-agency working as well as within single-agency working, but are most likely to arise in relation to:
- Criteria for referrals
 - Outcomes of assessments
 - Roles and responsibilities of workers
 - Service provision
 - Information sharing and communication
- 2.8.3 Having an Escalation Policy became a statutory requirement following a number of Serious Case Reviews.
- 2.8.4 If you are concerned or unhappy with the decisions or action/lack of action of another agency when referring a case or securing their involvement in supporting an individual, issues can be escalated through the Designated Safeguarding Lead or the Deputy Safeguarding Lead, as they are required to challenge the managers within that partner agency by using the Joint Professional Resolution and Escalation Policy set out by the LSOP or LSAB or other overarching body. This Joint Professional Resolution and Escalation Policy can be found [here](#).
- 2.8.5 **If you feel that you need to use this process, please speak to the Designated Safeguarding Lead before making a referral.**

2.9 Complaints and Whistleblowing

- 2.9.1 Staff, elected Members and volunteers are advised to follow the District Council's Customer Feedback and Whistle Blowing procedures for complaints and concerns (available on the intranet and from HR for officers and Members who have no access to a computer). If the issue for complaint or whistle blowing involves a Safeguarding issue, officers and members should report the issue through the Designated Safeguarding Lead who will ensure that the Lincolnshire Safeguarding Adults Board or the Lincolnshire Safeguarding Children Partnership procedures are adhered to and the Local Authority Designated Officer (LADO) is informed if appropriate. For more information go to: www.proceduresonline.com/lincolnshirescb
- 2.9.2 Professionals can also raise concerns anonymously over how child protection issues are being handled by contacting the NSPCC whistleblowing advice line on 0800 028 0285 or help@nspcc.org.uk

2.10 Audit and Quality Assurance

- 2.10.1 As a statutory agency, South Kesteven District Council is subject to a number of internal and external audits and quality assurance mechanisms to ensure compliance and effective practices in each of the areas covered by this policy and associated procedures. All audit recommendations will be integrated into a corporate safeguarding action plan as required. Updates are provided to the relevant Overview and Scrutiny Committee. An annual report is made to the Council's Governance and Audit Committee to provide assurance that the Council continues to be vigilant on safeguarding matters, fulfilling its legal duties.

2.11 Continuous Improvement

- 2.11.1 If you feel that we could improve on safeguarding in any way, from changing the way we communicate through to changing the way we work, please speak to either the Designated Safeguarding Lead or the Deputy Safeguarding Lead.

2.12 Safer Recruitment

- 2.12.1 It is the duty of employers to identify candidates who may be unsuitable for certain jobs, especially jobs that involve working with vulnerable individuals. The Human Resources team can offer advice and support to the Council to enable relevant officers to make safer recruitment decisions in line with the requirements of the Disclosure and Barring Service (DBS). SKDC officers are responsible for the recruitment and management of staff within their service areas but the Human Resources service provides support, guidance and direction in terms of good practice and best approach.

3. SAFEGUARDING CHILDREN AND YOUNG PEOPLE

“I don’t directly work with children or young people, so does this policy apply to me?”

Yes it does. Safeguarding is everyone’s responsibility

3.1 Introduction

- 3.1.1 This policy chapter applies to all situations within the Council’s operation, which could potentially involve children or young people, from children running around in a reception area to home visits where children or young people are present.
- 3.1.2 Although your work may not directly impact on, or relate to, children or young people, you have a duty to recognise and respond to child protection situations and concerns appropriately and you must be aware of this policy and its procedures.
- 3.1.3 Young people (under 18) may also be working within the Council’s buildings or services; either as members of staff, or as part of apprenticeships or work experience schemes. All staff must remember that these individuals are children and, as such, are protected by this policy and associated procedures.

“Children who need help and protection deserve high quality and effective support. This requires individuals, agencies, and organisations to be clear about their own and each other’s roles and responsibilities, and how they work together”.

Working Together (2023)

- 3.1.4 The **Children Act (2004)** places a duty on key statutory agencies to safeguard and promote the welfare of children. The Act embodies five principles that are key to wellbeing in children and young people:
- Being healthy
 - Staying safe
 - Enjoying and achieving
 - Making a positive contribution
 - Achieving economic wellbeing
- 3.1.5 To assist us all in our duty of care of children and young people, this policy and its associated procedures reflect the principles and practices promoted in the most recent Government ‘Working Together’ guidance, which sets out key principles of safeguarding and promoting the welfare of children as:
- providing help and support to meet the needs of children as soon as problems emerge
 - protecting children from maltreatment, whether that is within or outside the home, including online
 - preventing impairment of children’s mental and physical health or development
 - ensuring that children grow up in circumstances consistent with the provision of safe and effective care
 - promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children
 - taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children’s Social Care National Framework.
- 3.1.6 You should always exercise professional curiosity and respectful uncertainty, looking beneath the surface, testing the facts and also use your ‘gut feelings’ rather than simply accepting explanations, however plausible. See “Curiosity and Uncertainty” on page 11 for more information.

3.2 Understanding Safeguarding Thresholds

“successful outcomes for children depend on strong multi-agency partnership working across the whole system of help, support and protection including effective work from all agencies with parents, carers, and families.”

Working Together (2023)

- 3.2.1 The needs of children and families are constantly changing and at different times in their lives they will have differing levels of involvement from a range of services, from universal, targeted and specialist support services. It is important that professionals work together effectively to ensure that families experience smooth transition between services and that all services supporting the family remain focused on the needs of the child. It is also critical that all professionals remain aware of their responsibilities in relation to safeguarding and protecting children.
- 3.2.2 The support and services available to children, young people and families are defined according to their needs at any given time and are set out in the diagram below:



Threshold	Overview	Details
Universal services	For children with no additional needs.	Available to all children, young people and families, working with families to promote positive outcomes for everyone, by providing access to education, health services and other positive activities. It is important that all practitioners can identify where children and families would benefit from extra help at an early stage.
Early Help	Targeted Services for children with additional needs.	Children, young people and families who may need support either through a single agency or through an integrated multi-agency response. There may be signs that without support a child may not achieve good outcomes and fulfil their potential. Targeted services can prevent escalation into specialist services and can assist with continuing lower level support once a higher level intervention has been completed.
Specialist services	For children with multiple / complex needs	Families with individual or multiple complex needs or where a specific disability or condition is diagnosed.
Immediate Safeguarding	For immediate care/protection	To protect children and young people at immediate risk. Professionals have a duty to recognise and report safeguarding concerns.

3.3 Early Intervention – Early Help

- 3.3.1 Lincolnshire's Early Help offer can be simply described as early intervention to ensure that children and families get the support they need before a problem escalates.

“Early help is support for children of all ages that improves a family’s resilience and outcomes or reduces the chance of a problem getting worse.”

Working Together (2023)

- 3.3.2 Early Help aims to identify the need for help for children and families as soon as problems start to emerge, or when there is a strong likelihood that problems will emerge in the future. The Early Help offer is available at any point throughout childhood and adolescence. Early Help builds on what is working well and involves action planning for what needs to change and who will take what action, enabling everyone involved to own the solutions.
- 3.3.3 An Early Help Assessment should be completed whenever there is a concern about a child (except when there is an immediate risk of serious harm). This should be completed by the person who has contact with the individual and their family and should be used to identify specific actions with those involved and to determine whether the issue needs further escalation and referral to Children's Services. The assessment should be undertaken with the agreement of the child and their parents/carers. It should involve the child and family as well as all the professionals who are working with them. Full details of Lincolnshire's Early Help offer can be found [here](#). If you are unsure about making an Early Help Assessment, please speak to the Designated Safeguarding Lead or the Deputy Safeguarding Lead.
- 3.3.4 Early Help Assessments are NOT an alternative to formal safeguarding referrals.

3.4 What is Child Abuse?

- 3.4.1 There are many ways in which children and young people can be harmed. A person may abuse or neglect a child or young person by inflicting harm, or by failing to act to prevent harm. Children and young people may be abused in a family, or in an institutional or community setting. Children and young people may be abused by someone known to them or, more rarely, by a stranger. Children and young people can be subjected to more than one form of abuse at any one time. Children and young people may also be perpetrators of abuse against other children or against adults. In such cases, they may still also require safeguarding themselves.
- 3.4.2 Sometimes a child 'fails to thrive' and they do not achieve the expected growth and development for their age. Although there may be a medical cause, the majority of children who fail to thrive have no organic disorders. Failure to thrive often occurs on the overall context of emotional deprivation and neglect; the child not only fails to grow but fails to develop intellectually and emotionally.

Types of Abuse

Physical Abuse:

This can include: hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm. Physical abuse, as well as being a result of a deliberate act, can also be caused through omission or failure to act to protect. Physical harm may also be caused when a parent or carer fabricates symptoms or deliberately causes ill health to a child, young person or vulnerable adult.

Emotional Abuse:

This is the persistent emotional maltreatment of a child, young person or vulnerable adult such as to cause severe and persistent adverse effects on their emotional development. It may involve conveying to them that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

Emotional abuse may feature age or developmentally inappropriate expectations being imposed on children or young people. It may also involve causing children or young people to frequently feel frightened or in danger, or the exploitation or corruption of a child or young person. It can include the seeing or hearing of ill-treatment of others, for example through domestic abuse. It may also include the over-protection and limitation of exploration and learning, or preventing the child from participating in normal social interaction.

Sexual Abuse:

This involves forcing or enticing a child, young person or vulnerable adult to take part in sexual activities, whether or not they are aware of or consent to what is happening. The activities may involve physical contact, including penetrative acts such as prostitution, rape, buggery or oral sex or non-penetrative acts such as fondling.

Sexual abuse may also include non-contact activities, such as involvement in looking at, or in the production of, indecent material or watching sexual activities or encouraging them to act in sexually inappropriate ways. Boys and girls can be sexually abused by males and/or females, by adults and/or by other young people.

Child Sexual Exploitation (CSE) is a form of sexual abuse that is based on an ongoing exploitative relationship between perpetrator(s) and child/children.

Neglect:

Neglect is the persistent failure to meet a child or young person's basic physical and/or psychological needs, likely to result in the serious impairment of health or development. It may also include neglect of, or unresponsiveness to, a child or young person's basic emotional needs.

Neglect may:

- Involve a parent or carer failing to provide adequate food, clothing or shelter including exclusion from home or abandonment;
- Involve failing to protect from physical and emotional harm or danger;
- Occur during pregnancy as a result of maternal substance abuse or self-harm (please refer to the Lincolnshire Safeguarding Children Partnership's pre-birth protocol for more information).

3.5 Recognising Abuse and Neglect

- 3.5.1 Recognising child abuse is not easy. It is not your responsibility to decide whether or not child abuse has taken place or if a child or young person is at significant risk. You do however have a responsibility to act if you have concerns and to pass on information.
- 3.5.2 Many safeguarding concerns arise on a day-to-day basis, and often they will not develop into abuse or neglect. If you have any concerns or questions, please speak to the Designated Safeguarding Lead or Deputy Safeguarding Lead as soon as possible.
- 3.5.3 The role of staff, elected members, volunteers and others working for or on behalf of the Council is to help identify concerns and pass them on to the relevant agency. It is the role of Children's Services, Adult Services and/or the Police to investigate allegations or concerns.

REMEMBER:

It is not your job to judge or to investigate, but to inform and share your concerns.

- 3.5.4 Every child and young person is unique and it is difficult to predict how their behaviour will change as a result of their experience of abuse. The table below outlines some physical signs and behavioural indicators that may be associated with a risk of abuse. It is important to remember that many children and young people will exhibit some of these signs and indicators at some time, but the presence of one or more should not be taken as proof that abuse is occurring. There may be other reasons for changes in behaviour, for example: bereavement, the birth of a new baby in the family, relationship problems between parents/carers.
- 3.5.5 All children, regardless of background, should be given the same level of support and protection. It is important to have an understanding and awareness that some children and young people are potentially more vulnerable and may have additional care needs. This could include children young people and vulnerable adults from families affected by domestic abuse, substance misuse and mental illness as well as those from ethnic minority backgrounds, migrant and travelling communities, those with a disability or learning difficulty, those living away from home, unaccompanied asylum seeking children (UASC), children or young people in care or other temporary accommodation, as well as those who are in custody or have run away from home. Regard should always be given to a young person's religion or belief.
- 3.5.6 Additional guidance is available in the Policy and Procedures Manual of the Lincolnshire Safeguarding Children Partnership, found [here](#).

Type of abuse	Physical Indicator	Behavioural Indicator
Physical	<ul style="list-style-type: none"> • Frequent or unexplained bruising, marks or injury • Bruises which reflect hand marks or shapes of articles e.g. belts • Cigarette burns • Bite marks • Unexplained broken or fractured bones • Scalds • Female Genital Mutilation 	<ul style="list-style-type: none"> • Fear of parent being contacted • Behavioural extremes – aggressive / angry outbursts or withdrawn • Fear of going home • Flinching when approached/touched • Depression • Keeping arms/legs covered • Reluctance to change clothes • Panics in response to pain • Reports injury caused by parents
Emotional	<ul style="list-style-type: none"> • Delays in physical development or progress • Sudden speech disorders • Failure to thrive • Bedwetting and/or diarrhoea • Frequent psychosomatic complaints, headaches, nausea, abdominal pains 	<ul style="list-style-type: none"> • Mental or emotional development lags • Behaviours inappropriate for age • Fear of failure, overly high standards, reluctance to play • Fears consequences of actions, often leading to lying • Extreme withdrawal or aggressiveness, mood swings • Overly compliant, too well-mannered • Excessive neatness and cleanliness • Extreme attention-seeking behaviours • Poor peer relationships • Severe depression, may be suicidal • Runaway attempts (missing children) • Violence is a subject for art/writing • Complaints of social isolation • Forbidden contact with other children
Sexual	<ul style="list-style-type: none"> • Pain/itching in the genital area • Bruising/bleeding near genital area • Sexually transmitted disease • Vaginal discharge/infection • Frequent unexplained abdominal pains • Discomfort when walking/sitting • Bed wetting • Excessive crying 	<ul style="list-style-type: none"> • Inappropriate sexual behaviour or knowledge for the child's age • Promiscuity • Sudden changes in behaviour • Running away from home (missing children) • Emotional withdrawal through lack of trust in adults • Unexplained money or 'gifts' • Inappropriate sexually explicit drawings or stories • Bedwetting or soiling • Overeating or anorexia • Sleep disturbances • Secrets which cannot be told • Substance/drug misuse • Reports of assault
Neglect	<ul style="list-style-type: none"> • Constant hunger • Poor hygiene • Weight loss/underweight • Inappropriate dress • Consistent lack of supervision/abandonment • Unattended physical problems or medical needs 	<ul style="list-style-type: none"> • Begging/stealing food • Truancy/late for school • Constantly tired/listless • Regularly alone/unsupervised • Poor relationship with care giver

3.6 Child Sexual Exploitation

- 3.6.1 The sexual exploitation of children and young people is both a child protection issue and a complex crime. Child Sexual Exploitation is based on an ongoing exploitative relationship between perpetrator(s) and child/children. A child or young person under the age of 18 is sexually exploited when they have received 'something' (e.g. food, accommodation, drugs, alcohol, gifts, money) in exchange for sex.
- 3.6.2 Sexually exploitative relationships are characterised by an imbalance of power and the use of controlling behaviours to keep the victim in a dependent position. A child or young person may not recognise the level of risk or harm that they are exposed to. It is particularly important that professionals exercise judgment when assessing a child or young person's circumstances.
- 3.6.3 You should be aware of the following when considering the risks of a young person experiencing or being at risk of Child Sexual Exploitation:
- Boys and girls are equally vulnerable to being victims of child sexual exploitation
 - Coercers and perpetrators are usually adults, of either gender, in a position of power, but can be other children and young people
 - Young people may exchange or sell sex as a result of constrained choices such as poverty, isolation and historic abuse – it is important to remember at all times – these young people are victims
 - Parents/carers may be involved in the sexual exploitation of their children, or may fail to prevent/protect them from it
 - Groups of children and young people and multiple perpetrators may be involved
 - No child under 13 years or with a learning disability will be assessed as Low Risk if their behaviours indicate involvement in CSE
 - Children and young people with additional needs up to and including those aged 25 years require special consideration
 - Disclosure of information may take time and evident risks may only emerge during on-going assessment, support and interventions with the young person and/or their family
- 3.6.4 **Grooming:** Child sexual exploitation usually involves a 'grooming' stage. Grooming describes the variety of methods that are used to manipulate and control victims including:
- The giving of gifts or presents
 - The giving of rewards – like mobile phone top-ups or games credits
 - False promises of love and/or affection
 - The supply of alcohol and/or drugs
- 3.6.5 It is very common for the grooming of children and young people to take place online. Children and young people can make themselves vulnerable through their online activities and abusers are quick to exploit this. Victims may have been persuaded or coerced into posting indecent images or performing sexual acts on webcam. Online grooming can also progress to meeting face-to-face.
- 3.6.6 The early stages of the grooming process can be an exciting time for a child or young person, particularly if they are given high status gifts or are taken to parties, pubs or clubs that they wouldn't normally get into. Grooming is a way of developing an exclusive bond with the victim. Adolescents are particularly vulnerable to grooming where the abuser deceptively constructs a connection between sought after love or affection. As a result the child or young person will believe that this person is actually their boyfriend or girlfriend – having no prior experience of sex or love against which to measure the relationship.

- 3.6.7 **Gang Activity:** Children and young people associating with or targeted by gang members are at particular risk of being sexually exploited and abused. All agencies working with young people need to ensure that they work together to prevent young people being drawn into gangs, to support those who have been drawn into the margins of gangs and to protect those who are at immediate risk of harm from gangs.
- 3.6.8 **Impact of Sexual Exploitation on Children and Families:** As a result of the grooming process, children and young people will rarely recognise the coercive and abusive nature of the relationship they are involved in and will often prioritise their attachment or loyalty to the offender over their own safety. Perpetrators of sexual exploitation are very skilled at driving a wedge between a child and their family and will also isolate them from their usual friends and support networks. Sexually exploited children also suffer physical, psychological, behavioural, and attitudinal changes, all of which present severe challenges to their parents and carers.
- 3.6.9 While there is some evidence that an unstable home life can increase the vulnerability of child sexual exploitation, the grooming process can bring chaos to a formerly 'stable' household. Further information about child sexual exploitation can be found [here](#).

3.7 Child Criminal Exploitation

- 3.7.1 There is no legal definition of Child Criminal Exploitation (CCE), however, it is increasingly being recognised as a major factor behind crime in communities across the UK, while also simultaneously victimising vulnerable young people and leaving them at risk of harm.
- 3.7.2 CCE often occurs without the victim being aware that they are being exploited and involves young people being encouraged, cajoled or threatened to carry out crime for the benefit of others. In return they are offered friendship or peer acceptance, but also cigarettes, drugs (especially cannabis), alcohol or even food and accommodation.
- 3.7.3 Children as young as 10 or 11 are being groomed to enter gangs and commit crime on behalf of older criminals. These young people are being exploited and, by being persuaded or lured into carrying out illegal activities, often with the promise of something they desire as a reward, they become incredibly vulnerable.
- 3.7.4 Victims of CCE are often fearful of getting into trouble themselves – for the very actions they have been exploited into carrying out – so it can also be difficult to get these young people to come forward and speak out about their situation.
- 3.7.5 Lincolnshire has Multi Agency Child Exploitation (MACE) arrangements which contribute to the delivery of the child exploitation strategic priority and outcome. Further information can be found [here](#).
- 3.7.6 For more information on one of the main types of criminal exploitation, please see Chapter 9 – County Lines and Cuckooing.

Children experiencing exploitation – whether sexual or criminal are likely to go missing or run away from home. More information about missing children can be found [here](#)

3.8 Contextual Safeguarding

- 3.8.1 Contextual Safeguarding is a new approach to safeguarding children and young people, which aims to understand and respond to young people's experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships.
- 3.8.2 Contextual Safeguarding aims to ensure that children's service's practitioners engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognises that assessment of, and intervention with, these spaces is a critical part of safeguarding practices. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.

3.9 Impact of Sustained Abuse and Neglect

- 3.9.1 The sustained abuse or neglect of children physically, emotionally, or sexually can have long-term effects on the child's health, development and well-being. It can impact significantly on their self-esteem, self-image and on their perception of self and of others. The effects can also extend into adult life and lead to difficulties in forming and sustaining positive and close relationships. In some situations it can affect parenting ability and can lead to the perpetration of abuse on others.
- 3.9.2 The context in which the abuse takes place may also be significant. The interaction between a number of different factors can serve to minimise or increase the likelihood or level of significant harm. Relevant factors will include the individual child's coping and adapting strategies, support from family or social network, the impact and quality of professional interventions and subsequent life events.
- 3.9.3 Physical Abuse: can lead directly to neurological damage, as well as physical injuries, disability or at the extreme, death. Harm may be caused to children, both by the abuse itself, and by the abuse taking place in a wider family or institutional context of conflict and aggression. Physical abuse has been linked to aggressive behaviour in children, emotional and behavioural problems and educational difficulties.
- 3.9.4 Severe Neglect: associated with major impairment of growth and intellectual development. Persistent neglect can lead to serious impairment of health and development, and long term difficulties with social functioning, relationship and educational progress. Neglect can also result in extreme cases in death.
- 3.9.5 Sexual Abuse: can lead to disturbed behaviour including self-harm, inappropriate sexualised behaviour and adverse effects which may last into adulthood. The severity of impact is believed to increase the longer the abuse continues; the more extensive the abuse and the older the child. A number of features of sexual abuse have also been linked with the severity of impact, including the extent of premeditation, the degree of threat and coercion, sadism and bizarre or unusual elements. A child's ability to cope with the experience of sexual abuse, once recognised or disclosed, is strengthened by the support of a non-abusive adult or carer who believes the child, helps the child to understand the abuse and is able to offer help and protection.

- 3.9.6 Emotional Abuse: There is increasing evidence of the adverse long-term consequences for children's development where they have been subject to sustained emotional abuse. Emotional abuse has an important impact on a developing child's mental health, behaviour and self-esteem. It can be especially damaging in infancy. Underlying emotional abuse may be as important, if not more so, than other more visible forms of abuse in terms of its impact on the child. Domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to such abuse.

3.10 Significant Harm

*The Children Act 1989 introduced **significant harm** as the threshold that justifies compulsory intervention in family life in the best interests of the child and gives Local Authorities a duty to make enquiries to decide whether they should take action to safeguard or promote the wellbeing of a child who is suffering, or likely to suffer significant harm. Children experiencing exploitation – whether sexual or criminal are likely to go missing or run away from home. More information about missing children can be found [here](#)*

- 3.10.1 There are no absolute criteria to rely on when judging what constitutes significant harm, but considerations should include:
- the severity of ill-treatment
 - the degree and the extent of physical harm
 - the duration and frequency of abuse and neglect
 - the extent of premeditation
 - the degree of threat, coercion, sadism
- 3.10.2 Each of these is associated with more severe effects on the child and/or relatively greater difficulty in being able to overcome their impact. Sometimes a single traumatic event may constitute significant harm, e.g. a violent assault, suffocation or poisoning. More often, suffering significant harm is a compilation of significant events, both acute and long-standing, which interrupt, change or damage the child's physical and psychological development.
- 3.10.3 Some children live in family and social circumstances where their health and development are neglected. For them, it is the corrosiveness of long term emotional, physical or sexual abuse that causes impairment to the extent of constituting significant harm. In each case, it is necessary to consider any ill-treatment alongside the family's strengths and supports.
- 3.10.4 The child's reactions, his or her perceptions, and wishes and feelings should be ascertained and given due consideration, so far as is reasonably practicable and consistent with the child's welfare and having regard to the child's age and understanding.
- 3.10.5 The following considerations may indicate that further enquiry is needed and should be considered when assessing risks to a child. Some of these have arisen from learning from serious case reviews following incidents of significant harm:
- An unexplained delay in seeking treatment that is obviously needed
 - An unawareness or denial of any injury, pain or loss of function
 - Incompatible explanations offered or several different explanations given for a child's illness or injury
 - A child reacting in a way that is inappropriate to his/her age or development
 - Reluctance to give information or failure to mention previous known injuries

- Frequent attendances at Accident and Emergency Departments or use of different doctors and Accident and Emergency Departments
- Frequent presentation of minor injuries (which if ignored could lead to a more serious injury);
- Unrealistic expectations/constant complaints about the child
- Alcohol and/or drug misuse or other substance misuse
- A parent's request to remove a child from home or indication of difficulties in coping with the child
- Domestic abuse
- Parental mental ill health
- The age of the child and the pressures of caring for a number of children in one household
- Parental conflict about separation and contact with serious threats to harm the children

3.11 Responding to Disclosures, Concerns and Allegations

3.11.1 These procedures are intended as a guide to help you understand what action should be taken if you have concerns about, or encounter a case of, alleged or suspected child abuse.

3.11.2 **Responding to a child or young person making an allegation of abuse:** Abused children and young people will only tell people they trust and with whom they feel safe. By listening and taking seriously what the child or young person is saying, you are already helping the situation. The following points are a guide to help you respond appropriately:

- Stay calm
- **Listen** carefully to what is said
- Find an appropriate early opportunity to explain that the information may need to be shared with others – **do not promise to keep secrets**
- Allow the child or young person to continue at their own pace
- Ask questions for clarification only, and **avoid asking questions that suggest a particular answer**
- Reassure them that they have done the right thing in telling you
- Tell them what you will do next and with whom the information will be shared
- Record in writing all the details that you are aware of and what was said using the child or young person's own words, as soon as possible. In your record you should include:
 - The date and time
 - The child or young person's name, address and date of birth
 - The nature of the allegation or incident
 - A concise, factual description of any visible injuries, including a diagram if possible
 - Your observations e.g. a description of the child or young person's behaviour and physical and emotional state
 - Exactly what the child or young person said and what you said. Record the child or young person's account of what has happened as closely as possible
 - Any action you took as a result of your concerns e.g. who you spoke to and resulting actions. Include names, addresses and telephone numbers
 - Sign and date your record (signature not required with electronic forms)
 - Store the information in accordance with relevant procedures, i.e. GDPR
- Follow the Council's reporting procedures or speak to the Designated Safeguarding Lead or the Deputy Safeguarding Lead.

3.11.3 Responding to allegations or concerns against a member of staff, elected member, volunteer or any other person:

- Take the allegation or concern seriously
- Consider any allegation or concern to be potentially dangerous to the child or young person
- Record in writing all the details that you are aware of as soon as possible

3.11.4 If an allegation of abuse is made against a member of staff, elected member or volunteer, the Designated Safeguarding Lead must be informed immediately.

3.11.5 The Designated Safeguarding Lead will inform the Chief Executive (providing that the allegation is not against them) and Local Authority Designated Officer for Allegations (LADO), if appropriate to do so, and consideration will be given to suspending the member of staff from work or moving them to alternative duties not involving contact with children, young people, or adults at risk – in accordance with the Council's Disciplinary Procedure. This should be considered in conjunction with HR or the Monitoring Officer, as appropriate to the situation. If the Designated Safeguarding Lead is the subject of the suspicion/allegation, the report must be made directly to the Chief Executive.

3.11.6 If it is necessary to investigate events surrounding the complaint, this will be done in accordance with advice from the Local Authority Designated Officer (LADO), if appropriate, through the Council's Disciplinary Policy and Procedure, and will include any further procedures as set out by the Lincolnshire Safeguarding Children Partnership.

3.11.7 If the complaint is against someone other than a member of staff, elected member, volunteer, contractor or consultant e.g. parent, carer, other service user, etc., then the Designated Safeguarding Lead must be informed in line with the Council's reporting procedures.

3.11.8 It is important to remember that the language used in recording safeguarding concerns should remain objective and those making records should not use negative, victim-blaming or inflammatory language to describe children and young people.

3.12 Reporting Concerns

3.12.1 Anybody subject to this policy may witness or be informed of an issue that they feel should be referred to Children's Services.

3.12.2 Throughout this policy you will see the logo below. To access information and forms to enable you to report a concern (that is not an immediate risk of harm), you can click on this logo anywhere in the policy. The link will take you to the intranet. The appropriate reporting form must then be completed - childrens or adults (as appropriate) and forwarded to safeguarding@southkesteven.gov.uk . Once your concern has been received, the next steps and appropriate action will be decided. You must advise the Designated Safeguarding Lead if you have NOT made a direct referral to children's or adult services.



- 3.12.3 Alternatively, and for staff without IT access, please speak to your line manager/supervisor to report a concern.
- 3.12.4 If you feel that a child or young person is at immediate risk of significant harm, then you must call the Police on 999. If however you think they are at risk but that risk is not immediate, you must take appropriate action, calling 101 if you think a crime has been committed, and by reporting the matter to the LCC Customer Services Centre (CSC) on 01522 782111 for children, 01522 782155 for adults, or emergency out of hours 01522 782333.
- 3.12.5 In all cases you should report the incident to the Designated Safeguarding Lead accordingly.
- 3.12.6 Customer facing, front line services are most likely to come across safeguarding concerns in their day to day roles and should have an enhanced level of awareness. These staff groups/services will be more experienced in engaging with external agencies to report safeguarding concerns and should do so wherever possible.
- 3.12.7 The Council's Designated Safeguarding Lead or the Deputy Safeguarding Lead should, where there is felt to be no immediate risk to the child, be consulted prior to the referral being made. Where it is not possible to do this the same working day, then an appropriate referral should be made by the individual with the concern, supported by their line manager. Child protection referrals do not need consent from the child or their family, but it is best practice to seek this wherever possible.
- 3.12.8 It is possible that the Council will have allegations referred to them by third parties. For example, neighbours may contact staff to advise they suspect the welfare of a child or young person is suffering. Under these circumstances people should be encouraged to ring the customer services centre themselves directly (members of the public can report anonymously). These notifications should not be ignored – a child is potentially at risk - if the person reporting their concern to SKDC does not want to make a direct referral staff should contact Children's Services but explain that the information is from a third-party.
- 3.12.9 When a safeguarding referral is made, the referral will be screened in order to decide on the best course of action. LCC has one working day to decide on the response needed. If a referral meets the threshold for a social work assessment under the Children Act (2004), the referrer will be informed by letter and Children's Services colleagues will take the case forward. If the referral does not meet the threshold, the referrer should also be informed of this by letter. At this point, individuals may be advised to consider Early Help support and/or to set up a Team around the Child (TAC) case. In such cases, individuals should discuss this with a Safeguarding Officer or seek advice from the Early Help Advisors regarding their next steps.

REMEMBER:

It is not your job to judge or to investigate, but to inform and share your concerns.

3.13 Consent

- 3.13.1 **Reporting without consent:** During the course of your duties you may witness an incident involving a child or young person that causes you concern, but you have no personal information about the child. You may be dealing with a member (or members) of family. If this incident results (or could result) in the child sustaining significant harm you should contact Children's Services and/or the police immediately.
- 3.13.2 If you witness something that causes concern (but does not put a child or young person in danger) and you have no personal information about the child or their family you therefore cannot gain consent to pass your concerns on, you can still log your concern with our Designated Safeguarding Lead using the internal reporting form which can be found on the intranet under Safeguarding 'Report a concern about a child here' and at appendix D of this policy.
- 3.13.3 **Early Intervention – Intervention with Consent:** Early Help and Team Around the Child (TAC) are supportive processes to help children, young people and their family at the earliest possible opportunity. This is a voluntary process for families and to undertake an Early Help Child and Family Assessment or initiate a TAC you **must gain consent** from the child, young person and their family before information is shared with other agencies. A consent form can be found within the Early Help Child and Family Assessment form and signatures are required the child and parent/carer on any subsequent TAC Plan to show their agreement to the actions contained.
- 3.13.4 Officers should be aware that in the case of professional referrals relating to child protection, the assumption of the Lincolnshire Safeguarding Children Partnership (LSCP) is that the family may be told where the referral has come from by Children's Services officers. Any referral made by an officer of South Kesteven District Council is regarded as a professional referral. Officers should make referrals direct, but they can be made by the Designated Safeguarding Lead or Deputy Safeguarding Lead.
- 3.13.5 You must be aware that if there is a need by Children's Services to open a Child Protection Plan or LSCP open a Serious Case Review you may be called in to give evidence. In these instances, you will be supported by the Designated Safeguarding Lead or the Deputy Safeguarding Lead.

REMEMBER:

It is not your job to judge or to investigate, but to inform and share your concerns.

3.14 Good Practice Guidance

- 3.14.1 It is possible to limit the situations where the abuse of children, young people or adults may occur. These guidelines aim to promote positive practice and are examples to help safeguard children, young people and vulnerable adults. They will also protect staff, elected members, volunteers and anyone working for or on behalf of South Kesteven District Council.
- 3.14.2 Staff, elected members, volunteers and contractors should always remember:
- Avoid situations where they and an individual child or young person are alone and unobserved
 - Ensure that children or young people are not left unattended. For example, it is the parents/carers responsibility to supervise any children in their care whilst visiting Council offices, or when an employee, elected member, volunteer or contractor is carrying out a home visit

- Respect the individual and provide a safe and positive environment
- If any form of physical contact is required it should be provided openly and according to appropriate guidelines, i.e. National Governing Body of Sport Guidelines
- If supervision in changing rooms or similar environments is required, ensure you work in pairs and never enter opposite sex changing rooms
- With mixed groups, supervision should be by a male and female member of staff where possible
- Staff, elected members, volunteers and contractors must respect the rights, dignity and worth of every person and treat everyone equitably within the context of the activity
- Every assessment should reflect the unique characteristics of the child within their family and community context. The Children Act (1989) promotes the view that children and their parents should be considered as individuals and that family structures, culture, religion, ethnic origins and other characteristics should be respected
- Where appropriate, use a simple Equality Monitoring form for Children and Young People to help you assess how accessible our services are to children and young people
- Staff, elected members, volunteers and contractors must place the well-being and safety of the child or young person above the development of performance
- If a child or young person is accidentally injured as the result of a staff member, elected member, volunteer or contractor or seems distressed in any way, appears to be sexually aroused by your actions or misunderstands or misinterprets something you have done, always report such incidents as soon as possible to a Safeguarding Officer and make a written report
- If a child or young person arrives at the activity or service showing any signs or symptoms that give you cause for concern, you must act appropriately and follow the safeguarding reporting procedures
- Staff must avoid being left alone with a child. This may happen if the adult present is distracted by, for example, a telephone call in another room. Under such circumstances, the member of staff must mention the situation to the adult concerned and if the adult is intent on leaving the member of staff alone with a child, the member of staff must leave the property

3.14.3 It is **not** good practice for staff, elected members, volunteers or contractors to:

- Spend unreasonable amounts of time alone with children or young people away from others
- Take children or young people alone on a car journey, however short
- Take children or young people to your home where they will be alone with you
- Arrange to meet children or young people outside an organized activity or service
- Agree to 'look after' or be left in sole charge of children, even for short periods of time during the course of your duties
- Knowingly visit or enter a property unless in the company of an adult who resides at the property. No member of staff should enter a property where only a child is present. If a child left alone is suspected of being below an age when an adult should supervise them, a Safeguarding Officer should be contacted
- Ask children to leave a message for their guardian (direct contact must be made with the guardian before it can be assumed that a message has been received). Similarly, children should not be asked to interpret for their guardian

3.14.4 If these situations are unavoidable, they should **ONLY** occur with the full prior knowledge and consent of your line manager and the child or young person's parent/carer.

3.14.5 Staff, elected members, volunteers and contractors should **never**:

- Engage in rough physical games including horseplay
- Engage in sexually provocative games
- Allow or engage in inappropriate touching of any form
- Allow anyone to use inappropriate language unchallenged, or use it yourself
- Make sexually suggestive comments about or to a child or adult, even in fun
- Let any allegation a child or adult makes be ignored or go unrecorded
- Do things of a personal nature for children or adults that they can do for themselves, e.g. assist with changing
- Enter areas designated only for the opposite sex without appropriate warning (e.g. cleaning staff for toilets etc.)
- Share a room with a child or young person (e.g. overnight accommodation)
- Take a child to the toilet, unless this is an emergency and a second, same-sex member of staff is present
- Use a mobile phone, camera or other recording device in any changing area or other single sex location such as toilets. Exceptions to this may arise, for example where a photographic record of vandalism to a changing room is required. In such circumstances customers should be temporarily excluded from the location.

3.15 Photography and Pornography

3.15.1 There is increasing evidence that some people have used children's and young persons' activities and events as an opportunity to take inappropriate photographs or video footage of children and young people. Staff, elected members, volunteers and contractors should be vigilant at all times, and any person using cameras or videos within South Kesteven District Council services and events or activities that involve children and young people should be approached and asked to complete a consent form for the use of cameras and other image recorders. The form can be found [here](#).

3.15.2 When commissioning professional photographers or inviting the press to cover Council services, events or activities you must ensure that you make your expectations clear in relation to child protection. Remember:

- Check credentials of any photographers and organisations used
- Ensure identification is worn at all times. If they do not have their own, provide it
- Do not allow unsupervised access to children or young people or one-to-one photographic sessions
- Do not allow photographic sessions outside of the activities or services, or at a child or young person's home
- Parents must be informed that photographs of their child or young person may be taken during Council services, activities or events and parental consent forms need to be signed agreeing to this. This must include information about how and where these photographs will be used
- It is recommended that the names of children or young people should not be used in photographs or video footage.

4 SAFEGUARDING ADULTS AT RISK

"I don't directly work with adults at risk, so does this policy apply to me"?

Yes it does! Safeguarding is everyone's responsibility

4.1 Introduction

- 4.1.1 This chapter applies to all situations within the Council's operation which could potentially involve contact with adults at risk. It applies to all staff, elected members, volunteers and anyone else working for or on behalf of and/or representing the Council who may come into contact with adults at risk in the course of their work/duties, whether in someone's home, on Council premises or in the community. It should be a priority of all of the above to ensure the safety and protection of adults at risk and to fulfil their duty to act in a timely manner regarding any concern or suspicion that an adult is being, or is at risk of being abused, neglected or exploited.
- 4.1.2 The Lincolnshire Safeguarding Adults Board (LSAB) is responsible for developing the multi-agency policy and procedures that all relevant organisations in Lincolnshire need to follow. The LSAB policy and procedures that the Council are required to follow can be accessed [here](#).
- 4.1.3 Safeguarding adults requires people and organisations to work together to prevent and stop abuse or neglect, and make sure that the adult's wellbeing is promoted, taking account of their views, wishes, feelings and beliefs in deciding on any action.

Safeguarding adults is "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 risk and experience of abuse and neglect, whilst at the same time making sure that the adult's wellbeing is being promoted".

The Care Act (2014)

- 4.1.4 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
 - Support vulnerable adults in making choices and having control about how they want to live
 - Focus on improving life for the adults concerned
 - Raise public awareness so that communities play their part in preventing, identifying and responding to abuse and neglect
 - Provide accessible information so people understand the types of abuse, how to stay safe and how to raise a concern about someone's safety or wellbeing
 - Address what has caused the abuse or neglect
- 4.1.5 To achieve these aims, it is necessary to:
- Ensure that everyone is clear about their roles and responsibilities
 - Create strong multi-agency partnerships that provide timely and effective prevention of, and responses to abuse and neglect
 - Develop a positive learning environment to break down cultures that are risk-averse and seek to scapegoat or blame practitioners
 - Enable access to community resources (e.g. leisure facilities, town centre, community groups) that can reduce social and physical isolation which may increase the risk of abuse or neglect
 - Clarify how responses to safeguarding concerns arising from poor quality and inadequate service provision should be responded to.

4.2 Wellbeing Lincs

- 4.2.1 Wellbeing Lincs is a countywide preventative service aimed at adults 18+. It is designed to promote confidence in living independently. It is funded by Lincolnshire County Council and delivered on contract by the district councils working together. More information can be found [here](#).

4.3 Making Safeguarding Personal

- 4.3.1 People's lives and relationships are complex and adults may be ambivalent, unclear or unrealistic about their own circumstances.

***Making Safeguarding Personal** is a Department of Health initiative which primarily engages the second objective of the Care Act which is about **engaging** the person in a **conversation** about how best to respond to their safeguarding situation in a way that enhances their involvement, choice and control as well as improving their quality of life, wellbeing and safety.*

- 4.3.2 Being safe is only one of the things people need, and we should work with the adult to establish what being safe means to them and how that can be achieved, taking account of their individual wellbeing.
- 4.3.3 Statutory safeguarding duties apply to any adult who:
- Has needs for care and support (whether or not the local authority is meeting any of those needs)
 - Is experiencing, or at risk of, abuse or neglect
 - 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
- 4.3.4 Local authority statutory adult safeguarding duties apply to adults with care and support needs regardless of whether those needs are being met, irrespective of whether the adult lacks mental capacity or not and include anyone who:
- Is frail due to age, ill-health, physical disability or cognitive impairment, or a combination of these
 - Has a learning disability, a physical disability and/or a sensory impairment
 - Has mental health needs including dementia or a personality disorder
 - Has a long-term illness or condition
 - Misuses substances or alcohol
 - Is a carer who provides assistance to adults and is subject to abuse
 - Is unable to demonstrate the capacity to make a decision
- 4.3.5 Making Safeguarding Personal ensures safeguarding adults:
- is person-led
 - is outcome-focused
 - engages the person and enhances involvement, choice and control
 - improves quality of life, wellbeing and safety
- 4.3.6 Making Safeguarding Personal must not simply be seen in the context of a formal safeguarding enquiry (Care Act, 2014, Section 42 enquiry), but also in the whole spectrum of safeguarding activity.

4.4 Adult Safeguarding Enquiries

4.4.1 The Care Act 2014 requires that first tier local authorities (in Lincolnshire this is LCC) **must** make enquiries, or direct others to do so, whenever abuse or neglect are suspected in relation to an adult and the local authority thinks it necessary to enable it to decide what (if any) action is needed to help and protect the adult.

4.4.2 The scope of the enquiry, who leads it, its nature and how long it takes, will depend on the specific circumstances. It will usually start with asking the adult their views and wishes to determine the next steps. Everyone involved in an enquiry must focus on improving the adult's wellbeing and work together to that shared aim.

4.4.3 The key objectives of making an enquiry about abuse or neglect are to:

- Establish facts
- Ascertain the adults views and wishes
- Assess the needs of the adult for protection, support and redress and how these might be met
- Protect from abuse and neglect, in accordance with the wishes of the adult
- Make decisions as to what follow-up action should be taken with regard to the person or organisation responsible for the neglect
- Enable the adult to achieve resolution and recovery

4.4.4 Alongside this, there are **SIX** national principles of good practice in safeguarding adults:

Empowerment	People are supported and encouraged to make their own decisions and involved through informed consent. <i>"I am asked what outcomes I want from the safeguarding process and these directly inform what happens."</i>
Prevention	Action is taken before harm occurs and to prevent a repeat of harm. <i>"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."</i>
Proportionality	The least intrusive response appropriate to the risk presented. <i>"I am sure that the professionals will work in my interests as I see them and will only get involved as much as needed."</i>
Protection	People in need are safe and have support and representation. <i>"I get help and support to report abuse and neglect. I am helped to take part in the safeguarding process to the extent to which I want."</i>
Partnership	Local services work together and with their communities to prevent, detect and report neglect and abuse. <i>"I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me."</i>
Accountability	Processes are transparent, consistent, robust and scrutinised. <i>"I understand the role of everyone involved in my life and so do they."</i>

4.5 What are Abuse and Neglect?

4.5.1 There are different types of abuse and neglect, and different circumstances in which these occur. Incidents may be one-off or multiple, may affect one person or many, and may involve an act of abuse or neglect or a failure to act. The following types of abuse are defined in an adult safeguarding context:

Type of abuse	Physical examples	Behavioural Indicator
Physical	Hitting, slapping, pushing, kicking, misuse of medication, being locked in a room, inappropriate sanctions or force-feeding, inappropriate methods of restraint, unlawfully depriving a person of their liberty.	<ul style="list-style-type: none"> • Unexplained or inappropriately explained injuries • Evidence of untypical self-harm • Unexplained bruising to the face, torso, arms, back, buttocks, thighs, in various stages of healing. Collections of bruises, in regular patterns and/or in the shape of an object and/or appear on several areas of the body • Unexplained burns on unlikely areas of the body (e.g. soles of the feet, palms of the hands, back), immersion burns (from scalding in hot water/liquid), rope burns, burns from an electrical appliance • Unexplained or inappropriately explained fractures at various stages of healing to any part of the body • Untreated medical problems • Sudden and unexplained urinary and/or faecal incontinence • Evidence of over-/under-medication
Sexual	Rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure, sexual assault, sexual acts to which the adult has not consented or was pressured into consenting.	<ul style="list-style-type: none"> • Person has urinary tract infections, vaginal infections or sexually transmitted diseases that are not otherwise explained • Person appears unusually subdued, withdrawn or has poor concentration • Person exhibits significant changes in sexual behaviour or outlook • Person experiences pain, itching or bleeding in the genital/anal area • Underclothing is torn, stained or bloody. • A woman who lacks the mental capacity to consent to sexual intercourse becomes pregnant
Emotional/ Psychological	emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation, unreasonable and unjustified withdrawal of services or supportive networks.	<ul style="list-style-type: none"> • Untypical ambivalence, deference, passivity, resignation • Person appears anxious or withdrawn, especially in the presence of the alleged abuser • Person exhibits low self-esteem • Untypical changes in behaviour (e.g. continence problems, sleep disturbance)

Financial or material abuse	<p>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, the misuse or misappropriation of property, possessions or benefits.</p> <p>Financial abuse can seriously threaten an adult's health and wellbeing. The website 'Friends Against Scams' is a National Trading Standards Scams Team initiative which aims to protect and prevent people from becoming victims of scams by empowering people to take a stand against scams. Guidance on financial abuse can be found here.</p>	<ul style="list-style-type: none"> • Change in living conditions • Lack of heating, clothing or food • Inability to pay bills, unexplained shortage of money or withdrawals from an account, or unexplained loss or misplacement of financial documents • The recent addition of authorised signers on a signature card • Sudden or unexpected changes in a will or other financial documents
Neglect and acts of omission	<p>Ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating, a failure to intervene in situations that are dangerous to the person concerned or to others, particularly when the person lacks the mental capacity to assess risk for themselves.</p>	<ul style="list-style-type: none"> • Person has inadequate heating and/or lighting • Person's physical condition / appearance is poor (e.g. ulcers, pressure sores, soiled or wet clothing) • Person is malnourished, has sudden or continuous weight loss and/or is dehydrated • Person cannot access appropriate medication or medical care • Person is not afforded appropriate privacy or dignity • Person and/or a carer has inconsistent or reluctant contact with health, social services, etc. • Callers/visitors are refused access to the person • Person is exposed to unacceptable risk
Discriminatory abuse	<p>Discrimination on the grounds of race, faith or religion, age, disability, gender, sexual orientation or political views, racist, sexist, homophobic or ageist comments or jokes. It also includes not responding to dietary needs, not providing appropriate spiritual support.</p>	<ul style="list-style-type: none"> • May not always be obvious. May also be linked to acts of physical abuse and assault, sexual abuse and assault, financial abuse, neglect, psychological abuse and harassment so all the indicators listed above may apply to discriminatory abuse. • A person may reject their own cultural background and/or racial origin or other personal beliefs, sexual practices or lifestyle choices

Organisational Abuse	Includes neglect or poor care in a person's home or in an institution e.g. a hospital or care home; from isolated incidents or ongoing ill treatment; through neglect or poor practice due to an organisations structure, policies, processes and practices.
Self-Neglect and Hoarding	Self-Neglect: When a person is unable or unwilling to care for their own essential needs. It covers a range of behaviour including neglecting personal hygiene, health or surroundings and includes refusal of support. Hoarding: Excessive collection and storing of items, often in a chaotic manner, to the point where living space cannot be used for its intended purpose. There are typically 3 types: compulsive hoarding; bibliomania; animal hoarding. A link to the LSAB hoarding protocol can be found here and a link to Lincolnshire Fire and Rescue's Sherman Campaign can be found here .
Modern Slavery	Includes slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters coerce, deceive and force individuals into abuse, servitude and inhumane treatment. For more information please see chapter 8.
Cultural Abuse	Female genital mutilation (FGM): a procedure where the female genitals are deliberately cut, injured or changed, but where there's no medical reason for this to be done. For more information click here . Forced marriage: A marriage conducted without the valid consent of one or both parties and where duress is a factor. Forced marriage is now a specific offence. Honour based violence: Practices to control behaviour or punish people within families or other social groups, perceived to protect cultural and religious beliefs and/or honour when perpetrators perceive that a relative has shamed the family and/or community.

4.6 Criminal Exploitation of Vulnerable Adults

- 4.6.1 This relates to vulnerable adults who are used, through whatever means, to engage in criminal activity by other adults who are able to coerce them to do so. The coercion is achieved through grooming, intimidation, acts of violence and debt bondage. The individuals involved may not identify themselves as being 'exploited' as such, but it is clearly to their detriment that they are involved in this type of activity. More information on this can be found in Chapter 9 – County Lines and Cuckooing.
- 4.6.2 It is vital to begin to establish the facts at the earliest opportunity (for example, the behaviours that are occurring and the circumstances in which they are happening).
- 4.6.3 Where a concern, complaint or allegation is raised, you must discuss this with the Designated Safeguarding Lead or the Deputy Safeguarding Lead to enable them to facilitate an internal exercise to look for:
- Past Incidents
 - Concerns
 - Risks and
 - Patterns

4.7 Recognising Abuse and Neglect

- 4.7.1 Recognising abuse or neglect is not easy. Abuse can happen anywhere: in someone's own home, in a public place, in a hospital or care home; when an adult lives alone or with others. Anyone can carry out abuse or neglect, including:
- Spouses / partners and other family members
 - Friends and acquaintances
 - Neighbours and local residents
 - People who deliberately exploit adults they perceive as vulnerable to abuse
 - Paid staff or professionals
 - Volunteers and strangers
- 4.7.2 The Care Act also identifies self-neglect as a safeguarding adult concern. While targeted fraud or internet scams are often perpetrated by strangers, in most cases of abuse, the abuser is known to the adult and in a position to gain their trust or to exert pressure or have power over them.
- 4.7.3 Anyone can witness or become aware of abuse and neglect. Everyone has a role in identifying when an adult is at risk. The adult may say or do things that provide a clue e.g. making a complaint, calling for an urgent response, voicing a concern, or issues may emerge during a needs assessment. Regardless of how a concern is identified, you must be vigilant on behalf of those who are unable to protect themselves, knowing what to do and where to get advice.
- 4.7.4 All adults, regardless of their background, should be given the same level of support and protection. Always give regard to a person's religion or belief. Those with disabilities or different nationalities, victims of trafficking, domestic abuse and bullying may have additional care needs. Those with autism may be more likely to suffer abuse or neglect.

Personal characteristics that <u>increase</u> vulnerability may include:	Personal characteristics that <u>decrease</u> vulnerability may include:
<ul style="list-style-type: none"> • Not having mental capacity to make decisions about their own safety including fluctuating mental capacity associated with mental illness and other conditions • Communication difficulties • Physical dependency – being dependent on others for personal care and activities of daily life • Low self-esteem • Experience of abuse • Childhood experience of abuse • Drug/alcohol addiction 	<ul style="list-style-type: none"> • Having mental capacity to make decisions about their own safety • Good physical and mental health • Having no communication difficulties or if so, having the right equipment/support • No physical dependency or, if needing help, able to self-direct care • Positive former life experiences • Self-confidence and high self-esteem
Social/situational factors that <u>increase</u> the risk of abuse may include:	Social/situational factors that <u>decrease</u> the risk of abuse may include:
<ul style="list-style-type: none"> • Being cared for in a care setting, i.e. more or less dependent on others • Not receiving the right amount or the right kind of care • Isolation and social exclusion • Stigma and discrimination • Lack of access to information and support • Being the focus of anti-social behaviour 	<ul style="list-style-type: none"> • Good family relationships • Active social life and a circle of friends • Able to participate in the wider community • Good knowledge and access to a range of community facilities • Remaining independent and active • Access to sources of relevant information

4.8 Carers and Safeguarding

- 4.8.1 Sometimes a carer (e.g. family member or friend) may:
- Witness or speak up about abuse or neglect
 - Experience intentional or unintentional harm from the adult they care for or from professionals and organisations they are in contact with
 - Unintentionally or intentionally harm or neglect the adult they support
- 4.8.2 The needs of the carer **and** the adult they care for must be considered, including:
- Whether a carer's assessment is needed to explore their individual needs; and whether or not joint assessment is appropriate in each individual case
 - Whether the carer and/or the adult they care for need independent advocacy
 - the risk factors that may increase the likelihood of abuse or neglect occurring
 - Whether a change in circumstance changes the risk of abuse or neglect; a change in circumstance should trigger a review of any care and support plan
 - Where abuse or neglect may be unintentional, whether the carer is struggling, and needs support or help (without losing the focus on safeguarding the adult)
 - Where abuse or neglect is deliberately intended to cause harm, whether immediate steps are needed to protect the adult and/or whether a criminal investigation by the police is needed.
- 4.8.3 Whenever a carer speaks up about abuse or neglect it is essential that they are listened to and, where appropriate, a safeguarding enquiry is undertaken.

4.9 People Alleged to be Responsible for Abuse and Neglect

- 4.9.1 Sometimes the person alleged to have carried out the abuse has care and support needs themselves and/or is unable to understand the significance of questions put to them or their replies. They have a right to support from an 'appropriate' adult if they are questioned in relation to a suspected crime under the Police and Criminal Evidence Act 1984 (PACE). Victims of crime and witnesses may also require the support of an 'appropriate' adult. If those alleged to be responsible for abuse lack capacity, they are entitled to the help of an Independent Mental Capacity Advocate.

4.10 Consent

- 4.10.1 It is always essential in safeguarding to consider whether the adult at risk is capable of giving informed consent in all aspects of their life. If they are able, their consent should always be sought.
- 4.10.2 If, after discussion with the adult at risk who has mental capacity, they refuse any intervention, their wishes will be respected *unless*:
- There is an aspect of *public interest* (e.g. not acting will put other adults or children at risk)
 - There is a *duty of care on a particular agency* to intervene (for example the police if a crime has been or may be committed)
 - Seeking consent is not possible and you have a safeguarding concern
 - Consent has been refused but you feel the referral is reasonable, justified and proportionate.

4.11 Mental Capacity, Consent to Refer

The Mental Capacity Act 2005 defines capacity as the ability to make a particular decision or take a particular action at the time the decision or action needs to be taken.

4.11.1 The Act applies to everyone aged over 16 and sets out **FIVE** statutory principles:

- Always assume a person has capacity to make their own decisions unless it is established that they lack capacity
- All practicable steps to help the person decide must have been taken without success
- A person must not be treated as lacking capacity and being unable to make a decision merely because they make an unwise decision
- Any action taken or decision made on behalf of a person who lacks capacity must be in their “best interests”. A record of the action or decision and the reasons for it must be made
- An act or decision on behalf of a person who lacks capacity must aim to be the least restrictive of their rights and freedom of action.

4.11.2 Assessing capacity involves a two-stage test: • Is there an impairment of or disturbance in the functioning of the person’s mind or brain?

- If so, is the impairment or disturbance sufficient that the person lacks the capacity to make that particular decision? A person is unable to make a decision if they cannot:
 - Understand “relevant information” (e.g. the nature of the decision, why it is needed, the likely effects of deciding one way or another or of making no decision), or
 - Retain the information in their mind, or
 - Use or weigh that information in the process of making the decision, or
 - Communicate their decision to others.

Remember

people often make what others consider to be unwise choices, even when they have capacity.

4.11.3 Capacity may vary as a result of illness, injury, medication or other circumstances. Staff will need to use their professional judgement and seek guidance from a Safeguarding Officer or Adult Services in order to help adults to manage risk and give them control of making their own decisions.

4.11.4 If you have concerns about the mental capacity of an adult, please refer to the Designated Safeguarding Lead or the Deputy Safeguarding Lead who will assist you to complete a mental capacity assessment tool to help determine next steps. More information can be found [here](#).

4.11.5 It is important to note that just because someone is old, frail or has a disability, this does **NOT** mean that they are inevitably ‘at risk’ or that they lack capacity. A person with a disability who has mental capacity to make decisions about their own safety may be perfectly able to make informed choices and protect themselves from harm. It is equally important to note that people with capacity can also be vulnerable.

- 4.11.6 It is vital to try and decide whether an adult has the mental capacity to make decisions about their own safety or to give informed consent about:
- a referral being made
 - the actions that may follow under multi-agency policy and procedures
 - their own safety, including understanding the potential for longer-term harm as well as immediate effects
 - what action they need to take to protect themselves from future harm.
- 4.11.7 For consent to be meaningful and legal, two criteria need to be satisfied:
- The person must have the capacity to consent, AND
 - The consent must be their own choice, and must be given freely and not through coercion, intimidation or pressure from family or professionals.
- 4.11.8 If the person **has** capacity, you must always seek their consent to make a referral.
- 4.11.9 If you are concerned that the person **does not have** mental capacity, a referral or further action may still be needed. Always do this in the person's best interests. Without causing undue delay, seek advice from the Designated Safeguarding Lead or the Deputy Safeguarding Lead. If a decision is needed quickly, make it and record all actions and decisions and your reasoning for making the decision.

4.12 Advocacy

- 4.12.1 If there is a concern that an adult at risk of abuse or neglect requires an advocate to help them to understand and make decisions, the County Council has a duty consider whether the adult requires an independent advocate to represent and support the adult in an enquiry. There are two distinct types of advocacy:
- **Instructed advocates:** they take their instructions from the person they are representing. For example, they will only attend meetings or express views with the permission of that person.
 - **Non-instructed advocates:** they work with people who lack the capacity to make decisions about how the advocate should represent them. Non-instructed advocates independently decide how best to represent the adult.

4.13. Responding to an Adult at Risk who is making a Disclosure

- 4.13.1 It is important to apply the following in practice:
- Stay calm and speak to them in a private and safe place. It is essential that the person alleged to have caused harm is not present
 - Listen carefully to what they are telling you and get as clear a picture as you can. Avoid asking too many questions at this stage unless for clarification
 - Let them talk at their own pace
 - Do not give promises of complete confidentiality – **do not promise to keep secrets.**
 - Explain that you have a duty to tell a safeguarding officer and that their concerns may be shared with other professionals who could have a role in protecting them
 - Reassure the adult at risk that they have done the right thing in telling you
 - Reassure the adult at risk that they will be involved in decisions about what will happen
 - Explain that you will try to take steps to prevent them from further abuse or neglect
 - If they have specific communication needs, provide support and information in a way that is most appropriate to them
 - Do not be judgemental or jump to conclusions
 - Record, in writing, all the details that you are aware of and what was said using the person's own words as soon as possible.

4.14 Record Keeping

4.14.1 Good record keeping is essential. Whenever a complaint or allegation is made, all agencies should keep clear and accurate records with all relevant records put into a file to record all action taken. Always and as soon as possible, make a factual record of everything that happened, was said and was seen, including:

- The date and time and the person's name, address and date of birth
- The nature of the allegation or incident and, if possible, the name, address, date of birth, employer of the person (if relevant) alleged to have caused the harm
- Factual observations e.g. any visible injuries, the person's behaviour, physical/emotional state etc.
- Exactly what they said, using their own words, and exactly what you said
- Their consent to share the information
- All actions you took e.g. who you spoke to and all resulting actions so far. Included names, addresses and telephone numbers wherever possible
- Sign and date your record and store the information securely.

4.14.2 Where there is a file for the individual, the record should be stored in their file.

4.15 Responding to Allegations or Concerns against a Member of Staff, Elected Member, Volunteer or any other Person

4.15.1 Ensure you always:

- Take the allegation or concern seriously
- Consider any allegation or concern to be potentially dangerous to the person
- Record in writing all the details that you are aware of as soon as possible

4.15.2 If an allegation of abuse is made against a member of staff, elected member or volunteer, the Designated Safeguarding Lead must be informed immediately. They will inform the Chief Executive (providing that the allegation is not against them). Consideration will be given to suspending the member of staff or moving them to alternative duties not involving contact with adults at risk, in accordance with the Council's Disciplinary Policy and Procedure. If a Safeguarding Officer is the subject of the suspicion/allegation, the report must be made directly to the Chief Executive.

4.15.3 If the complaint is against someone other than a member of staff, elected member, volunteer, contractor or consultant i.e. parent, carer, other service user, etc., then the Designated Safeguarding Lead must be informed in line with the Council's reporting procedures.

4.16 Reporting Concerns

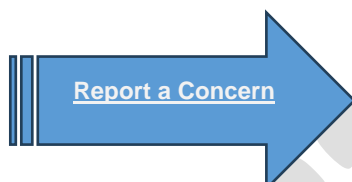
4.16.1 The first priority must always be to ensure the safety and wellbeing of the adult. The adult should experience the safeguarding process as empowering and supportive. Practitioners should, wherever practicable, seek the consent of the adult before taking action. However, there may be circumstances when consent cannot be obtained because the adult lacks capacity to give it, but it is in their best interests to undertake an enquiry. Whether or not the adult has capacity to consent, action may need to be taken if:

- Others are or will be put at risk if nothing is done
- It is in the public interest to take action because a criminal offence has occurred

If you have a reasonable suspicion (e.g. reasons to suspect that an adult with care or support needs is experiencing or at risk from abuse or neglect) then you must gather as much information as possible. This will enable a Safeguarding Officer to carry out an internal check of the Council's previous dealings with them.

A Safeguarding Officer can assist to pass the concerns on to Adult Services if necessary.

- 4.16.2 To access information and forms to enable you to report a concern, you can click on this logo anywhere in the policy. **The link will take you to the intranet.** The appropriate reporting form must then be sent to LCC Adult Services and a copy should be forwarded to safeguarding@southkesteven.gov.uk. Once your concern has been received, the next steps and appropriate action will be decided.



- 4.16.3 Alternatively, and for staff without IT access, please speak to the Deputy Safeguarding Lead to report a concern.
- 4.16.4 If you think someone is being abused or you think their safety is at risk, then it is important to tell someone. If you are worried about an adult and think they may be a victim of neglect, abuse, exploitation or cruelty, please call Lincolnshire County Council's CSC on 01522 782 155 or out of hours 01522 782 333. You do not need to know everything about the situation or what is happening. You may just be worried or feel that something is not right.
- 4.16.5 If you believe a crime has been committed and there is an immediate risk of danger, you should telephone the Police on 999. If you believe a crime has been committed but there is no immediate danger, you should call 101 to report your concerns.
- 4.16.6 Customer facing, front line services are most likely to come across safeguarding concerns in their day- to-day roles and should have an enhanced level of awareness. These staff groups/services will be more experienced in engaging with external agencies to report safeguarding concerns and should do so wherever possible (all referrals, whether they meet the threshold for intervention or not, should be logged with the Deputy Safeguarding Lead who will record them on the Council's safeguarding tracker system).
- 4.16.7 When an adult safeguarding referral is made, Lincolnshire County Council will apply the six objectives of the safeguarding enquiry to the discussions with colleagues and although the LCC is the lead agency for making enquiries, it may require others to undertake them.
- 4.16.8 The specific circumstances will often determine who the right person to begin an enquiry is. Statutory guidance sets out that in many cases a professional who already knows the adult will be the best person; for example, this could be a housing support worker or neighbourhoods officer.
- 4.16.9 It is possible that the Council will have allegations referred to them by third parties. For example, neighbours may contact staff to advise that they suspect that the welfare of an adult at risk is suffering. Under these circumstances staff should encourage those reporting such concerns to contact the police or the LCC Customer Service Centre (CSC) for adults accordingly.

- 4.16.10 **IMPORTANT:** Officers should be aware that in the case of professional referrals relating to an adult at risk, the assumption of the Safeguarding Adults Team at Lincolnshire County Council is that the adult at risk may be told where the referral has come from. Any referral made by an officer of South Kesteven District Council is regarded as a professional referral. Officers should make referrals direct, but these can be made by the Designated Safeguarding Lead or Deputy Safeguarding Lead.
- 4.16.11 You must be aware that if there is a need by Adult Services or the Lincolnshire Safeguarding Adults Board to open an Adult Protection Plan or Serious Case Review you may be called in to give evidence. In these instances, you will be supported by the Designated Safeguarding Lead or the Deputy Safeguarding Lead.

REMEMBER:

It is not your job to judge or to investigate, but to inform and share your concerns.

4.17 Reporting to the Police

- 4.17.1 The police take any crime against an adult at risk seriously and will investigate it thoroughly, professionally and compassionately. The police work very closely with partner agencies to ensure effective information sharing, risk assessment and decision-making takes place every time an incident of abuse is reported.
- 4.17.2 There are now special measures that can be put into place to help vulnerable people through the court process. These measures have allowed many people who may once have been denied access to the criminal justice system the opportunity to give their evidence in court. The police will discuss these special measures with victims at the earliest stage possible in the investigation.

4.18 Acting to Protect the Adult at Risk and deal with immediate needs

- 4.18.1 In an emergency, or if there is an immediate concern for the person's safety or wellbeing:
- **Call 999** for an ambulance if they are injured and/or for the police if you suspect a crime has been committed
 - Inform the appropriate LCC Customer Service Centre (CSC)
 - Take steps to ensure the person is not in immediate danger (without risk to yourself)
 - Avoid disturbing evidence: try to secure the scene e.g. lock the door
 - Consider the risk to any other adults or children and report to the appropriate LCC Customer Service Centre if necessary
 - Support the person to contact the police themselves if a crime has been or may have been committed
 - Provide reassurance, whilst being clear that you need to report the issue
- 4.18.2 Also, as soon as possible after the emergency has been resolved:
- Record exactly what happened on the relevant safeguarding referral form
 - Notify the Deputy Safeguarding Lead
 - Ensure that your record is signed, dated and securely stored
- 4.18.3 If a person is at risk of significant harm, or if they have made a disclosure or a direct or indirect allegation about a person or organisation outside SKDC, including a relative, carer or employee of that organisation:
- Take the allegation or concern seriously
 - Speak to them in a private and safe place
 - Ensure that the person alleged to have caused harm is not present
 - Make sure they are and feel safe and know what is happening
 - Evaluate the risk the adult; do this on the same day as the concern is identified

- **Ask for consent to share the information** (although you may not need consent if there is significant harm, it is still good practice)
 - Record the details on the relevant Safeguarding Referral Form, using their own words
 - As soon as possible, contact LCC's Customer Service Centre who will tell you what to do next. Write this down
 - Notify the Deputy Safeguarding Lead
 - Ensure that your record is signed, dated and securely stored
- 4.18.4 If someone makes allegations against a member of staff, elected member, volunteer, key contractor, consultant or directly commissioned provider acting on behalf of the Council, regardless of your role or status or theirs. **YOU MUST ALWAYS ACT.**

4.19 What to do if someone makes a threat of suicide.

- 4.19.1 If someone indicates over the phone that they are going to take their own life, simply asking about their suicidal thoughts or feelings will not push someone into doing self-destructive. In fact, offering an opportunity to talk about those thoughts or feelings may reduce the risk that someone may act on their suicidal feelings.
- 4.19.2 Start by asking questions. The first step is to find out whether the person is in danger of acting on suicidal feelings. Be sensitive but ask direct questions, check details and give further information such as:
- Check the details of what has been said (explaining again may get them to realise what they said and explain they do not mean it)
 - Check their contact number and current location (in case you need to call them back or send someone to the address)
 - Ask if they are thinking about committing suicide
 - Ask who is with them (either an adult for support or a child that may need safeguarding)
 - Inform them of the Samaritans number 116 123
 - Inform them of the number for **steps2change** the Lincolnshire NHS 24 helpline 0303 123 4000
 - Recommend they make an appointment with their GP
- 4.19.3 If the call gets cut off and you are unable to get back in touch and you have concerns that the person is going to take their life or hurt themselves or another person, please call 999 and request a safe and well check immediately.
- 4.19.4 In all cases you should report the incident to the Deputy Safeguarding Lead.

4.20 What happens when you report Abuse or Neglect?

- 4.20.1 The Care Act (2014) requires Lincolnshire County Council (LCC) to undertake Section 42 Enquiries, or to cause others (potentially including appropriate South Kesteven District Council staff) to do so, if they reasonably suspect an adult who meets the criteria is, or is at risk of, being abused or neglected. The purpose of an enquiry is to decide whether LCC or any other agency should do something to help and protect the adult. The adult should always be involved from the start of the enquiry unless that would increase the risk of abuse. If they have severe difficulty in being involved or if there is no one appropriate to support them, LCC must arrange for an independent advocate to represent them. The objectives of an enquiry into abuse or neglect are to:
- establish the facts
 - ascertain the adult's views and wishes
 - assess the need for protection, support, redress, and how this might be met
 - protect the adult from the abuse and neglect, in line with their wishes

- make decisions about further action against the person or organisation causing the abuse or neglect
- enable the adult to achieve resolution and recovery

*A personalised approach, enabling safeguarding to be done **with** and not **to** people, using practical methods defined by the adult's individual needs rather than those of an organisation.*

"No decision about me, without me"

- 4.20.2 The first priority is always to ensure the safety and wellbeing of the adult.
- 4.20.3 The process should be empowering and supportive. Wherever practicable, the consent of the adult will be sought before taking action but action may need to be taken if others are, or will be, put at risk if nothing is done; or if it is in the public interest because a criminal offence has occurred. Complex cases need to involve a social worker: for example, if abuse or neglect is suspected within a family. In other cases, a professional who already knows the adult or who has specific knowledge may be better placed to do an enquiry e.g. health professionals for medical issues or council staff for housing related issues. If LCC asks another agency to make the enquiry, they must set timescales and what action will follow if this is not done.
- 4.20.4 On completion of the enquiry, the outcome should be notified to LCC who must determine with the adult what, if any, further action is needed, agreeing an action plan, to be recorded on their care plan. Agencies must agree:
- what steps are to be taken to assure the person's safety in future
 - the provision of any support, treatment or therapy including on-going advocacy
 - any modifications to the way services are provided
 - how to support the adult through any action they take to seek justice or redress
 - any on-going risk management strategy as appropriate
 - any action to be taken regarding the person or organisation causing the concern
- 4.20.5 Actions could include disciplinary or criminal investigations, supporting the person through mediation, developing safeguarding plans or securing fuller assessments by health and social care agencies. A criminal investigation takes priority over all other enquiries but a multi-agency approach will be agreed to ensure that the interests and wishes of the adult are considered throughout, even if the adult does not wish to give evidence or support a prosecution. The welfare of the adult and others, including children, requires continued risk assessment to ensure the outcome is in their interests and supports their wellbeing.

5 DOMESTIC ABUSE

"I don't directly work with children, families, or adults at risk of domestic abuse so does this policy apply to me?"

Yes it does! Safeguarding is everyone's responsibility

5.1 Introduction

- 5.1.1 Sometimes you will hear the phrase domestic abuse, sometimes domestic violence. They mean the same thing. Domestic abuse includes a range of abusive behaviours which are used by an abusive partner, or ex-partner or family member to maintain power and control over another individual. Domestic abuse is not a one-off incident but is an on-going pattern of behaviour. Once begun, the abuse and/or violence will repeat itself and will often get worse over a period of time. This abusive behaviour also includes Forced Marriage, so called Honour-Based Violence and Female Genital Mutilation. Largely hidden behind closed doors, it leaves the victims feeling isolated and powerless.

5.2 What is Domestic Abuse?

- 5.2.1 Domestic Abuse is not just a disagreement. It is a pattern of behaviours, some causing physical injury, others not, some criminal, others not, but all potentially emotionally damaging. Frequently domestic abuse includes threats of violence, suicide or threats to take children away. It may also include breaking objects, hurting pets, abusive language, sexual abuse, driving recklessly to endanger or scare the abused person, isolating family members from others, and controlling access to money, cars and other personal belongings.
- 5.2.2 Domestic Abuse, or domestic violence, is defined as:
- **Controlling behaviour** is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.
 - **Coercive behaviour** is an act or pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten the victim.
 - **Threatening Behaviour** (harassment) includes threats of violence, threats of suicide or threats to take the children from the abused person.

"Any incident or pattern of incidents of abusive behaviour such as physical or sexual abuse, violent or threatening behaviour, controlling or coercive behaviour, economic abuse, psychological, emotional or other abuse between people aged 16 or over who are personally connected"

Domestic Abuse Act 2021

- 5.2.3 The Domestic Abuse Act 2021 introduced the implicit reference to children as victims of domestic abuse. Any reference in the Act to a victim of domestic abuse includes reference to a child who:
- sees or hears, or experiences the effects of the abuse and
 - is related to the principal victim or the perpetrator if:
 - the person is the parent of, or has parental responsibility for, the child or
 - the child and the person are relatives

5.3 Who can Experience Domestic Abuse?

- 5.3.1 Domestic Abuse has a significant impact on individuals, families and communities. Nationally, nearly one million women experience at least one incident of domestic abuse each year. One in ten men report they have experienced domestic abuse and at least 750,000 children a year witness domestic abuse. It is likely many of us are affected whether through intimate partnerships, family members, friends or our colleagues at work.
- 5.3.2 Domestic abuse can affect anyone, regardless of age, social background, gender, race, religion, sexual preference, disability or ethnicity. It may occur in a variety of relationships: married, separated, divorced, living together, dating, heterosexual, gay or lesbian, bi-sexual or transgender relationships.
- 5.3.3 Victims of domestic abuse are often too frightened or embarrassed to report what is happening or do not trust that they will be believed or safeguarded after their disclosure. Male victims of domestic abuse may find it harder to seek help. Many children witness domestic abuse and may require safeguarding action to be taken.

5.4 Types of Abuse

- 5.4.1 Recognising domestic abuse is not easy. The table below details some of the different types of abuse that may be present in an abusive relationship but this list is not exhaustive.

Type of Abuse	Examples
Psychological Emotional	Intimidation, insulting, isolating a person from friends and family, constantly criticising. Denying abuse, treating them as inferior, threatening to harm children or take them away, forced marriage. Swearing, undermining confidence, making racist remarks, making a person feel unattractive, calling them stupid or useless, eroding their independence, threatening suicide if the person leaves them.
Physical	Shaking, smacking, punching, kicking presence of finger or bite marks, starving, tying up, stabbing, suffocation, throwing things, using objects as weapons, female genital mutilation, honour-based violence. Physical effects such as bruises may be on areas of the body that are usually covered and hidden.
Sexual	Forced sex, forced prostitution, ignoring religious prohibitions about sex, refusal to practice safe sex, sexual insults, sexually transmitted diseases, preventing breastfeeding.
Economic	Not letting a person work, undermining their efforts to find work or study, refusing to give them money, asking for an explanation of how every penny is spent, making them beg for money, gambling, not paying bills.
Controlling	A range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of their means needed for independence, resistance and escape and regulating their everyday behaviour.
Coercive	An act or pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten the victim.
Stalking	An activity that is designed to force contact on the subject. The stalker may use a variety of methods to attempt to establish a relationship including calling, emailing, sending letters, waiting in areas where the subject works or lives and attempting to approach or use third parties as intermediaries.
Harassment	Involves behaviour that is threatening and disturbing, conducted with the goal of intimidating, frightening, or irritating someone. A variety of activities can be considered harassment and some may technically be legal, but when they occur in the context of a pattern of other behaviours, they are considered harassment and can be prosecuted. This activity can include filing false reports against someone and distributing abusive materials designed to malign someone.

5.5 Why do People stay in Abusive Relationships?

5.5.1 Making the decision to leave a violent or abusive partner is not easy. There are a number of reasons why people do not leave an abusive relationship. It is important to understand some of these reasons. The table below sets out some of the reasons, but everyone's circumstances are different and this is not an exhaustive list.

Fear of further violence: Leaving may end the relationship but may not end the abuse. Many victims are tracked down and further abused when they leave, often for weeks and months afterwards. Research shows that about half of all women murdered by their partners had left or were in the process of leaving when they were killed.
Lack of knowledge and access to help: Despite increased awareness about domestic abuse, many victims don't know how to take advantage of their legal and housing rights. Even if they are aware of these services, some may experience problems due to language difficulties, inappropriate responses from service providers, living in isolated areas or lack of funds.
Economic dependence: If a victim is working, he/she may lose their job due to needing time off work, moving too far away or staying off work so they can't be found there. For other victims, becoming a single parent may mean working is no longer possible; others may face months of legal dispute over property and financial matters.
Staying because of the children: Many abused victims think they should stay in their relationship for the sake of their children.
Social isolation: Most victims experiencing domestic abuse are extremely isolated. Their partner may have deliberately isolated them from sources of support including family and friends, they may be too ashamed or afraid to tell anyone, or they may have told someone whose response has been unhelpful and judgmental.
Emotional dependence: Conflicting feelings of fear, shame, bewilderment, care for the abuser, a hope that things will improve, a commitment to the relationship but not to the abuse, all often contribute to a victim staying in an abusive situation.
Lack of confidence: After living with an abusive partner, the self-esteem of most victims has been eroded to the point where they no longer have confidence in themselves, including their ability to survive alone, and may believe that there are no other options.
Cultural reasons: Many victims and abusers have been brought up to believe that real fulfillment comes from being a husband/wife and mother/father or that divorce is wrong and may even be encouraged to stay in the relationship by family members or religious leaders.

5.5.2 For further information, visit www.domesticabuselincolnshire.com

5.6 Responding to Concerns, Allegations and Disclosures

5.6.1 Disclosing domestic abuse is not easy. It is vital that the procedures in this section are understood and applied consistently by all staff, elected members, volunteers and anyone working for or on behalf of South Kesteven District Council.

- At all times the person who has experienced Domestic Abuse must be dealt with in confidence. This is important to maximise the confidence that the individual has in the colleague/manager/practitioner and the organisation
- At all times take steps to protect the victim, accept their perception of the danger they are in and listen appropriately
- Permission must be sought to share information, unless it would put the individual in danger to do so. Information should never be discussed with other members of the family/public and should only be shared with colleagues where it is appropriate (e.g. the Multi-agency Risk Assessment Conference [MARAC](#) protocol)
- A risk assessment (known as a [DASH](#)) should be used in all cases and its use explained to the victim – **you should complete this with the victim** (unless to do so would put the person at risk) – **the form is accessible [here](#)**
- Concerns about the welfare of any children will take precedence over issues of confidentiality and be over-ridden by Child Protection procedures
- Ensure that at all times the victim is aware of organisational procedures and any action you are taking. Records should be kept of all interviews. This may be important for later evidential purposes. Use the client's exact words to record the abuse. Be as precise as possible e.g. 'my husband hit me with a cricket bat' rather than 'client has been abused'
- Do not insist on joint sessions with the victim and the perpetrator or that they should seek legal remedies if they do not wish to do so
- If the victim concerned does not want to leave yet, it does not mean they will never leave, nor that they do not require ongoing and continual support

5.6.2 South Kesteven District Council operates a Sanctuary Scheme, which is managed in partnership with the district's Independent Domestic Violence Advisor (IDVA). The scheme is open to all victims of domestic abuse who are in the district, but priority may be given to high risk victims managed under the MARAC arrangements. The scheme can be accessed via MARAC referral and professional referral. Most MARAC referrals are managed by the IDVA. A range of housing options will be discussed and offered as well as the Sanctuary scheme to enable the client to make an informed decision about the options that best suits their needs and circumstances.

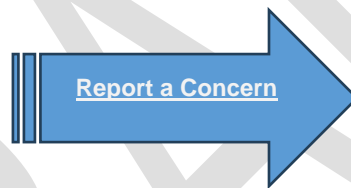
Clare's Law - Domestic Violence Disclosure Scheme:

This gives individuals a 'right to ask' the Police when they have a concern that their partner may pose a risk to them or where they are concerned that the partner of a member of their family or a friend may pose a risk to that individual.

5.6.3 If an application is made under the scheme, Police and partner agencies will carry out checks. If these show that the partner has a record of abusive offences, or there is other information to indicate that there may be a risk from the partner, the Police will consider sharing this information. For more information please click [here](#).

5.7 Reporting concerns

- 5.7.1 Any officer may, in the course of their duties, may witness or be informed of an issue that they feel should be referred to a domestic abuse trained officer. This can be done using the Council's standard reporting procedure. If officers are confident to do so they should complete a DASH risk assessment. Officers completing a risk assessment should discuss the outcome with a Safeguarding Officer.
- 5.7.2 For all other referrals, please follow the Council's [safeguarding incident flowchart](#) to determine an appropriate course of action.
- 5.7.3 It is possible that the Council will have allegations referred to them by third parties. For example, neighbours may contact staff to advise that they suspect that somebody is at risk of or is experiencing domestic abuse. Under these circumstances, staff should encourage those reporting such concerns to contact the Police or the Lincolnshire County Council CSC for adults accordingly.
- 5.7.4 To access information and forms to enable you to report a concern, you can click on this logo anywhere in the policy. **The link will take you to the intranet.** The appropriate reporting form must then be sent to LCC Adult Services and a copy should be forwarded to safeguarding@southkesteven.gov.uk. Once your concern has been received, the next steps and appropriate action will be decided.



- 5.7.5 Alternatively, and for staff without IT access, please speak to the Designated Safeguarding Lead to report a concern.
- 5.7.6 If you are concerned that you or someone you know is experiencing Domestic Abuse and you want advice or support, you can contact EDAN Lincs:
- Telephone: 01522 510 041
 - Email: info@edanlincs.org.uk
- 5.7.7 If you feel that someone is at immediate risk of significant harm, then you must call the Police on 999. If however you think they are at risk but that risk is not immediate, you must take appropriate action, calling 101 if you think a crime has been committed, and by reporting the matter to the LCC Customer Services Centre (CSC) on 01522 782111 for children, 01522 782155 for adults, or emergency out of hours 01522 782333.
- 5.7.8 In all cases you should also report the incident to the Designated Safeguarding Lead.

5.8 Our Commitment to Tackling Domestic Abuse

- 5.8.1 Domestic Abuse Charter: A Domestic Abuse charter has been developed for Lincolnshire that sets out 10 standards that agencies should aim to meet to ensure best practice. SKDC aims to follow this charter and will take steps to meet all 10 standards as set out below:

1.	That the agency I represent understands the realities of domestic abuse and its impact on, and cost to, the services it provides. Data will be shared within the DACGP
2.	Domestic Abuse material is displayed by the agency/department I represent in different languages relevant to local communities and is also available in alternative formats such as large print. Information about domestic abuse is included on respective agencies websites with links to the Lincolnshire DA website
3.	That there is an effective domestic abuse policy/protocol or guidance in place detailing how the agency/department will respond to domestic abuse
4.	That risk identification, risk assessment and risk management processes, for victims, perpetrators and children are fully embedded within the agency/department I represent
5.	That there is full participation by the agency I represent within the MARAC process for High Risk Victims
6.	That all appropriate referral/signposting pathways are in place for standard and medium victims
7.	That staff who require Domestic Abuse training have been identified and the level of training required assessed
8.	That all identified staff have been trained to the required level
9.	That there is regular attendance and participation at the Domestic Abuse core priority group and MARAC steering group from my agency
10.	The agency has an employee policy for staff experiencing or perpetrating domestic violence

6. PREVENT

6.1 Introduction

- 6.1.1 Prevent is one strand of the UK's wider counter-terrorism strategy known as [CONTEST](#). The four strands of the CONTEST strategy are:
- **Prevent** – aims to stop people from becoming terrorists or supporting terrorism by safeguarding people and communities
 - **Pursue** – concerned with the apprehension and arrest of people suspected of being engaged in the planning, preparation or commissioning of terrorism
 - **Protect** – seeks to strengthen our protection against a terrorist attack and reduce our vulnerability to an attack
 - **Prepare** – mitigate the impact of a terrorist attack where an attack cannot be stopped
- 6.1.2 The purpose of the Prevent strand is to safeguard and support people to stop them from becoming terrorists or supporting terrorism of any form. Prevent aims to:
- tackle the causes of radicalisation and respond to the ideological challenge of terrorism
 - safeguard and support those most at risk of radicalisation through early intervention, identifying them and offering support
 - enable those who have already engaged in terrorism to disengage and rehabilitate.
- 6.1.3 Prevent is a service that provides non-compulsory safeguarding support to people who have the final say in accepting support or not.
- 6.1.4 It is about safeguarding. In the same way, support is provided to those at risk of becoming involved in gangs, drugs, exploitation, or other forms of harm, individuals susceptible to being groomed into terrorism can also be offered support.
- 6.1.5 Prevent operates within a non-criminal space, intending to pre-empt criminal activity. This ensures the protection of communities and not its criminalisation. Importantly, those who receive support from Prevent do not receive a criminal record.
- 6.1.6 Community engagement is pivotal. We work closely, along with our partners on the Lincolnshire Prevent Steering Group, with the local community and voluntary groups to co-deliver awareness raising events and interactions.

6.2 The Prevent Duty

- 6.2.1 The Prevent duty requires specified authorities such as education, health, **local authorities**, police and criminal justice agencies (prisons and probation) to help prevent the risk of people becoming terrorists or supporting terrorism. It sits alongside our safeguarding duties to protect people from a range of other harms, such as substance abuse, involvement in gangs, and physical and sexual exploitation. The duty helps to ensure that people who are susceptible to radicalisation are supported as they would be under safeguarding processes.
- 6.2.2 Under the Duty, the Council has a responsibility to develop and maintain appropriate leadership and partnership working to help them have due regard to the need to prevent people from becoming terrorists or supporting terrorism.

- 6.2.3 Local authorities are required to have multi-agency arrangements in place to effectively monitor and evaluate the impact of Prevent work and provide strategic governance. In Lincolnshire we do this through the county's Prevent Steering Group which is led by the County Council. Together, this Steering Group helps to develop the Counter Terrorism Local Profile for Lincolnshire along with a delivery plan to ensure engagement, training and policy are effective. This group also produces a County risk register for Prevent which is populated by County and District Authorities.
- 6.2.4 One way that Prevent seeks to tackle the ideological causes of terrorism is by limiting exposure to radicalising narratives, both online and offline, and to create an environment where radicalising ideologies are challenged and are not permitted to flourish. This is known under the Duty as "reducing permissive environments".
- 6.2.5 Local authorities are expected to ensure appropriate frontline staff, including those of its contractors, have a good understanding of Prevent, are trained to recognise where a person might be susceptible to becoming radicalised into terrorism, and are aware of available programmes to provide support. At SKDC, in-person training is delivered on a three-year programme. Between in-person sessions, staff, contractors and Elected Members have access to Home Office Prevent Training. More information can be found [here](#).
- 6.2.6 PREVENT is included within South Kesteven District Council's safeguarding remit. Through awareness and partnership working, PREVENT seeks to safeguard and support vulnerable individuals and protect communities. You can find further information about the PREVENT duty for England and Wales [here](#).

6.3 Susceptibility to radicalisation

- 6.3.1 Radicalisation is the process of a person legitimising support for, or use of, terrorist violence. Most people who commit terrorism offences do so of their own agency and dedication to an ideological cause.
- 6.3.2 There is no single profile of a radicalised person, nor is there a single pathway or 'conveyor belt' to being radicalised. There are many factors which can, either alone or combined, lead someone to subscribe to terrorist or terrorism-supporting ideology. These factors often include exposure to radicalising influences, real and perceived grievances – often created or exacerbated through grievance narratives espoused by extremists – and a person's own susceptibility.
- 6.3.3 A person's susceptibility to radicalisation may be linked to their vulnerability. A person can be vulnerable if they need special care, support or protection because of age, disability, risk of abuse or neglect. A person's vulnerabilities may be relevant to their susceptibility to radicalisation and to the early intervention approach that is required to divert them away from radicalisation.
- 6.3.4 In other cases, vulnerabilities may not be present or relevant to the early intervention approach required. Not all people susceptible to radicalisation will be vulnerable, and there are other circumstances, needs or other underlying factors that may make a person susceptible to radicalisation but do not constitute a vulnerability.

- 6.4.1 There is no single factor that leads someone to become radicalised. Instead, it is often the result of several factors. Some indicators of concern may be:
- Justifying the use of violence to bring about political, social or cultural change. This may mean supporting terrorist acts to bring about change
 - Possessing extreme material or symbols. This could include possessing certain literature, items or clothing
 - Engaging with extreme groups and their messaging. Sometimes the person may try to convince others of that message. They may also believe that violence is the only means to enable this extreme belief to be implemented
 - Use of extreme or hate terms to exclude others or incite violence
 - Spending an increasing amount of time online. The person may be sharing or consuming extreme views online.
- 6.4.2 Our key role in safeguarding people under Prevent, is to **notice, check and share**.

6.5 Reporting concerns

- 6.5.1 Anybody subject to this policy may witness or be informed of an issue that they feel should be referred to Prevent or to the Police. The Prevent Lead will help you to determine the next steps and to make a referral to Prevent or to the Police if required.
- 6.5.2 If you feel that a young person or vulnerable adult is at immediate risk of significant harm, then you call the Police on 999. If however you think they are at risk but that risk is not immediate, you must take appropriate action, calling 101 if you think a crime has been committed. In all cases you should report the incident to the Prevent Lead accordingly.
- 6.5.3 Individuals referred under Prevent will be offered safeguarding support under a process known as Channel. It is, however, important to recognise that not all cases referred will meet the threshold for Channel. Remember: these individuals are still vulnerable and will need to be safeguarded through the agreed processes for children and adults.

7. HATE CRIME AND MATE CRIME

7.1 Introduction

- 7.1.1 This chapter sets out the policy for identifying, reporting and dealing with hate and mate crime in South Kesteven.
- 7.1.2 This policy and the commitments made are made in the context of the Equality Act 2010, which requires public authorities to consider how they can take action to eliminate discrimination, advance equality of opportunity and foster good relations in the community. A key part of this is the correct identification and handling of hate and mate crime.
- 7.1.3 Hate crime can affect all communities, both urban and rural, and it is important that staff and elected members are aware of hate crime issues and what to do when hate crime is identified. It is also important to be aware of hate crime issues in areas of the District where they may not expect to find it. Furthermore, mate crime is a growing area of concern, and one which is not yet widely recognised, but is prevalent in all areas of society. Awareness is a key part of tackling the problem and working in partnership to prevent and stop mate crime is essential.

7.2 Definitions

Hate Crime	<p>A hate crime or hate incident is any crime or incident which is perceived by the victim or any other person to be motivated by hostility or prejudice based on a person's actual or perceived social group. There are common social groups who encounter such prejudice or hostility, and therefore the focus within this chapter is on the following protected characteristics:</p> <ul style="list-style-type: none">• Disability• Race• Religion• Sexual orientation• Transgender identity <p>It is worth noting however, that hate crime can be based on any identifying factor, or a combination of 2 or more factors.</p>
Mate Crime	<p>There is currently no formally agreed definition of mate crime. However, the below is a widely accepted description:</p> <p><i>'When a person is harmed or taken advantage of by someone they thought was their friend. It is more common with people with learning disabilities and mental health conditions but not exclusive'.</i></p> <p>Those with substance misuse issues can also be more at risk.</p>

On the 30th January 2020 South Kesteven District Council formally adopted:

The IHRA definition of anti-Semitism

“Antisemitism is a certain perception of Jews, which may be expressed as hatred toward Jews. Rhetorical and physical manifestations of antisemitism are directed toward Jewish or non-Jewish individuals and/or their property, toward Jewish community institutions and religious facilities.”

The APPG on British Muslims definition of Islamophobia

“Islamophobia is rooted in racism and is a type of racism that targets expressions of Muslimness or perceived Muslimness.”

and denounced all other forms of hatred.

7.3 Recognising Hate or Hate Crime

- 7.3.1 A hate crime or incident can encompass a large number of actions, directed at a particular person or more generally at a group of people, for the sole reason of their inclusion, or perceived inclusion, in one of the social groups mentioned above. These can include:
- Physical attacks
 - Verbal abuse
 - Offensive graffiti
 - Harassment
 - Damage to property
 - Exclusion from a group or community
- 7.3.2 It can be any activity directed at a person or group because of their social group. Usually hate crimes and incidents are easy to recognise for both the victims and the observers due to type of language used, or person targeted. However, not all attacks on minority social groups are because of hate, they may just be randomly targeted, and this must be considered.
- 7.3.3 Hate crime can be more difficult to recognise as often the victim thinks the perpetrator is their friend and may not perceive themselves as a victim or be able to see that what is happening to them is wrong.
- 7.3.4 Hate crime may include:
- Financial abuse e.g. visiting when the victim has just got their benefit and ‘borrowing’ money or going out for a drink and getting the victim to buy all the drinks
 - Physical abuse, making a joke of physical abuse, making it part of a ‘game’
 - Emotional abuse, distancing the victim from their family or other support, manipulating them into doing things they normally wouldn’t
 - Sexual abuse, coercion into prostitution, exploitation by their ‘friend’
- 7.3.5 Hate crime can be very subjective, and it is important to consider the vulnerability of the victim, the incidents occurring and any known background of the alleged perpetrator when dealing with hate crime. If you are unsure please seek advice from a Safeguarding Officer.

- 7.3.6 Indicators of a victim of mate crime may be:
- Lack of money shortly after payday
 - Withdrawal from services or family
 - Over reliance on a new friend
 - Changes in behaviour or mood
 - Making excuses for the behaviour or actions of a friend
- 7.3.7 Those subject to hate crime may be more at risk of early extremist tendencies, or those perpetrating may be exhibiting extremist views. In such cases the Prevent chapter of this policy should be referred to, which will give guidance on who to contact and go to for advice.
- 7.3.8 It is well known that hate crime and incidents are underreported nationally and locally. Statistical information can, therefore, misrepresent the reality of hate crime.
- 7.3.9 There are currently no statistics for mate crime, as often this type of incident is not identified, not reported, or can't be classed as a crime. However, we know from national case studies that the impact of mate crime can be high.
- 7.3.10 To ensure we do not see serious consequences in our area, it is important that we raise the profile of hate and mate crime and use this policy to inform, guide and protect.

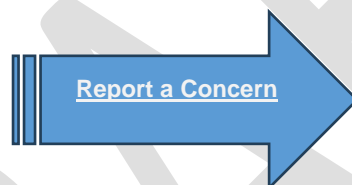
7.4 Responding to a Report of Hate or Mate Crime

- 7.4.1 South Kesteven District Council is signed up to the Lincolnshire Hate Crime Strategy. Under the strategy, it has been agreed that all partners in Lincolnshire will use [Stop Hate UK](#) as their third party reporting centre. If a report is made to a member of staff or elected member, the following process should be followed:
- Take notes of the incident or allegation
 - Encourage the person to report the hate or mate crime to the police or to Stop Hate UK
 - If the victim does not wish to make the report themselves, contact Stop Hate UK to report the hate or mate crime as a third party. Inform a Safeguarding Officer of the report and any action taken
 - Consider any additional factors such as Anti-Social Behaviour, Domestic Abuse or Prevent. Where these factors are identified, refer the case to the Designated Safeguarding Lead for further advice
 - Make any necessary referrals arising from the above risk assessments
 - Offer the victim appropriate support, giving them a named contact. Identify any additional vulnerabilities including alcohol or substance misuse which may require a referral to substance misuse services or adult services.
- 7.4.2 If an allegation is made against a member of staff or elected member, the Designated Safeguarding Lead or Deputy Safeguarding Lead must be informed immediately. The Designated Safeguarding Lead will inform the Chief Executive and the Local Authority Designated Officer for Allegations (LADO), if appropriate, and consideration will be given to suspending the member of staff from work or moving them to alternative duties. If a Safeguarding Officer is the subject of an allegation, the report must be made directly to the Chief Executive. If it is necessary to conduct an investigation into events surrounding the complaint, this will be conducted in accordance with advice from the LADO, if appropriate, and through the Council's Disciplinary Policy and Procedure.

- 7.4.3 Staff Welfare is a key concern for the Council. If a member of staff or elected member is experiencing hate or mate crime, they will be offered the same support as a member of the public reporting to us, plus any extra support the council can offer such as management support. If the person perpetrating the hate or mate crime is an employee or elected member, the same process as described in the above paragraph will be followed, with serious consideration given to suspension to allow for proper investigation and to safeguard the welfare of staff, guided by the Council's Disciplinary Procedure.
- 7.4.4 On-line training is provided through the LSAB/LSCP to ensure that staff know what to look out for and how to respond to a report of hate or mate crime.

7.5 Reporting Concerns about Hate or Mate Crime

- 7.5.1 Anybody subject to this policy may witness or be informed of an issue that they feel should be referred to the Police or Prevent. An SKDC Safeguarding Officer or the Senior Neighbourhoods Officer will help you to determine the next steps and to make a referral to the appropriate authority if required.
- 7.5.2 To access information and an internal reporting form to enable you to raise a concern, you can click on this logo anywhere in the policy. **The link will take you to the intranet.** The form must then be sent to safeguarding@southkesteven.gov.uk. Once your concern has been received, the next steps and appropriate action will be decided.



- 7.5.3 Alternatively, and for staff without IT access, please speak to the Designated Safeguarding Lead or the Senior Neighbourhoods Officer to report a concern.
- 7.5.4 There are alternative reporting methods for hate crime and mate crime, detailed below. If you report via these methods, you must notify the Designated Safeguarding Lead.
- 7.5.5 **Reporting to the Police:** Hate crimes are just that: a crime. Reporting a hate crime to the Police is always the preferred choice so that accurate data can be captured and the incident dealt with appropriately. There is still a perception that hate crimes will not be taken seriously or may lead to reprisal, which leads to huge under-reporting. A recent report into transgender hate incidents suggested that victims did not know where to go for help as they felt embarrassed to go to the Police and did not believe any action would be taken. The Police can and do take action and victims can be reassured that their complaint will be dealt with, and that they will be treated with dignity.
- 7.5.6 **Third party reporting centres:** Where a victim or witness to an incident will not go to the police in person, third party reporting centres can be used. There are various third-party reporting centres which can be accessed in person, by phone or on the internet. Once contacted, the centre can then report an incident to the Police on behalf of the victim or concerned person, provide advice and support and signpost to other agencies as appropriate. Third party reporting provides a safe and confidential environment, with an agency that the individual may have more trust in. Some third-party reporting centres also have specialists in languages and law.

- 7.5.7 **Stop Hate UK:** Stop Hate UK is a national organisation which works to raise the profile of and challenge all forms of hate crime and discrimination. Stop Hate UK is funded to operate as a specialist third party reporting centre in Lincolnshire. www.stophateuk.org.

7.6 Our commitment to tackling Hate Crime and Mate Crime

- 7.6.1 A Lincolnshire Hate and Mate Crime charter was developed by the Safer Lincolnshire Partnership that sets out 10 standards that agencies should aim to meet to ensure compliance. SKDC aims to follow this charter and will take steps to meet all 10 standards as set out below:

1	That the agency I represent will promote awareness and understanding of Hate Crime and Mate Crime and its impact on victims and communities – both internally and externally.
2.	Hate Crime and Mate Crime material is displayed by the agency/department I represent in different languages relevant to local communities and is also available in alternative formats such as large print. Information about Hate Crime and Mate Crime is included on respective agencies websites with links to the Lincolnshire Police and Stop Hate UK websites.
3.	That the agency I represent has a process in place to effectively identify Hate Incidents/Crime and Mate Crime.
4.	That there is an effective policy/protocol or guidance in place detailing how the agency/department will respond to both Hate Crime and Mate Crime.
5.	The agency I represent is committed to working in partnership to tackle Hate Crime and Mate Crime.
6.	That there is full commitment by the agency I represent to manage risk around hate crime.
7.	Ensure appropriate referral/signposting pathways are in place for victims of Hate Crime and Mate Crime.
8.	That staff that require Hate Crime and Mate Crime training have been identified and receive role appropriate training.
9.	That there is regular attendance and participation at the Anti-Social Behaviour Strategic Management Board and Hate Crime Delivery Group from my agency.
10.	The agency has a policy that includes staff experiencing or perpetrating Hate Crime and Mate Crime.

- 7.6.2 The charter recommends a traffic light system for self-assessment against each standard, with the aim of scoring green in all areas. This policy is the first step toward that aim. Training is integrated into the Council's safeguarding training plan. SKDC is committed to ensuring that information on hate and mate crime is available on its website to enable residents to find out more about the issue, including how and where to report.

6 MODERN SLAVERY AND HUMAN TRAFFICKING

8.1 Introduction

- 8.1.1 The Modern Slavery Act 2015 is an important milestone in the fight against slavery and for social justice. It unified and simplified previous legislation and gave law enforcement new powers, including increased sentencing and protection for survivors.

8.2 Modern Slavery and Human Trafficking

- 8.2.1 Modern slavery is a complex crime, often crossing international borders and involving multiple forms of exploitation. It is usually hidden. The common factors are that a victim is, or is intended to be, used or exploited for someone else's (usually financial) gain, without respect for their human rights.
- 8.2.2 Victims may be any age, gender and ethnicity, may have been brought from overseas or be vulnerable people from the UK. They are usually forced to work illegally against their will in many different sectors. Victims may not be aware that they are being trafficked or exploited and may appear to have consented to elements of their exploitation or accepted their situation.
- 8.2.3 Modern Slavery can take many forms including the trafficking of people, forced labour, servitude and slavery. Children (those aged under 18) are considered victims of trafficking, whether or not they have been coerced, deceived or paid to secure their compliance. They need only have been recruited, transported, received or harboured for the purpose of exploitation.
- 8.2.4 The term Modern Slavery captures a whole range of types of exploitation, many of which occur together. These include but are not limited to:
- Sexual exploitation: includes but is not limited to sexual exploitation and sexual abuse, forced prostitution and the abuse of children for the production of child abuse images/videos.
 - Domestic servitude: involves a victim being forced to work in predominantly private households, usually performing domestic chores and childcare duties. Their freedom may be restricted and they may work long hours often for little or no pay, often sleeping where they work.
 - Forced labour: victims may be forced to work long hours for little or no pay in poor conditions under verbal or physical threats of violence to them or their families. It can happen in various industries, including construction, manufacturing, laying driveways, hospitality, food packaging, agriculture, car washes, maritime and beauty (nail bars). Often victims are housed together in one dwelling.
 - Criminal exploitation: the exploitation of a person to commit a crime, such as pick-pocketing, shop-lifting, cannabis cultivation, drug trafficking and other similar activities that are subject to penalties and imply financial gain for the trafficker. Modern slavery victims are commonly involved in fraud or financial crime whereby perpetrators force victims to claim benefits on arrival but the money is withheld, or the victim is forced to take out loans or credit cards. Cannabis cultivation is the highest category of criminal exploitation.
 - Other forms of exploitation – Organ removal; forced begging; forced benefit fraud; forced marriage and illegal adoption

- 8.2.5 Human Trafficking: for a person to have been a victim of human trafficking there must have been:
- **Action** – recruitment, transportation, transfer, harbouring or receipt, which can include either domestic or cross-border (international) movement
 - **Means** – threat or use of force, coercion, abduction, fraud, deception, abuse of power or vulnerability – however, there does not need to be a means used for children as they are not able to give informed consent
 - **Purpose of exploitation** – for example sexual exploitation, forced labour or domestic servitude, slavery, financial exploitation, illegal adoption, removal of organs.
- 8.2.6 Slavery, Servitude and Forced or Compulsory Labour: for a person to have been a victim of slavery, servitude and forced or compulsory labour there must have been:
- **Means** – being held, either physically or through threat of penalty – e.g. threat or use of force, coercion, abduction, fraud, deception, abuse of power or vulnerability. However, there does not need to be a means used for children as they are not able to give informed consent
 - **Service** – an individual provides a service for benefit, e.g. begging, sexual services, manual labour, or domestic service.
- 8.2.7 Forced or compulsory labour may be present in trafficking cases. However, not every person who is exploited through forced labour has been trafficked. There will be cases of exploitation that do not meet the threshold for modern slavery. For example someone may choose to work for less than the national minimum wage, or in undesirable conditions, without being forced or deceived. In these instances, cases should be referred to the Police or Gangmasters and Labour Abuse Authority (GLAA). Safeguarding Officers will be able to advise you on this.
- 8.2.8 Slavery and servitude are more serious versions of forced or compulsory labour. You can find more information on the indicators of modern slavery [here](#).

8.3 National Referral Mechanism (NRM)

- 8.3.1 The National Referral Mechanism (NRM) is a framework for identifying and referring potential victims of modern slavery and ensuring they receive the appropriate support.
- 8.3.2 Modern slavery is a complex crime and may involve multiple forms of exploitation, as outlined above. An individual could have been a victim of human trafficking and/or slavery, servitude and forced or compulsory labour.
- 8.3.3 Victims may not be aware that they are being trafficked or exploited, and may have consented to elements of their exploitation, or accepted their situation. If you think that modern slavery has taken place, the case should be referred to the NRM so that the relevant competent authority can fully consider the case. You do not need to be certain that someone is a victim. In all instances, you should consult with the Designated Safeguarding Lead or the Deputy Safeguarding Lead prior to any referral taking place.

8.4 NRM Referral or a Duty to Notify Referral (DtN)

- 8.4.1 The online referral system is to be used for referrals into the NRM and for Duty to Notify referrals (DtN). Only staff at designated first responder organisations can make referrals. As a local authority, South Kesteven District Council is classed as a first responder.

- 8.4.2 The difference between an NRM referral and a DtN referral relates to the consent of the adult involved.
- 8.4.3 If the potential victim is under 18, or may be under 18, an NRM referral must be made – children cannot be referred in using a DtN referral. Child victims do not have to consent to be referred into the NRM and must first be safeguarded and then referred into the NRM process.
- 8.4.4 Consent is required for an adult to be referred to the NRM. For an adult to provide their informed consent, you must explain:
- what the NRM is
 - what support is available through it
 - what the possible outcomes are for an individual being referred
- 8.4.5 You should also make it clear that information may be shared or sought by the relevant competent authority from other public authorities, such as the police and local authorities, to gather further evidence on an NRM referral.
- 8.4.6 The online referral should only be completed for adults if you suspect someone is a victim of modern slavery and where the adult concerned has understood the implications of, and consented to, the referral. You must consult with the Designated Safeguarding Lead or the Deputy Safeguarding Lead prior to making a referral.
- 8.4.7 If an adult does not consent to enter the NRM, a DtN referral should be completed using the same online process.

8.5 Duty to Notify (DtN)

- 8.5.1 From 1 November 2015, specified public authorities are required to notify the Home Office about any potential victims of modern slavery they encounter.
- 8.5.2 The online system provides optional and mandatory fields to enable you to submit the referral. Adult cases who do not provide consent to be referred into the NRM process, automatically become DtN referrals on the online system.
- 8.5.3 The [online form](#) will identify whether someone is a first responder by verifying their work email address. You will need to complete this verification to progress with the form. Always refer to the Designated Safeguarding Lead or the Deputy Safeguarding Lead before making a referral.
- 8.5.4 After submitting the form (which will be sent to the relevant competent authority) you will be sent a link to download a copy. The case will be assigned a reference number which will be e mailed to you. You must share this and a copy of the form submitted with the Designated Safeguarding Officer via safeguarding@southkesteven.gov.uk .

8.6 Referring Modern Slavery Victims to the Police

- 8.6.1 A potential victim of modern slavery is a potential victim of a crime. All NRM referrals should be referred to the police - either on the victim's behalf if they give consent, or as a third-party referral if they don't give consent (provided this does not breach any obligation of confidence under the common law).
- 8.6.2 This doesn't mean that potential victims are under any obligation to cooperate with the police. There is a section on the online form NRM where it can be confirmed if they are or are not willing to engage with the police.

8.7 Obligation of Confidence

- 8.7.1 The NRM process is already a multi-agency process and when a potential victim consents to enter the NRM, they should be aware that information will be passed on by the first responder / frontline worker in order to access the NRM. It is unlikely that an obligation of confidence would prevent referring this information to the police.
- 8.7.2 If you are unsure whether an obligation of confidence would be breached by referring a case to the police, you should contact the Designated Safeguarding Lead or the Deputy Safeguarding Lead for further guidance.

DRAFT

7 COUNTY LINES AND CUCKOOING

9.1 Introduction

- 9.1.1 'County Lines' and 'Cuckooing' are forms of criminal exploitation involving children and vulnerable adults. They are geographically widespread forms of harm about which relatively little is known, or recognised, currently by those best placed to spot its potential victims. This chapter is intended to explain the nature of this harm to enable staff to recognise the signs and respond appropriately so that potential victims get the support and help that they need.

9.2 County Lines

- 9.2.1 County Lines is a major, cross-cutting issue involving drugs, violence, gangs, safeguarding, criminal and sexual exploitation, modern slavery and missing persons; and the response to tackle it involves the police, the National Crime Agency, a wide range of Government departments, local government agencies and VCS (voluntary and community sector) organisations.

The UK Government defines county lines as follows:

"County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of "deal line". They are likely to exploit children and vulnerable adults to move and store the drugs and money and they will often use coercion, intimidation, violence (including sexual violence) and weapons."

- 9.2.2 Those who become involved in county lines will almost undoubtedly be caught up in other safeguarding issues, potentially drugs, criminality, trafficking, modern slavery, sexual exploitation and gangs. It is extremely important that those involved in safeguarding children and vulnerable adults have an understanding of county lines. A typical county lines scenario is defined by the following components:
- A group (not necessarily affiliated as a gang) establishes a network between an urban hub and county location, into which drugs (primarily heroin and crack cocaine) are supplied
 - A branded mobile phone line is established in the market, to which orders are placed by introduced customers. The line will commonly (but not exclusively) be controlled by a third party, remote from the market
 - The group exploits young or vulnerable persons, to achieve the storage and/or supply of drugs, movement of cash proceeds and to secure the use of dwellings (commonly referred to as cuckooing)
 - The group or individuals exploited by them regularly travel between the urban hub and the county market, to replenish stock and deliver cash
 - The group is inclined to use intimidation, violence and weapons, including knives, corrosives and firearms

- 9.2.3 Some potential indicators of county lines involvement and exploitation are listed below, with those at the top of particular concern:
- persistently going missing from school or home and/or being found out-of-area
 - unexplained acquisition of money, clothes, or mobile phones
 - excessive receipt of texts/phone calls and/or having multiple handsets
 - relationships with controlling/older individuals or groups
 - leaving home/care without explanation
 - suspicion of physical assault/unexplained injuries
 - parental concerns
 - carrying weapons
 - significant decline in school results/performance
 - gang association or isolation from peers or social networks
 - self-harm or significant changes in emotional wellbeing
- 9.2.4 One of the key factors found in most cases of county lines exploitation is the presence of some form of exchange (e.g. carrying drugs in return for something). Where it is the victim who is offered, promised or given something they need or want, the exchange can include both tangible (such as money, drugs or clothes) and intangible rewards (such as status, protection or perceived friendship or affection). It is important to remember the unequal power dynamic within which this exchange occurs and to remember that the receipt of something by a young person or vulnerable adult does not make them any less of a victim. It is also important to note that the prevention of something negative can also fulfil the requirement for exchange, for example a young person who engages in county lines activity to stop someone carrying out a threat to harm his/her family.

9.3 Cuckooing

- 9.3.1 Cuckooing is a practice where people take over a person's home and use the property to facilitate exploitation. The most common form of cuckooing is where drug dealers take over a person's home and use it to store or distribute drugs.
- 9.3.2 Drug dealers will often target the most vulnerable in society. They are seeking to establish relationships to access the vulnerable person's home. Once they gain control over the victim, whether through drug dependency, debt or as part of their relationship, larger groups will sometimes move in. The threat of violence is often used to control the victim.
- 9.3.3 The victims of cuckooing are most commonly class 'A' drug users, but there are cases of victims with learning difficulties, mental health issues and, to a lesser extent, physical disabilities.
- 9.3.4 Signs that cuckooing may be going on at a property include:
- An increase in people entering and leaving
 - An increase in cars or bikes outside
 - An increase in anti-social behaviour
 - Increasing litter outside
 - People coming and going at strange times
 - Damage to the door/the door propped open
 - Unknown people pressing buzzers to gain access to the building
 - You haven't seen the person who lives there recently or, when you have, they have been anxious or distracted
- 9.3.5 If just one of these is taking place in a property, it may not mean anything. But if three or more of them are taking place, it could indicate that the property is being cuckooed.

9.4 The Links between County Lines and Cuckooing

*“The **cuckooing model** was initially used by **county lines** groups originating from London. County line dealing ‘franchises’ then spread throughout the country, taking the cuckooing model with them. However, due to the success of this method, cuckooing has now been adopted by other drug supply networks.”*

National Police Chiefs Council

- 9.4.1 Cuckooing remains the dominant method of obtaining access to suitable premises to operate and deal from. Virtually every force that reported the presence of a county line end-point reported cuckooing. County lines groups will target new premises by pursuing vulnerable individuals who attend recovery groups, dependency units and areas associated with those experiencing problems. They seek to establish relationships with vulnerable individuals for access to their homes. Once they gain control over the victim, whether through drug dependency, debt or as part of their relationship, groups move in. Once this happens the risk of domestic abuse, sexual exploitation and violence increases. In some instances, drug users may appear to be complicit in allowing their home to be used, however the issue of true consent is questionable, as many drug users will not necessarily see themselves as being vulnerable.
- 9.4.2 Cuckooed addresses have been linked to many county lines, with victims of all ages encountered by law enforcement in such properties. There is an emergence of cuckooed addresses being used by multiple county lines groups simultaneously, although there is currently insufficient detail to confirm how complicit or collaborative groups might be. It is also common for county lines networks to have access to several cuckooed addresses at any one time. They will move quickly between vulnerable peoples’ homes and will stay for just a few hours, a couple of days or sometimes longer. This helps groups evade detection, especially as intelligence gathered by law enforcement is often unclear and is quickly out of date.

9.5 Reporting Concerns about County Lines or Cuckooing

- 9.5.1 Anybody subject to this policy may witness, be informed of, or see during the course of their duties, a county lines or cuckooing concern. The duty to refer applies to everybody to whom this policy applies.
- 9.5.2 For further information concerning County Lines or Cuckooing and how to report it, go to [County lines | Lincolnshire Police \(lincs.police.uk\)](https://lincs.police.uk). If there are safeguarding concerns for anyone involved, please use the safeguarding procedures for children and adults.

9.6 Information Sharing

- 9.6.1 A multi-agency approach is necessary to address this threat. Agencies such as the Police, Housing, YOS, Probation, ARC, Adult and Children’s Services etc., are key in identifying concerns before they escalate into safeguarding referrals. Please speak to the Designated Safeguarding Lead or the Deputy Safeguarding Lead for further information if you are unsure.

10 STALKING

10.1 Introduction

"Stalking is a psychological crime...it's a crime of great terror, and it's not often recognised."

(Ministry of Justice Spokesperson)

- 10.1.1 The Suzy Lamplugh Trust defines stalking as *"a pattern of fixated and obsessive behaviour which is repeated, persistent, and intrusive and causes fear of violence or engenders alarm and distress in the victim."*
- 10.1.2 Stalking can consist of any type of behaviour such as regularly sending flowers or gifts, making unwanted or malicious communication, damaging property and physical or sexual assault. If the behaviour is persistent and clearly unwanted, causing fear, distress or anxiety then it is stalking and nobody should have to live with it.
- 10.1.3 One in two domestic stalkers will carry out the threats to harm their victim. One in ten non-domestic stalkers will carry out the threats to harm their victim.

10.2 Who stalks?

- 10.2.1 When many people hear the word stalking they still think of a stranger lurking in the shadows or a delusional fan following a celebrity. Whilst these cover some stalking scenarios they are by no means the majority. About 45% of people who contact the Suzy Lamplugh Trust are being stalked by ex- partners and a further third have had some sort of prior acquaintance with their stalker such as having dated, married or been friends with their stalker. Just because a person knows or knew their stalker does not mean that the situation is their fault - it is still stalking and it is wrong.

10.3 Who is a typical victim of stalking?

- 10.3.1 Anyone can become a victim of stalking. A report produced by Dr. Lorraine Sheridan and Network for Surviving Stalking, in which 2,292 victims of stalking were surveyed, found that victim's ages ranged from 10 to 73, they were male and female, were spread across the entire socio-economic spectrum and a large proportion (38%) were professionals. Dr. Sheridan concluded that virtually anyone can become a victim of stalking and the only way to avoid doing so would be to avoid the social world.

10.4 How long does stalking last?

- 10.4.1 There is no definite answer to this question. Dr. Lorraine Sheridan's report (mentioned above) found that stalking could last anywhere from 1 month to 43 years. The average length of time was found to be between 6 months and 2 years. Dr. Sheridan also found that the duration of stalking tends to increase as the stalker's emotional investment in the relationship increases. This is one of the reasons ex-intimate stalking is often considered to be the most dangerous.

10.5 Can stalking without violence cause harm?

- 10.5.1 Yes. The absence of violence in a stalking case doesn't mean the victim is unaffected. Stalking can cause severe psychological distress to a victim. Depression, anxiety, sleep disturbance, paranoia, agoraphobia and post-traumatic stress disorder are all common side effects of stalking.

10.6 Responding to disclosures, concerns and allegations

- 10.6.1 These procedures are intended as a guide to help understand what action should be taken if you have concerns about or encounter a case of alleged or suspected stalking.
- 10.6.2 In order to help identify a pattern of behaviour such as turning up at home unannounced, calling a person numerous times, sending gifts etc., best practice is to encourage a log to be kept of all incidents, keep notes regarding anything that could help show a pattern, anything witnessed such as flowers being delivered, an unwanted text message etc. Encourage reporting to police and encourage use of the original police incident number in any future reports in order to show that there is a pattern of behaviour emerging.
- 10.6.3 Depending on the nature of the disclosure/concern/allegation, different approaches may be needed to get the best outcome. This [link](#) will take you to the Lincolnshire County Council Domestic Abuse webpage S-DASH questions to check the current level of risk. More information can also be found by ringing the National Stalking Helpline on 0808 802 0300.

10.7 Reporting Concerns

- 10.7.1 If you feel that someone is at immediate risk of significant harm, then you must call the Police on 999. If however you think they are at risk but that risk is not immediate, you must take appropriate action, calling 101 if you think a crime has been committed, and by reporting the matter to the LCC Customer Services Centre (CSC) on 01522 782111 for children, 01522 782155 for adults, or emergency out of hours 01522 782333.
- 10.7.2 In all cases you should report the incident to the Designated Safeguarding Lead accordingly.

11 TRANSIENT FAMILIES

This guidance, which is adapted from Transient Families Guidance produced by the LSCP, is aimed at raising awareness and encouraging vigilance and the professional curiosity of staff, volunteers and elected members when it comes to families that move frequently and appear to live very transient lifestyles. The guidance was produced as a response to learning from Serious Case Reviews, namely family Q which highlighted how families that frequently move house and area can be difficult to engage with and subsequently difficult to assess in terms of need.

11.1 Introduction

- 11.1.1 Families who experience frequent changes of address and/or are placed in temporary accommodation can be subject to particularly transient lifestyles. They are likely to lose contact with previous support networks and may become disengaged from services. Frequent movers can find it difficult to access the services they need. For those already socially excluded, moving frequently can worsen the effects of their exclusion.
- 11.1.2 Children and families who move most frequently between Local Authorities are:
- homeless families
 - asylum seekers and refugees
 - gypsy and traveller families
 - looked after children
 - people in the criminal justice system, and
 - families experiencing domestic abuse
 - families who move to coastal areas for the summer
 - families that move within the private rented sector
 - military families.
- 11.1.3 It must be remembered however that other families that move frequently may not fit into those categories. It is important to note that some families move deliberately in order to avoid professionals from discovering abuse within the family and will access a multiple of services in order to avoid individual professionals building a picture of the family. It is equally as important to note that not all families that move frequently are doing so to avoid professional scrutiny and in fact some families just like to move. However, this does not mean that frequent moves do not have a detrimental effect on children and young people, particularly in relation to feelings of social isolation and lack of educational consistency.
- 11.1.4 It is vital that services working with children maintain an awareness of how easily information and networks can be lost in moves. Effective systems must be put in place and robust action taken to ensure that as soon as such highly mobile, vulnerable children and unborn babies are identified that appropriate multi-agency planning is put in place. Local authorities, the police, education, housing and the health service, in fact all agencies have a specific 'duty to co-operate' to ensure better outcomes and to improve the well-being of adults with needs for care and support and all children, including children who move frequently.

11.2 Identifying risk

11.2.1 When families move frequently, it is more difficult for us to identify risks and monitor an individual's welfare. Staff, volunteers and elected members should be alert to the possibility that a child or family that has moved may not be in receipt of universal services. If you come into contact with a family should endeavour to proactively engage with the family in order to link them into local universal services, e.g:

- Seeking information about the child / family (full names, dates of birth, previous address, GP's name, if attending any school etc.)
- Providing information about relevant services
- Following up to ensure that the family has managed to make contact and register with a local GP, school and other relevant services to which the child is entitled
- Engaging appropriately with relevant agencies regarding any concerns which emerge

11.2.2 A number of serious case reviews from around the Country identify that a risk factor to children is them not being known to universal services.

11.2.3 The following circumstances associated with children and families moving across district authority boundaries are a cause for concern:

- A child and family, or pregnant woman, not being registered with a GP
- A child not having a school place or whose attendance is irregular and who isn't being electively home educated
- A child or family having no fixed abode (e.g. living temporarily with friends or relatives)
- Several agencies holding information about the child and family, which is not co-ordinated and / or which has not followed the child or family (i.e. information which is missing or has gaps).

11.3 Responsibilities

11.3.1 Although all agencies can play a role in identifying mobile families and subsequently the signals that may cause concern, it is acknowledged that some agencies will be more likely to identify transient families, those being Health professionals, Schools, Housing authorities, Children's Services and Department for Work and Pensions. Our own housing teams work within specific procedures and practices in relation to transfers in and out of their service, either within the County or outside of the County.

11.4 Social Housing

11.4.1 Social housing has a very broad remit and is different dependent on district, varying further with landlord functions. In Lincolnshire, each District Council has the responsibility for delivering housing advice, homelessness prevention and statutory homeless services. In this authority we are also responsible for allocations of tenancies and general landlord functions. General professional curiosity should be applied in the context of a housing register application disclosing multiple addresses of short stays with different friends and/or family members or not disclosing details of universal providers working with the applicant. If a member of staff identifies a household with particularly high number of moves in relative short periods or a reluctance to share required residency information, the Designated Safeguarding Lead or Deputy Safeguarding Lead should be informed to agree/determine next steps in line with our own safeguarding policies and procedures.

11.5 Children's Services

- 11.5.1 If a child is known to Children's Services and has left the area or is about to leave the area on a child in need plan, a transfer will take place when the carer/parent has consented to information being shared and wants continuation of service from another local authority. If the carer/parent does not consent or does not want a service from another local authority consideration shall be given to whether the discontinuation of the child's plan will result in safeguarding issues. In these circumstances a referral will be still be made to the other local authority. The Social Worker will also send a letter notifying the Lincolnshire GP, Health Visitor, school and any other agencies involved of the details of the move, including the date and new address. This should be sent in all circumstances, planned or unplanned moves.
- 11.5.2 If a child is on a child protection plan on establishing that the child is moving, or has moved out of the county, the social worker will make immediate telephone contact with the new authority to exchange information regarding reasons for the original child protection plan, current level of concern and date of last visit. The Lincolnshire Social Worker has responsibility for taking any immediate action necessary to safeguard the health or welfare of the child; informing Children's Services in the new authority, and establishing temporary arrangements for case responsibility; ensuring that all agencies involved in Lincolnshire are aware of the move and that they are taking responsibility where relevant for informing their equivalent agency in the new authority; informing the Designated Manager of Children's Services in the Safeguarding Unit (Lincolnshire); who will inform the Designated Manager in the receiving authority and send initial and most recent child protection conference minutes; attending and/or providing relevant information for the child protection conference in the receiving authority.
- 11.5.3 There is a LSCP policy with regard to children subject to cross border issues. Staff, volunteers and elected members should follow our Safeguarding procedures. If your concern is in relation to an unborn child then you should follow the Lincolnshire Safeguarding Children Partnership's [Pre-birth protocol](#). The full Transient Families Guidance can be found [here](#)

Corporate Roles and Responsibilities for Safeguarding and Prevent

Corporate Role	Overview of Responsibilities	Lead Officer(s)
Designated Safeguarding Lead (DSL)	<p>The Designated Safeguarding Lead has overall responsibility for safeguarding and will:</p> <ul style="list-style-type: none"> • Ensure the Council fulfils its duties and can evidence delivery of its legal duties under Section 11 of the Children Act 2004 and the Care Act 2014, along with locally agreed standards such as the Lincolnshire Domestic Abuse Charter, through regular audits, required by Lincolnshire Safeguarding Adults Board, Lincolnshire Safeguarding Children Partnership and the Domestic Abuse Strategic Management Board • Represent the council on safeguarding matters at an external and strategic level and have overall responsibility for ensuring the council is meeting its safeguarding requirements • Maintain communication channels with outside agencies, including attending meetings • Advise staff on responding to and referring safeguarding concerns • Ensure that all cases are collated, recorded, reported and reviewed, and all requests for information are responded to within the required timescales to support case reviews, inspections, etc • Represent the council in the instance of any serious case review or domestic homicide review • Be the council spokesperson in the event of any public/ media enquiries • Work closely with a wide range of partner agencies, to build trust and provide robust challenge, to promote effective safeguarding activity in the District 	Head of Service (Housing Options)
Prevent Lead	<p>The Prevent Lead will:</p> <ul style="list-style-type: none"> • Represent the Council at relevant meetings • Ensure the website, intranet and Safeguarding policy contain up-to-date information and advice • Recommend training for staff/elected members • Provide advice to Safeguarding Officers on Prevent/Channel referrals 	Community Engagement Manager
Deputy Safeguarding Officer	<p>The Deputy Safeguarding Officer will:</p> <ul style="list-style-type: none"> • Develop and review the safeguarding policy and procedures • Ensure the programme of training and development is relevant, up-to-date and adhered to by staff • Work with the DSL in advising staff on responding to and referring safeguarding concerns • Work with the DSL in ensuring all cases are collated, recorded, reported and reviewed, and all requests for information are responded to within the required timescales to support case reviews, inspections, etc • Work with the DSL to ensure that the Council fulfils its duties and can evidence delivery of its legal duties under Section 11 of the Children Act 2004 and the Care Act 2014, through regular audits, required by Lincolnshire Safeguarding Adults Board, Lincolnshire Safeguarding Children Partnership and the Domestic Abuse Strategic Management Board • Deputise for the Designated Safeguarding Lead as required 	Community Engagement Manager

Safer Recruitment	<p>Employers need to identify candidates who may be unsuitable for certain jobs, especially work that involves vulnerable groups including children.</p> <p>The Head Human Resources will:</p> <ul style="list-style-type: none"> • Ensure that South Kesteven District Council makes safe recruitment decisions in line with the requirements of the Disclosure and Barring Service (DBS) • Ensure that the Council's DBS guidance is up to date and reviewed in line with any legislative changes • Support safeguarding leads to identify posts that need DBS clearance • Undertake DBS checks for all identified posts • Advise management of strategic risks relating to people • Maintain records to demonstrate current compliance of DBS for identified posts 	HR Manager and corporate Management Team
Service and Line Managers	<p>Heads of Service and Line Managers are responsible for increasing safeguarding awareness in their services. Dealing with abuse and neglect can be stressful and distressing and staff can be left feeling concerned about a situation or case they have experienced. They will:</p> <ul style="list-style-type: none"> • Support and supervise staff appropriately • Ensure that their team members complete all relevant training requirements • Disseminate safeguarding information to teams, supported by the safeguarding leads • Respond promptly to requests for information regarding specific cases and maintain clear communication with the Designated Safeguarding Lead or the Prevent Lead • Include safeguarding as a standing item in 1:1 meetings, appraisals etc • Ensure that all concerns and cases are logged via the Council's Designated Safeguarding Lead (either reporting a concern or notifying the Lead of assessments and action taken) 	Senior Management Team
All Staff, Contractors and Elected Members	<ul style="list-style-type: none"> • Undertake training appropriate to their role • Report any safeguarding, domestic abuse or Prevent concerns to the appropriate authority via the Designated Safeguarding Lead, Deputy Safeguarding Lead or the Prevent Lead 	Line Managers

Training and Development

Training Group	Definition	Who?
A	<p>All staff without IT access will need to attend safeguarding briefing sessions. The briefing will cover general safeguarding principles, personal responsibilities and who to contact with any concerns. All elected members will be offered safeguarding training when they are elected, as part of the induction process. Elected Members will be offered opportunities to increase their safeguarding awareness through e-learning modules.</p> <p>In person briefings will be delivered on a three-year cycle.</p>	Staff, Elected Members, Contractors, Volunteers
B	<p>Those with infrequent or no direct contact with children, young people and potentially vulnerable adults who may become aware of possible abuse, neglect or maltreatment and need an understanding of the basic principles.</p> <p>Training identified will be e learning modules supplied by the LSCP/LSAB and should be completed across a three year pathway.</p>	Office-based colleagues
C	<p>Those with regular contact or periods of intense but irregular contact with children, young people, and vulnerable adults who may be in a position to identify concerns regarding abuse, neglect or maltreatment and make a safeguarding referral. Those who may be required to participate in Team Around the Child, Child in Need, Child Protection Conferences, Team around the Adult, Vulnerable Adults Panel, MAPPA, MARAC etc. Operational Managers responsible for the supervision of those colleagues who have regular contact with children, young people, adults at risk and/or have a responsibility for systems, policies, procedures for their service.</p> <p>Training identified will be e learning modules, virtual and in-person supplied by the LSCP/LSAB and should be completed across a six year pathway with refresher training after three years.</p>	Relevant Officers in customer facing roles such as Housing Options, Housing Officers, Homelessness Officers, Neighbourhoods Officers, Environmental protection, Rents AND their Line Managers
D	<p>Designated postholders with specific safeguarding responsibilities. Those responsible for ensuring their organisation is, at all levels, fully committed to safeguarding and having appropriate systems and resources in place.</p> <p>Training identified will be e learning modules, virtual and in-person supplied by the LSCP/LSAB and should be completed across a six year pathway with refresher training after three years.</p>	Designated Safeguarding Lead, Deputy Safeguarding Lead

Training Requirements

Code: A = Adult * For Line Managers and other officers involved in recruitment and selection
 C = Child ** For officers dealing directly with victims of domestic abuse
 B = Both

Training Group D – Safeguarding Leads		
Year	Title of Training Module to be Completed	Code
Induction	An Introduction to Safeguarding Everyone in Lincolnshire	B
1	Introduction to Safeguarding Adults	A
	Introduction to Safeguarding Children	C
	Children Who Experience Domestic Abuse	C
	Inter-Agency Safeguarding Children and Young People	C
	Making Safeguarding Personal – pre-requisite	A
	Mental Capacity Act – Basic Awareness	A
	Safer Recruitment	B
	Making Safeguarding Personal – Virtual Workshop	A
2	Child Exploitation	C
	Missing Children in Lincolnshire	C
	Missing Children in Lincolnshire	C
	Understanding the Trio of Vulnerabilities	B
	Domestic Abuse - DASH	A
	Child Sexual Abuse	C
	Domestic Abuse in Practice	B
	Domestic Abuse – MARAC and MOP	A
3	Zero Suicide Alliance Training	B
	Recognise Disguised Compliance and Disengagement within Families	B
	Refresher – Safeguarding Children	C
	Domestic Abuse in Practice	B
	Refresher - Safeguarding Adults	A
	FGM (Abuse linked to faith and belief)	B
	Modern Slavery and Trafficking	B
	Understanding the Importance of Dementia Awareness	A
4	An Introduction to the Autism Spectrum	B
	Statutory and Mandatory Training: Mental Health, Dementia and Learning Disabilities	B
5	Nurturing Wellbeing in Children and Young People	C
	Team Around the Child - Young Carers	C
6	Understanding Animal Welfare in Violent Homes	B
	Special Educational Needs and Disabilities (SEND)	C
	Understanding the Impacts of Hate Crime	B

Training Group B – Officers with limited or no direct contact with the public		
Year	Title of Training Module to be Completed	Code
Induction	An Introduction to Safeguarding Everyone in Lincolnshire	B
1	Tackling Exploitation and Modern Slavery in Lincolnshire	B
	E-Safety	B
2	Domestic Abuse Awareness – Short Course	A
	A Rough Guide to Not Putting Your Foot in it	B
	Prevent – Radicalisation and Extremism	B
3	Zero Suicide Alliance Training	B
	Mental Health Awareness	B
	Understanding the Importance of Dementia Awareness	A

Training Group C – Officers with regular contact – likely to make referrals		
Year	Title of Training Module to be Completed	Code
Induction	An Introduction to Safeguarding Everyone in Lincolnshire	B
1	Tackling Exploitation and Modern Slavery in Lincolnshire	B
	Domestic Abuse Awareness – Short Course	B
	Introduction to Safeguarding Adults	A
	Introduction to Safeguarding Children	C
	Children Who Experience Domestic Abuse	C
	Inter-Agency Safeguarding Children and Young People	C
	Making Safeguarding Personal – pre-requisite	A
	Mental Capacity Act – Basic Awareness	A
	*Safer Recruitment	B
	Making Safeguarding Personal – Virtual Workshop	A
2	Child Exploitation	C
	Missing Children in Lincolnshire	C
	Missing Children in Lincolnshire	C
	Self Neglect	A
	Understanding the Trio of Vulnerabilities	B
	**Domestic Abuse - DASH	A
	Child Sexual Exploitation	C
	Domestic Abuse in Practice	B
	**Domestic Abuse – MARAC and MOP	A
3	Zero Suicide Alliance Training	B
	Recognise Disguised Compliance and Disengagement within Families	B
	Refresher – Safeguarding Children	C
	Domestic Abuse in Practice	B
	Refresher - Safeguarding Adults	A
	FGM (Abuse linked to faith and belief)	B
	Modern Slavery and Trafficking	B
	Understanding the Importance of Dementia Awareness	A
4	An Introduction to the Autism Spectrum	B
	Transition to Adulthood as a Child in Care	B
	A Rough Guide to Not Putting Your Foot in it	B
	Statutory and Mandatory Training: Mental Health, Dementia and Learning Disabilities	B
	Child to Parent Carer Abuse in Lincolnshire	B
	Recognising and Supporting Parents in Parental Conflict	A
	E-Safety	B
	Valuing Care	C
5	Self Harm	B
	Suicidal Thoughts	B
	Friends Against Scams	A
	Nurturing Wellbeing in Children and Young People	C
	The Impact of Drug and Alcohol Use on Families	B
	Online Safety	B
	A New Approach to Child Poverty	C
	LGBTQ+ Awareness	B
	Team Around the Child - Young Carers	C
	Mental Health Awareness	B
6	Awareness of Private Fostering	C
	Understanding Animal Welfare in Violent Homes	B
	Special Educational Needs and Disabilities (SEND)	C
	Valuing SEND Approaches and Tools	C
	Understanding the Impacts of Hate Crime	B

Declaration for Staff, Consultants and Volunteers

This Council embraces its responsibility to develop, implement and monitor policies and procedures that safeguard the welfare of children, young people and adults in order to protect them from abuse and neglect whenever they are engaged in or with services provided directly and indirectly by the Council.

As a member of staff of, or a volunteer for this Council, you are required to be aware of your role in safeguarding, as set out in this Policy, and work within its associated Procedures.

Being made aware of the Policy and its Procedures, understanding the requirements that they place on you and being trained and supported appropriately in your role, all demonstrate the Council's commitment to ensuring that its staff and volunteers have an appropriate level of knowledge about safeguarding and are able to act if they have any concern about the health, safety and welfare of any child, young person or adult.

Declaration:

I know who the Council's Designated Safeguarding Lead is and who the Deputy Safeguarding Lead is.

I know where to find this Safeguarding Policy and Procedures.

I know that I have a duty to report any concerns about the safety and wellbeing of children, young people and adults to my line manager.

I commit to completing training appropriate to my role, including refresher training.

I commit to working within the Council's Safeguarding Policy and Procedures at all times.

Signed: _____

Date: _____

Name (Please Print):

Position in Organisation: _____

This declaration will be kept in your personnel file.

***Completion of this declaration is only necessary if the policy and procedures have not been accepted by you through NET Consent.**

Internal Safeguarding Referral Form

Provide as much detail as possible, but if you are unsure of any details, please leave blank.
Use further sheets if necessary.

Your details:	Name: Tel: Email: Job title:	
Details of person you are concerned about:	Name: Age: Address: Tel: Email:	
Details of other relevant people involved:	Name, relationship to above: Age: Address: Tel: Email:	
What are your concerns? Is this an (please highlight one): Allegation about someone Disclosure from someone Concern regarding a person/incident	<i>Please give a brief summary here, more details can be provided later.</i>	
Details of the incident: <i>Please provide as much detail as you can and try to repeat exact wording if possible.</i>		
Date		
Time		
Location		
What happened?		
What was said?		
What action have you taken so far?		
Does the person know you are making a referral?		
Any other relevant information		
Will you require further support following making this referral?	No	Yes – please give details if possible

Please email this form to safeguarding@southkesteven.gov.uk.

SAFEGUARDING INCIDENT FLOWCHART

SKDC Safeguarding at a glance

