

# LANCASTER TRAINING SERVICES LTD



## SAFEGUARDING POLICY

### VULNERABLE PERSONS

#### Child Protection & Vulnerable Adults Policy, Procedure and Guidance

## **1. POLICY**

### **1.1 Policy Statement**

- i. This policy sets out Lancaster Training Services (LTS) commitment for safeguarding the welfare and preventing abuse of all children and vulnerable adults involved in its courses.
- ii. The purpose of these policies and procedures is to ensure that the rights of children and vulnerable adults are protected whilst involved in activities at LTS, and any concerns raised will be dealt with, appropriately.
- iii. Every person has the right to live in safety and to be free from abuse or fear of abuse from others.
- iv. Every person has the right to live an independent life based on personal choice.
- v. The abuse of an individual is a clear infringement of these basic human rights, as are certain forms of discrimination based on race, culture, gender, age, disability or sexual orientation.

### **1.2 LTS' commitment**

The Safeguarding of children and vulnerable adults on our programmes is the informed responsibility of all staff, board members, trustees, subcontractors etc. It is our aim to actively make the learning environment safe and secure for all.

LTS follow the **5 R's** guidelines:-

- i. **Recognition** – the ability to recognise behaviour that may indicate abuse. Whether the abuse occurs on LTS premises, in the home, in the workplace, or in any other setting in which the learner may find themselves, staff will be trained so that possible abuse can be recognised, investigated and acted on seamlessly and effectively.
- ii. **Response** – staff will respond to any allegation and understand that it is not appropriate to lead or probe learners with questions. Learners must be reassured that they have done the right thing in reporting their concerns and that we will do everything we possibly can to help.
- iii. **Reporting** – any concerns must be reported to the Designated Senior Person. Key personnel are identified within LTS and have full training on how to deal with any allegation.
- iv. **Recording** – any allegation will be recorded including full details of what the learner said and any observations noted.
- v. **Referral** – The Designated Senior Person will investigate any allegations and

gather enough information to make a referral, if appropriate, by talking to the appropriate people inside or outside the organisation, and make the decision what action to take: i.e. whether to monitor and record the concern, or to refer it on.

All allegations of abuse will be taken seriously and fully investigated, and appropriate action taken.

LTS will review this policy annually or amend it immediately if a shortfall 'comes to light' whichever is most appropriate.

## **2 Definitions**

### **Vulnerable adult**

- i. Is a person who is aged 18 or over, **and** who **is, or may** be in need of, community care services because of frailty, learning or physical disability or mental health difficulty **and** who is or may be unable to take care themselves or take steps to protect themselves from significant harm or exploitation.

### **Harm**

- ii. The Children Act 1989 introduced the concept of "significant harm". Within this concept "Harm" should be taken to include not only ill treatment, (including sexual abuse and forms of ill-treatment that are not physical) but also the impairment of, or allowing an avoidable deterioration in physical, or mental health, and also includes the impairment of either physical, emotional, social or behavioural development. See appendix 1 for more detailed definitions of "Harm"

### **Abuse**

- iii. Is a violation of individual human and civil rights by any other person or persons.
- iv. This definition of abuse includes singular and repeated acts or mistakes. Abuse may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction, to which they had not consented, never could consent to, or whose consent was deemed invalid due to a real lack of understanding as to the issue they were consenting to. See appendix 1 for more detailed definitions of "Abuse"

### **Neglect**

- v. Is failing to act appropriately whether intentionally or negligently, this could also be an act of omission where a duty of care exists and is not fulfilled.
- vi. Neglect may include ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational and leisure services, the withholding of the necessities of life such as; medication, adequate and appropriate nutrition, information, clothing, comfort, relationships, safety and environment. See appendix 1 for further guidance on signs of "Neglect"

## **3 Designated Senior Person – Designated Senior Person (DSP)**

- i. Lancaster Training Services has a designated manager who is assigned to act upon any vulnerable adult or child protection concerns. This person is the Training Manager whom is responsible for coordinating action within LTS and liaising with other agencies.
- ii. The company also has a second designated person who can fulfill the obligations of the Training Manager should they not be available for any reason. This person is currently the company Safety Advisor.

#### **4 Responding to an Allegation - Dealing with suspicions/concerns/incidents**

The procedures will vary slightly depending on whether the person involved is a child or an adult.

However both the alleged abuser and the young person who is thought to be abused, have the right to confidentiality under the Data Protection Act 1998.

##### **If a child makes a disclosure:**

- i. Children & young persons who are in need or are in trouble always deserve someone who will:-
  - Listen
  - Not make judgments
  - Not make false promises about keeping secrets when this is not possible
  - Not reject what they are saying as untrue.
  - Reassure them that their needs are being put first.
  
- ii. If you have concerns about the physical or emotional wellbeing of a child:-
  - Talk to the child about the situation. Listen carefully to what is being said
  - Keep questions to a minimum, use to clarify what is being said
  - Tell the person what you are going to do next
  - Explain that you may have a legal obligation to pass the information on to protect both them and possibly other members of their family and or the public
  - Report the concerns to the Designated Senior Person as soon as possible so that a decision can be taken on whether the matter needs to be referred to any external agencies.
  - Record the concerns on the appropriate paperwork. (see appendix 3)
  
- iii. If a child makes an accusation against a member of staff:-
  - Record the facts on the appropriate paperwork, (see appendix 3) ensuring that any witnesses sign and date the entry.
  - Report the accusation to the Designated Senior Person within 24hrs so that they can take the appropriate action, and involve external agencies if necessary.
  
- iv. If a member of staff believes another staff member is behaving inappropriately towards a child they must:-
  - Record the facts on the appropriate paperwork, (see appendix 3) ensuring that any witnesses sign and date the entry.
  - Report the accusation to the Designated Senior Person within 24hrs so that they can take the appropriate action, and involve external agencies if necessary.

##### **If an adult makes a disclosure:**

- v. Unlike children (under 18) adults may choose to insist on confidentiality unless there are circumstances in which those wishes may be overridden. As a general rule you must respect the wishes of the adult, and act accordingly, however, vulnerable adults should **not** be *offered* or *promised* confidentiality by any staff member. It is important for staff to be able to share concerns and seek help from

others at least within LTS and this must be explained to the student.

- vi. Where there is reasonable suspicion of abuse, and the adult has capacity to withhold consent and does not wish the information to be shared with external agencies, then LTS must offer all appropriate support within LTS.
- vii. If there is reason to believe a crime has been committed, seek the vulnerable adult's consent to inform the police.
- viii. If the adult gives consent then immediately refer the matter to the Designated Senior Person for discussion and action.
- ix. If the adult withholds consent to inform the police, this information should be passed on to the Designated Senior Person immediately for discussion as to whether the adult has capacity to withhold consent and for appropriate action to take place.
- x. Other staff may need to be involved to assist in monitoring concerns, gathering evidence or offering support.

These discussions are of course highly confidential and must be on a strictly professional and need to know basis only.

- xi. If a vulnerable adult makes an allegation against a staff member:
  - The procedure is the same as any other allegation and must be investigated by the Designated Senior Person.
  - The allegation may be false or unfounded, but must be investigated in the normal manner by the Designated Senior Person.
  - The decision as to whether to involve external agencies, or deal with the matter utilising the LTS disciplinary procedure will be taken by the Designated Senior Person.
  - Any member of staff who has suspicions about any other member of staff who may be abusing adults must report their concerns to the Designated Senior Person.

## **5 Procedures in event of Alert**

- i. If any member of staff suspects, or knows of any abuse of any vulnerable adult or child, you should immediately inform the Designated Senior Person.
- ii. This notification must be in person, or by telephone, and followed up by a personal meeting.
- iii. Under no circumstances must e-mail or written notes be used.
- iv. This notification must take place even in the event of suspicion or rumour only, even without any firm evidence; the manager will discuss your concerns. The Designated Senior Person will assess the evidence to ascertain if:-
  - The vulnerable adult or child is in immediate danger?
  - A crime has been committed?
  - There is a need to protect evidence?
- v. If the answer to any of these questions is "yes" then the emergency services must be notified immediately and company trustees informed
- vi. If the answer to all of these questions is "no" then the Designated Senior Person will liaise within 24 hours with the safety advisor, and/or the company secretary, as appropriate, when a decision will be made as to whether the matter should

be taken further. This decision will be based upon several factors:-

- Is the adult or child considered vulnerable?
- Are there reasonable grounds for suspicion or evidence of abuse?
- Is there actual risk of, or potential for significant harm?
- Is there a potential for a criminal act to be committed?
- Where the adult has given consent for the information to be shared and their wishes have been taken into account.

Following this discussion the Designated Senior Person may decide that further action is necessary, this may be to Social Services (Children's Social Care) assessment teams who are charged with investigating any adult abuse, in any setting. Contact details are included in appendix II.

If an adult refuses consent to contact outside agencies, and has the capacity to withhold that consent then the matter is to be reviewed internally with a team made up of the Designated Senior Person and any other members of staff as necessary. This team will decide on an appropriate monitoring and support programme.

Written records must be kept at all stages, (see appendix 3) by the member of staff reporting the suspicion either following the disclosure to the Designated Senior Person, or following the subsequent meeting with that person. Any report of any concern relating to abuse MUST be made in person.

Under no circumstances is e-mail or any written note to be used. If a member of staff does not agree with the decision of the Designated Senior Person that no further action should be taken, the staff member should in the first instance refer their concerns to the Company Trustees.

If the Company Trustees do not recommend any further action, and the staff member still has concerns then the staff member has the right to refer the matter directly to the Social Services (Children's Social Care) assessment team.

The Designated Senior Person will keep the member(s) of staff who raised the concerns informed as to the progress/outcome of the case. This is to be on a "need to know" basis only.

## **6 Investigations**

Any investigation must be carried out by the appropriate DSP as defined earlier.

The object of a preliminary investigation is: -

- To establish the relevant facts
- To assess the needs of the child or vulnerable adult for protection, support and redress
- To make decisions with regard to what follow up-action should be taken with regard to the perpetrator, LTS or its management, particularly if they have been culpable, ineffective or negligent.

### **It is not the role of staff to investigate any incident.**

- Staff are neither equipped nor qualified to do so and inappropriate actions could jeopardise any formal investigations.
- Investigations of actual incidents must be carried out by the Police or Social Services. (Children's Social Care)
- **A criminal investigation by the POLICE takes priority over all other lines of enquiry.**

- **LTS will co-operate with all lines of enquiry where possible. An internal investigation will still be conducted where LTS staff are involved.**

Examples of actions which may result in criminal sanctions being brought are: -

- Assault (physical or psychological)
- sexual assault
- Theft
- Fraud (including any other form of financial exploitation)
- Certain forms of discrimination on grounds of race or gender

Alleged criminal offences differ from all other non-criminal forms of abuse in that responsibility for initiating action invariably rests with the Police and Crown Prosecution Service.

Accordingly, when complaints about alleged abuse suggest that a criminal offence may have been committed it is imperative that reference is made to the Police as a matter of urgency.

If any staff member feels unsure about what to do or how to respond to a disclosure they must seek advice from the appropriate Designated Senior Person.

## **7 Training**

- Lancaster Training Services will ensure that all staff who may (as part of their work) come into contact with children or vulnerable adults will receive appropriate training in order to be able to carry out their responsibilities to ensure the protection of vulnerable adults, and/or children.
- This training will also include the "Designated Senior Person" who have responsibilities for investigation and notification of the authorities where appropriate.
- The training will also cover the recognition of abuse, the "key" policy principles, the rights of vulnerable adults and children, the alert procedures, record keeping, and emotional support where appropriate.

## **8 LEGISLATION**

Legislation relating to safeguarding include:

- Human Rights Act 1988
- United Convention on the Rights of the Child
- Safeguarding Vulnerable Groups act 2006
- Children Act 1989/2004
- Safeguarding Children and Safer Recruitment in Education Act 2009
- Education Act 2002
- Every Child Matters 2004

# **APPENDIX 1**

## **DEFINITIONS/INDICATORS OF ABUSE**

### **Signs of possible child abuse**

It is important to remember that lists such as the one below are neither completely definitive nor exhaustive. The information in such lists has to be used in the context of the child's whole situation and in combination with a range of other information related to the child and his/her circumstances.

There can be an overlap between all the different forms of child abuse and all or several can co-exist.

## **1. PHYSICAL ABUSE**

### **1.1 Definition**

Physical abuse causes harm to a child's person. It may involve hitting, shaking, throwing, poisoning, burning, scalding, drowning or suffocating. It may be done deliberately or recklessly, or be the result of a deliberate failure to prevent injury occurring. It can also occur when a parent or carer feigns the symptoms of or deliberately causes ill health to a child whom they are looking after. It can include the deliberate and malicious withholding of physical needs.

### **1.2 Possible signs of physical abuse**

- Unexplained injuries or burns, particularly if they are recurrent.
- Improbable excuses given to explain injuries.
- Refusal to discuss injuries.
- Untreated injuries, or delay in reporting them.
- Excessive physical punishment.
- Arms and legs kept covered in hot weather
- Fear of returning home.
- Aggression towards others.
- Running away

When considering the possibility of non-accidental injury it is important to remember that the injuries may have occurred for other reasons, e.g. genuine accidents or medical disorders.

## **2. PHYSICAL NEGLECT**

### **2.1 Definition**

Neglect is the persistent or severe failure to meet a child or young person's basic physical and/or psychological needs, likely to result in serious impairment of the child's health or development. It may involve a failure to provide adequate food, clothing or shelter; failing to protect a child from physical harm or danger or failing to ensure access to appropriate medical care or treatment. It may also involve neglect of, or inadequate response to, a child's basic emotional needs.

### **2.2 Possible signs of physical neglect**

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Frequent lateness and/or unexplained non-attendance at College
- Untreated medical problems
- Low self-esteem
- Poor peer relationships
- Stealing

### **3. EMOTIONAL ABUSE**

#### **3.1 Definition**

Emotional abuse occurs where there is persistent emotional ill treatment or rejection such as to cause serious and adverse effects on the child's or young persons' behaviour and emotional development, resulting in low self worth. It may involve conveying to children that they are worthless or unloved, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is present in all forms of abuse.

#### **3.2 Possible signs of emotional abuse**

- Low self-esteem
- Continual self-deprecation
- Sudden speech disorder
- Significant decline in concentration
- Socio-emotional immaturity
- Neurotic' behaviour (eg rocking, head banging)
- Self-mutilation
- Compulsive stealing
- Extremes of passivity or aggression
- Running away
- Indiscriminate friendliness

### **4. SEXUAL ABUSE**

#### **4.1 Definition**

Sexual abuse involves a child or young person being forced or coerced into participating in or watching sexual activity. It is not necessary for the child to be aware that the activity is sexual and the apparent consent of the child is irrelevant. The acts may involve physical contact including penetrative or non-penetrative acts. They may involve non-contact activities such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

#### **4.2 Possible signs of a sexually abused child**

Not all children are able to tell parents that they have been assaulted. Changes in behaviour may be a signal that something has happened.

These are general indicators that a child may be troubled though not necessarily about a sexual assault. The child may have some of these problems or none at all. It is the combination, frequency and duration of signs that will alert you to a problem. Try to notice all changes in usual behaviour.

It is important to remember that in sexual assault there may well be no physical or behavioural signs.

## **A Behavioural**

- Lack of trust in adults or over-familiarity with adults
- Fear of a particular individual
- Social isolation – withdrawal or introversion
- Sleep disturbance (nightmares, irrational fears)
- Running away from home
- Girls taking over the mothering role
- Reluctance or refusal to participate in physical activity or to change clothes for physical activities
- Low self-esteem
- Drug, alcohol or solvent abuse
- Display of sexual knowledge beyond the child's years
- Unusual interest in the genitals of adults or children or animals
- Expressing affection in inappropriate ways, eg 'French kissing'
- Fear of bathrooms, showers, closed doors
- Abnormal sexualised drawing
- Fear of medical examinations
- Developmental regression
- Poor peer relations
- Over-sexualised behaviour
- Compulsive masturbation
- Stealing
- Psychosomatic factors, eg recurrent abdominal pain or headache
- Sexual promiscuity

## **B Physical/Medical**

- Sleeplessness, nightmares, fear of the dark
- Bruises, scratches, bite marks on top of the thighs or genital areas
- Itch, soreness, discharge, unexplained bleeding from the rectum, vagina or penis
- Pain on passing urine or recurrent urinary infection
- Stained underwear
- Unusual genital odour
- Anxiety/depression
- Eating disorder, eg anorexia nervosa or bulimia
- Discomfort/difficulty in walking or sitting
- Pregnancy – particularly when reluctant to name father
- Venereal disease, sexually transmitted diseases
- Soiling or wetting in children who have been trained
- Self-mutilation/suicide attempts

## **5. FINANCIAL or MATERIAL ABUSE**

- Including theft, fraud, exploitation,
- Pressure in connection with matters such as wills, property, inheritance,
- Financial transactions, possessions or benefits.
- Damage or threats of damage to property.

## **6. DISCRIMINATORY ABUSE**

- Includes racist or sexist opinions, or opinions based on an individual's disability, or other forms of harassment, taunts or similar treatment.

## **APPENDIX 2**

### **USEFUL SUPPORT CONTACTS**

- **LTS Designated Senior Person** – Training Manager – Martyn Horabin  
Tel: 858326 ext 21
- **LTS Safety Advisor** – Lee Lawson (deputy Designated Senior Person in Training Manager's absence)  
Tel: 858326 ext 28
- **LTS Dedicated Safeguarding Contact** – [safe@lantrain.co.uk](mailto:safe@lantrain.co.uk)
- **Lancashire County Council – Schools Safeguarding Officer**  
Mary Aurens – email [Mary.Aurens@lancashire.gov.uk](mailto:Mary.Aurens@lancashire.gov.uk)  
Tel: 01772 531196 or 07810 267503
- **Common Assessment Framework (CAF) officer** – Ruth Gardner  
Tel: 07837 066914 [ruth.gardner@lancashire.gov.uk](mailto:ruth.gardner@lancashire.gov.uk)
- **Children Act 1989 & 2004**  
[www.everychildmatters.gov.uk](http://www.everychildmatters.gov.uk)
- **Working Together to Safeguard Children 2010**  
[www.workingtogether](http://www.workingtogether)
- **LSCB Safeguarding Children Procedures**  
[www.lancashire.gov.uk/safeguardingchildrenboard/](http://www.lancashire.gov.uk/safeguardingchildrenboard/)
- **LTS Trustees** – Chairman - Richard Little – contact number available on request  
Vice Chairman – George Sierpinski - contact number available on request
- **NSCPP**  
Freephone 0800 800 500 – 24 hours 7 days a week – [www.NSPCC.org](http://www.NSPCC.org)  
Helpline staffed by social workers offering support information and advice to anyone concerned about child abuse. Guidance can be sought on a confidential basis.
- **Childline**  
Free phone 0800 1111 - 24 hours 7 days a week - [www.childline.org.uk](http://www.childline.org.uk)  
Confidential helpline for children and young people who are in danger or have any kind of problem.
- **Childwatch**  
Tel: 01482 325552 (Monday to Friday, 9am to 5pm)  
Telephone counseling to young people and adults
- **Samaritans**  
Tel: 08457 909090 or email [jo@samaritans.org](mailto:jo@samaritans.org)

## Appendix 3 – Vulnerable Persons Assessment Record

<b>CHILD PROTECTION/ VULNERABLE ADULT ASSESSMENT RECORD</b>	
Your name:	
Your position:	
Child's/Vulnerable adult's name:	
Child's/Vulnerable adult's date of birth:	
Child's/Vulnerable adult's address:	
Parents and or carers names and address:	
Date and time of any/alleged incident:	
Exactly what the Child/Vulnerable adult said and what you said (use separate sheet if necessary -remember, do not lead the Child/Vulnerable adult, record actual details)	
Action taken so far (use separate sheet if necessary):	
Details of any witnesses to	

incident/conversation including names		
Your observations (e.g. signs of physical abuse)		
<b>External agencies contacted (date &amp; time)</b>		
<b>Police</b> yes/no (circle)	If yes – which: Name and contact number:	
	Details of advice received:	
<b>Social services</b> - yes/no (circle)	If yes – which: Name and contact number:	
<b>Local authority</b> - yes/no (circle)	If yes – which: Name and contact number:	
<b>Other (e.g. NSPCC)</b>	If yes – which: Name and contact number:	
<b>Print name:</b>	<b>Signature:</b>	<b>Date:</b>

**Remember to maintain confidentiality on a 'need to know' basis**

# Child Protection & Vulnerable Adults

## Policy Flowchart

Learner makes a disclosure or allegation to a member of staff.

Member of staff has concerns about a Learner.

Allegation or concern is reported to the Designated Senior Persons (DSP), Training Manager (Martyn Horabin) or The Health & Safety Officer (Lee Lawson). This must be done within 24 hrs of initial disclosure

The DSP will assess the level of need and decides the most appropriate course of action. Where appropriate the DSP will involve the learner.  
Learner is offered support and is advised of next steps.

If necessary and where appropriate the DSP will refer to external agency.

Learner is kept informed. Member of staff is given some feedback as to outcome.

### **If a learner makes a disclosure or staff member has concerns:**

#### **You SHOULD:-**

- Listen, do not ask questions
- Take the matter seriously
- Act without delay – if you are unsure whether the matter needs reporting consult the DSP.
- Note down the details and pass all records to the DSP.

#### **You SHOULD NOT:-**

- Promise confidentiality – don't say 'you can keep it a secret' as you may have to pass the information on.
- Make promises you cannot keep
- Take the matter further yourself. Refer all disclosures to the DSP (*Martyn Horabin*) or Health & Safety Officer (*Lee Lawson*) or the In House Training Manager (*Mr Mick White*)