



Safeguarding Adults and Children

Purpose of Agreement	This policy applies to all staff, volunteers, or anyone working on behalf of Veterans Outreach Support. The policy establishes a framework to support staff practice to promote the safety and protection of potentially vulnerable adults who engage with Veterans Outreach Support.
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Safeguarding Adults and Children Policy

The following policy covers the key responsibilities in relation to safeguarding adults and children by Veterans Outreach Support (VOS).

VOS is committed to ensuring that all staff, volunteers, service users, delivery partners, and other stakeholders are safeguarded from harm and from situations in which they feel vulnerable. All of VOS's policies and procedures support this commitment.

This policy reflects current safeguarding legislation and statutory guidance, including Working Together to Safeguard Children (2023) and the Care Act 2014."

VOS will provide adequate resources to ensure that all staff and stakeholders are aware of our safeguarding policy and are committed to its effective implementation.

Every person has the human right to live their life free from abuse or harm. Charities have a statutory duty to safeguard and promote the welfare of children and young people, (Children Act 2004) and Adults at Risk, (Care Act 2014).

Creating a safe and welcoming environment, where everyone is respected and valued, is at the heart of safeguarding.

Who is covered by this policy?

The Charity Commission states that "all charities have a responsibility to ensure they don't cause harm to anyone who has contact with them. Protecting people and safeguarding responsibilities should be a governance priority for all charities. It is a fundamental part of operating as a charity for the public benefit".

This policy applies to all staff working with VOS, both clinical and non-clinical, trustees, contractors, locum, volunteers, students, and any other individuals undertaking any type of work experience or work-related activity.

All VOS staff have an individual responsibility to safeguard and promote the welfare of individuals and must know what to do if they are concerned that an adult or child is at risk of being abused or neglected.

Adherence to the Safeguarding Adults and Childrens Policy is mandatory for all.

What is covered in this policy?

This policy outlines VOS's commitment to safeguarding and explains what to do if you have a safeguarding concern at work.

Purpose

VOS has a statutory duty to safeguard and promote the welfare of adults at risk of harm, (Care Act 2014) and children and young people (Children Act 1989, 2004). There are different responsibilities in accordance with legislation, guidance, and standards, including the 'Care Act' (2014) and 'Working Together to Safeguard Children' (HM Government 2023).

The purpose of this policy is to ensure that through its work and behaviours VOS demonstrates its commitment to protecting the rights of people to live in safety, free from abuse and neglect.

Everybody has the right to be safe no matter who they are or what their circumstances are.

Through safeguarding, VOS will promote the well-being and welfare of all those whom it comes into contact with, which includes beneficiaries, customers, staff, volunteers and other stakeholders.

Safeguarding Adults

Safeguarding duties apply when an adult, (from age 18), has a need for care and support and is experiencing or at risk of abuse or neglect and as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse and neglect.

The Care Act 2014 places a duty of co-operation between partners and establishes the importance of organisations sharing vital information related to abuse or neglect with their Local Safeguarding Adult Boards.

People have complex lives and being safe is only one of the things they want for themselves. Professionals should work with the individual to establish what being safe means to them and how it can best be achieved. The Care Act 2014 introduced a legal framework for adult safeguarding. The statutory adult safeguarding framework requires a fundamental shift in approach to supporting adults at risk and highlights:

“Safeguarding is the responsibility of all agencies”

- A whole system approach is required.
- Safeguarding responses are proportionate, transparent and outcome focused.
- The adult's wishes are at the centre of safeguarding enquiries and these drive the process.
- There is an emphasis on prevention and early intervention.
- People are supported in their recovery from abuse or neglect.

The aims of adult safeguarding are to:

- Stop abuse or neglect wherever possible.

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

Abuse can happen in any relationship and any setting and may result in significant harm or exploitation of the individual. In many cases abuse may be a criminal offence. It should be remembered that intent is irrelevant at the point of deciding whether an act or failure of an act is abuse; it is the impact of the act on the person or the harm or risk to that individual.

Care Act guidance states that adult safeguarding should “be person led and outcome focused”.

People must be supported to achieve the outcomes that matter to them in their life with practitioners focusing on the needs and goals of the person concerned.

Making Safeguarding Personal (MSP) is about responding in safeguarding situations in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety. It is about seeing people as experts in their own lives and working alongside them with the aim of enabling them to resolve their circumstances and support their recovery (Safeguarding Adults 4LSAB Multi-Agency Policy, Process and Guidance, July 2023).

There are six key principles which underpin all adult safeguarding work:

Empowerment	Supporting a person to make their own decisions and are provided with support and information.	The veterans that VOS work with are to feel supported and encouraged to make their own decisions and provide informed consent throughout the period of support.
Prevention	Taking action before harm occurs that promote resilience and self-determination.	VOS have an obligation to take action before harm occurs to an individual.
Proportionality	Making the least intrusive response necessary.	VOS response and actions will be the least intrusive response appropriate to the risk presented
Protection	Supporting and representing those in greatest need and there is a coordinated response to adult safeguarding.	VOS will support and represent veterans with bodies, such as NHS services.
Partnership	Seeking local solutions through community services working together.	VOS will actively try to identify localised solutions/services working with their communities to support the veterans’ journey with us. Communities have a part to play in preventing, detecting, and reporting neglect and abuse.

Accountability	Professionals understanding their roles and are accountable and transparent in delivering a safeguarding response.	VOS will record all activities in relation to safeguarding; this information may be made available to appropriate bodies for transparency and audit purposes when delivering safeguarding.
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Abuse may occur in any context or environment and by any person, professional colleagues, staff, volunteers, other service users, family, friends, neighbours or strangers. Abuse may be deliberate or unintentional or as a result from lack of knowledge. It can also occur as the result of neglect or poor professional practice, which could be isolated incidences of poor or unsatisfactory professional practice through to pervasive ill treatment or gross misconduct.

The Care Act 2014 Statutory Guidance, outlines the different types and patterns of abuse and neglect:

- Physical
- Sexual
- Child Sexual Exploitation
- Psychological/Emotional
- Financial or material
- Neglect and acts of omission
- Discriminatory
- Domestic Abuse
- Organisational Abuse
- Modern Slavery
- Forced Marriage
- Self-Neglect
- Prevent/radicalisation
- Internet abuse including Cyber bullying
- County Lines
- Cuckooing
- Honour Based Violence
- Breast Ironing
- Female Genital Mutilation

Safeguarding Children and Young People

Safeguarding Children means protecting children from maltreatment, preventing impairment of children’s mental and physical health or development, ensuring that children grow up with safe and effective care, and taking action to enable all children to have the best outcomes (Working Together to Safeguard Children, 2023). Key definitions relevant to Safeguarding Children is as follows:

- A child – is defined as a person who is aged under 18 and includes an unborn child.

- A child at risk – is a child who:
 - Is experiencing or is at risk of abuse, neglect, or other kinds of harm.
 - Has needs for care and support (whether or not the authority is meeting any of those needs).

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the Internet). They may be abused by an adult or adults, or another child or children. There are four types of abuse referred to in the Government's own guidelines, these are:

- Neglect
- Physical Abuse
- Sexual Abuse
- Emotional Abuse

A child-centred approach is fundamental to safeguarding and promoting the welfare of every child. All practitioners should follow the principles of the Children Acts 1989 and 2004. These Acts make clear that the welfare of children is paramount and that they are best looked after within their families, with their parents playing a full part in their lives, unless compulsory intervention in family life is necessary (Working Together to Safeguard Children 2023).

VOS does not work directly with children. However, it is as important to be alert to any safeguarding concerns relating to children and other members of the household where concerns may have been raised about the adult at risk. All VOS staff must be aware of their responsibilities regarding safeguarding children and young people.

Mental Capacity

The consideration of mental capacity is crucial at all stages of safeguarding adults' procedures as it provides a framework for decision making to balance independence and protection.

When any concerns of possible abuse are raised the immediate and primary concern must be the safety and interests of the individual or group of individuals. Service users have a right to have their decisions respected, even if this involves taking risks, so careful assessment of the individual's mental capacity in relation to making decisions about the specific issue is essential to protect these rights.

In all safeguarding activity due regard must be given to the Mental Capacity Act 2005.

Where an adult lacks capacity to consent to safeguarding actions, decisions will be made in their best interests in line with the Mental Capacity Act 2005, involving relevant professionals and advocates where appropriate.

What to do if You Have a Concern

As a member of the VOS team, you may be concerned about harm to another person because of something you have seen or heard, information you have been told by others or because someone has confided in you about things that are happening or have happened to them.

Staff should not keep safeguarding concerns to themselves. If you have concerns and/ or you are told about possible or alleged abuse, poor practice, or wider welfare issues you must contact Designated Safeguarding Lead (DSL).

In the absence of the DSL, staff are to contact Chief Executive.

Not all concerns constitute safeguarding. Where concerns relate to wellbeing, mental health, or clinical risk, staff should follow the relevant clinical or operational procedures. Where abuse, neglect, exploitation or risk of harm is suspected, safeguarding procedures must be followed.

If staff are concerned about harm being caused to someone else, please follow the guidance below:

- It is not your responsibility to prove or decide whether an adult has been harmed or abused. It is however, everyone's responsibility to respond to and report concerns they have.
- If someone has a need for immediate medical attention call an ambulance on 999.
- If you are concerned someone is in immediate danger or a serious crime is being committed, contact the police on 999 straight away. Where you suspect that a crime is being committed, you must involve the police.
- Remember to be **person centred/make safeguarding personal**. If it will not put them or you at further risk, discuss your safeguarding concerns with the adult and ask them what they would like to happen next. Inform them that you must pass on your concerns to your DSL or Chief Executive. Do not contact the adult before talking to your DSL or Chief Executive if the person allegedly causing the harm is likely to find out.
- Remember not to confront the person thought to be causing the harm.

Responding to a Direct Disclosure

If an adult indicates that they are being harmed or abused, or information is received which gives rise to concern, the person receiving the information should:

- Take it seriously.
- Stay calm.
- Listen carefully to what is said, allowing the adult to continue at their own pace,
- Be sensitive.
- Keep questions to a minimum, only ask questions if you need to identify/ clarify what the person is telling you.

- Reassure the person that they have done the right thing in revealing the information.
- Ask them what they would like to happen next.
- Explain what you would like to do next.
- Explain that you will have to share the information with DSL or Chief Executive.
- Ask for their consent for the information to be shared outside the organisation.
- Make an arrangement as to how you/the DSL can contact them safely.
- Act swiftly to report and carry out any relevant actions.
- Record in writing what was said using the adult's own words as soon as possible.

It is important **not** to:

- Dismiss or ignore the concern.
- Panic or allow shock or distaste to show.
- Make negative comments about the alleged perpetrator.
- Make assumptions or speculate.
- Come to your own conclusions.
- Probe for more information than is offered.
- Promise to keep the information secret.
- Make promises that cannot be kept.
- Conduct an investigation of the case.
- Confront the person thought to be causing harm.
- Take sole responsibility.
- Tell everyone.

Record Keeping

It is vital that a written record of any incident or allegation of a safeguarding is made as soon as possible after the information is obtained. The notes must be kept safe as it may be necessary to make records available as evidence. An accurate record should be made at the time, and the VOS Safeguarding Form (see Appendix A) submitted to the DSL or Chief Executive without delay.

If someone has told you about the harm or abuse, use the words the person themselves used. If someone has written to you (including by email, message) include a copy with the form.

Allegations Against Persons in a Position of Trust (trustees, contractors, locum, volunteers, students, and any other individuals undertaking any type of work experience or work-related activity)

VOS encourages the reporting of low-level concerns about conduct or behaviour that may not meet the threshold for formal safeguarding action but could indicate emerging risk. Such concerns will be recorded, reviewed and managed proportionately, including consideration of patterns or repeated concerns.

Adults at risk can be subjected to abuse by those who work with them in any and every setting.

All allegations of abuse or maltreatment of adults at risk by an employee, agency worker, independent contractor or volunteer will be taken seriously.

The DSL should, following consultation with the Local Authority Safeguarding Adults Team and where appropriate the Police, inform the subject that allegations have been made against them without disclosing the nature of those allegations until further enquiry has taken place. If it is deemed appropriate to investigate prior to informing those who are implicated, a clear record needs to be made of who took the decision and why.

Suspension of the staff member concerned should not be automatic. Depending on the person's role and the nature of the allegation it may be possible to step the person aside from their regular duties to allow them to remain at work whilst ensuring that they are supervised or have no service user contact. This is known as suspension without prejudice. Suspension offers protection for them, as well as the alleged victim and other service users, and enables a full and fair investigation/safeguarding risk assessment to take place. The manager will need to balance supporting the alleged victim, the wider staff team, the investigation and being fair to the person alleged to have caused harm.

All allegations should be followed up regardless of whether the person involved resigns from their post, responsibilities, or a position of trust, even if the person refuses to co-operate with the process. Compromise agreements, where a person agrees to resign without any disciplinary action and agreed future reference must not be used in these cases.

If it is concluded that there is insufficient evidence to determine whether the allegation is substantiated, the VOS Chief Executive will consider what further action, if any, should be taken in consultation with the VOS DSL and the Local Authority Safeguarding Team and in line with VOS HR procedures.

When an allegation of abuse or neglect has been substantiated, the DSL should consult with the Local Authority Safeguarding Team for advice and whether it is appropriate to make a referral to the professional or regulatory body and to the Disclosure and Barring Service (DBS), because the person concerned is considered unsuitable to work with Adults at Risk.

Risk Assessment and Management

Under usual circumstances, VOS will risk-assess any situation in which a potentially vulnerable employee, volunteer or associate may find themselves or that might cause someone to become vulnerable. It will then take appropriate measures.

VOS will ensure that trustees, staff, and volunteers learn about protection issues and their responsibilities in line with statutory guidance.

Referrals to the Local Authority Safeguarding Adults/Childrens Team or MASH (Multi-Agency Safeguarding Hub)

VOS will ensure full open and transparency in regarding communication with the Local Authority and regulatory bodies.

VOS will use the documentation provided by the Local Authority. The locally preferred method of reporting a referral may be also on-line or via a telephone abuse line.

If you are unsure whether or not to make a referral/report you can ask for advice by contacting the Local Authority Safeguarding Adults Team/MASH and discuss the situation with them without disclosing the identity of the adult or the person who may be causing harm.

Incident Investigation

VOS will report and investigate allegations and concerns to improve its safeguarding processes. It will use any lessons learned from such events to take corrective action to prevent recurrences.

Where there are alleged incidents of abuse, the police are responsible for investigating whether a criminal offence may have been committed. VOS will report a suspected crime (e.g. assault or indecency) to the police.

Information Sharing

Sharing the right information, at the right time with the right people, is fundamental to good safeguarding practice, but it has been highlighted as a difficult area of practice (4LSAB Multi-Agency Guidance on Information Sharing June 2020). The Care Act 2014 sets out 5 aims of co-operation between partners which are relevant to care and support, although it should be noted that the purposes of cooperation are not limited to these matters. The aims include:

- Promoting the wellbeing of adults needing care and support and of carers.

- Improving the quality of care and support for adults and support for carers (including the outcomes from such provision).
- Smoothing the transition from children to adults' services.
- Protecting adults with care and support needs who are currently experiencing or at risk of abuse or neglect.
- Identifying lessons to be learned from cases where adults with needs for care and support have experienced serious abuse or neglect.

Staff should share the information with the Local Authority and/or the police if they believe or suspect that a crime has been committed or that the individual is immediately at risk.

The sharing of safeguarding information must be reasonable, proportionate and shared in a timely manner in accordance with data protection and Caldicott Principles. Any decisions about sharing or indeed withholding information must be justified and documented accordingly.

Safer Recruiting and Disclosure and Barring Service (DBS)

VOS will place safeguarding at the heart of recruitment practices by carrying DBS checks, requesting two written references, and checking qualifications and certifications. Safer recruitment policies must be followed for staff working with VOS, both clinical and non-clinical, trustees, contractors, locum, volunteers, students, and any other individuals undertaking any type of work experience or work-related activity.

Training

VOS staff will be provided with training regarding Safeguarding to ensure that they are confident in dealing with safeguarding issues and can comply with all aspects of this policy. The completion of this training must be in accordance with the requirement of the job role as outlined in the organisation mandatory training matrix.

Both the Designated Safeguarding Lead and Trustee Safeguarding Lead will be trained to Level 4.

Training	Role	Frequency	Delivery
Safeguarding Level 2	All non-clinical roles	2 yearly	Face to Face or eLearning
Safeguarding Level 3	All care team which includes the clinical team and welfare team	2 yearly	Face to Face or eLearning
Safeguarding Level 4	Head of Care & Trustee Safeguarding Lead	2 yearly	Face to Face or eLearning
PREVENT – HM Gov	All roles	2 yearly	eLearning

Trustees' Responsibilities

The Charity Commission holds trustees to account where things do go wrong and will check that the guidance and law are being followed. Where there has been a serious incident or where things have gone wrong the board of trustees will ensure a process of rigorous investigation and make changes where necessary. This may include reporting to, and working with, the Charity Commission to meet compliance.

Prevention is the primary responsibility of trustees. Trustees must take reasonable steps to protect staff, volunteers and those connected with the activities of VOS from harm.

The Chief Executive will inform trustees immediately when they become aware of a safeguarding issue and advise of the action being taken.

On the board of trustees there will be a safeguarding lead for VOS, to give support and guidance where required.

Charity Commission

If a serious safeguarding risk materialises, this will need to be reported to the Charity Commission. This will usually be if any of the following occur:

- incidents of abuse or mistreatment (alleged or actual) of beneficiaries of the charity (adults or children) which have resulted in or risk significant harm to them and this happened while they were under the care of the charity.
- someone connected with the charity, for example a trustee, staff member or volunteer, was responsible for the abuse or mistreatment (alleged or actual).
- other incidents of abuse or mistreatment (alleged or actual) of people who come into contact with the charity through its work, which have resulted in or risk significant harm to them and are connected to the charity's activities.
- breaches of procedures or policies at the charity which have put people who come into contact with it through its work at significant risk of harm, including failure to carry out relevant vetting checks which would have identified that a person is disqualified in law from holding their position within the charity. This might be, for example, because they are disqualified under safeguarding legislation from working with children and/or adults at risk.

The above may include incidents in the workplace that have resulted in or risk significant harm to trustees, staff, or volunteers. This does not mean that the Charity Commission expects charities to report every internal staffing incident - charities need to make a judgement call about which incidents either individually, or as a collection, are serious in the context of the charity.

However, a report should always be made where the level of harm to the victims and/or the likely damage to the reputation of or public trust in the charity is particularly high (for example, sexual misconduct by the charity's Chief Executive or another person in a senior

position or position of specific responsibility, such as the head of safeguarding). The Commission would also expect to receive a report if the number and nature of staffing incidents indicate there are widespread or systematic issues connected to sexual harassment, abuse and/or other misconduct in a charity. The Examples Table (Appendix E) contains serious incidents to report and incidents not to report with regards to “protecting people and safeguarding incidents”.

(Charity Commission – How to report a serious incident in your charity, HM Government June 2014, and updated June 2019).

Review

This policy will be reviewed at least every two years by the Designated Safeguarding Lead (DSL) and the Trustee Safeguarding Lead, and the outcome of the review will be reported to and approved by the Board of Trustees. The policy will be reviewed sooner where required, including in response to changes in legislation or statutory guidance, organisational activity, delivery methods, or learning from safeguarding incidents or concerns. Trustees retain ultimate accountability for safeguarding within the organisation.

Appendix A



Safeguarding Incident Form

Name of Organisation	Veterans Outreach Support	Contact Details	02392 731767
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Name of Designated Safeguarding Lead (DSL)	
Contact details of designated person for safeguarding	
Date/Time DSL Informed	

Name of concerned person or to whom disclosure was given	
Role/Organisation	
Contact details of concerned person or to whom disclosure was given	

Individual of concern	
Contact details	
Name – Initials and Service User Number	
Date of Birth	
Address	
Telephone number	
Email address	

The Incident
What happened (nature of concern/ disclosure made – use the persons own words if known)
When did it happen? (date, time)
Where did it happen? (specific location)
Who was allegedly involved and in what way? (include witnesses)
Any actions that has been taken – please list below

Name of person completing form:	
Signed:	Date:

To be Completed by DSL			
Local Authority contacted/involved?		Yes	No
If local authority have not been contacted, please explain why:			
If contact has been made please completed below:			
Authority			
Name			
Position			
Email contact			
Phone contact			
Contacted by			
Date and time of contact			

Future Actions to be Taken	
What action needs to be taken?	Who is responsible for this?

Signature of DSL		Signature of CEO	
Date		Date	
Time		Time	

Appendix B



Definitions of Adult and Child Abuse

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which they have not consented to or cannot consent.

Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

Physical	<p>Hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.</p> <p>Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.</p>
Sexual	<p>Rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting. Including sexual exploitation.</p> <p>Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).</p>
Child Sexual Exploitation	<p>Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology'.</p>
Psychological/Emotional	<p>Emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.</p>

	Emotional abuse is the persistent maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the need of another person.
Financial or material	Theft, fraud, exploitation, pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
Neglect and Acts of Omission	<p>Ignoring medical or physical care needs, failing to provide access to appropriate health, social care, welfare benefits or educational services, withholding the necessities of life such as medication, adequate nutrition and heating.</p> <p>Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. It may also include neglect of, or unresponsiveness to a child's basic emotional needs.</p>
Discriminatory	Racism, sexism or acts based on a person's disability, age or sexual orientation. It also includes other forms of harassment, slurs or similar treatment such as disability hate crime.
Domestic Abuse	<p>Domestic abuse or violence are defined in the Domestic Abuse Act 2021 as "Behaviour is abusive if it consists of any of the following; Physical or sexual abuse Violent or threatening behaviour Controlling or coercive behaviour Economic abuse Psychological, emotional, or other abuse"</p> <p>It will be between two people who are 'personally connected' to each other, regardless of gender or sexuality. This includes issues of concern to black and minority ethnic (BAME) communities, for example 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.</p> <p>Children are now recognised within law as victims of DA in their own right, (The DA Act 2021) and there is a duty on Local authorities to ensure that children are provided with appropriate support.</p>
Organisational Abuse	Neglect and poor care practice within a care setting such as a hospital or care home or in relation to care provided in someone's own home ranging from one off incidents to on-going ill-treatment. It can be neglect or poor practice as a result of the structure, policies, processes and practices within a care setting.
Modern Slavery	All staff in every health care setting could spot a victim of Human Trafficking; the recruitment, movement, harboring, or receiving of children, women or men through the use of force, coercion, and abuse of vulnerability, deception or other means for the purpose of exploitation.

Forced Marriage	A marriage in which one or both spouses do not (or in the case of adults with Learning or physical disabilities, cannot) consent to marriage, but are forced to do so by coercive and controlling means.
Self-neglect	Self-neglect entails neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It is also defined as the inability (intentional or unintentional) to maintain a socially and culturally accepted standard of self-care with the potential for serious consequences to the health and wellbeing of the individual and sometimes to their community.
Prevent/radicalisation	<p>Focuses on preventing people becoming involved in terrorism, supporting extreme violence or becoming susceptible to radicalisation.</p> <p>Referral is via the normal Safeguarding Adult process unless it is a life threatening situation in such cases the police are to be contacted immediately.</p> <p>It is important to note that PREVENT is aligned to the multi-agency safeguarding agenda. The Prevent Strategy, (2011), seeks to stop people becoming terrorists or supporting terrorism. It is the preventative strand of the government's counter-terrorism strategy, CONTEST which has four strands encompassing:</p> <ul style="list-style-type: none"> • PREVENT: to stop people becoming terrorists or supporting violent extremism. • PURSUE: to stop terrorist attacks through disruption, investigation and detection. • PREPARE: where an attack cannot be stopped, to mitigate its impact. • PROTECT: to strengthen against terrorist attack, including borders, utilities, transport infrastructure and crowded places.
Internet or cyber bullying	The use of technology, and particularly mobile phones and the internet, to deliberately hurt, upset, harass or embarrass someone else. It can be an extension of face-to-face bullying, with the technology offering the bully another route for harassing their victim, or can be simply without motive.
County Lines	<p>In July 2017 the Home Office issued "Criminal Exploitation of children and vulnerable adults: County lines guidance", providing detailed explanations and examples.</p> <p>County lines is the term used by Police forces when gangs supply drugs to suburban areas and market and coastal towns using mobile phone lines. It involves criminal exploitation as gangs use children, young people and adults at risk to move drugs and money.</p> <p>Gangs establish a base in towns, typically by taking over the homes of local vulnerable adults by force or coercion. This is known as cuckooing. County lines is a major, cross cutting issue involving drugs, violence, gangs, safeguarding, criminal and sexual exploitation, modern slavery and missing persons. The response to tackle it involves the police, the National Crime Agency, a wide range of Government departments.</p>

Cuckooing	Refers to the relatively recent identification of a new type of controlling and coercive criminal activity. This involves gangs using adults at risk (and children and young people) to move, store and deliver drugs.
Female Genital Mutilation (FGM)	Female Genital Mutilation (FGM) is defined by the World Health Organisation as: ‘all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. FGM is sometimes also known as female circumcision. It is also illegal to take a child abroad for FGM even if legal in that country.
Honour Based Violence	The term ‘Honour Based Violence’ is the internationally recognised term describing cultural justifications for violence and abuse. A crime or incident, which has or may have been committed, to protect or defend the honour of the family and/or community. Honour relates to the concept that the reputation and social status of an individual, a family or community is based on the behaviour and morality of its members. HBV includes forced marriage and FGM.
Breast Ironing	Breast ironing is one of five UN defined ‘forgotten crimes against women’. It is a practice whereby the breasts of girls typically aged 8-16 are pounded using tools such as spatulas, grinding stones, hot stones, and hammers to delay the appearance of puberty.



Seven Golden Rules to Sharing Information

1. 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.
2. 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.
3. 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.
4. 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.
5. 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.
6. 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).
7. 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.

References:

Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers (HMGov July 2018).

4LSAB Multi-Agency Guidance on Information Sharing (June 2020).

Information Sharing: Guidance for practitioners and managers (DOH March 2009)



Contact Numbers/Information for Safeguarding Advice and Referrals

Safeguarding Adults - Isle of Wight Safeguarding Team

To report abuse or neglect to adult services email: safeguardingconcerns@iow.gov.uk or

Call during office hours: 01983 823900 (Wellbeing & Access Hub – safeguarding option) and out of hours (emergency only): 01983 821105

Website: <https://www.iowsab.org.uk/>

Hampshire Safeguarding Adults Board

Tel: 0300 555 1386 - Monday to Thursday 8.30am to 5pm/ Friday 8.30am to 4.30pm/All day on Bank Holidays

Out of hours: 0300 5551373 - Monday to Thursday 5pm to 8.30am/Friday 4.30pm to Monday 8.30am

Online forms can be accessed - [Report Concerns | Hampshire Safeguarding Adults Board](#)
(hampshiresab.org.uk)

Portsmouth Safeguarding Adults Board (PSAB)

If you are worried about an adult at risk contact Adult Safeguarding on 023 9268 0810 or email AdultSafeguarding@portsmouthcc.gov.uk The helpdesk is the first point of contact for all social care calls, providing information and advice. The helpdesk is available Monday to Friday during office hours. Outside these hours - Tel: 0300 555 1373. Website: [Home - Portsmouth Safeguarding Adults Board](#)

Southampton Local Safeguarding Board (SSAB)

Southampton Adult Social Care Tel: 023 8083 3003 and out of hours: 023 8023 3344

Website: [Worried about an adult? – Southampton Local Safeguarding Adults Board](#)
(southamptonlsab.org.uk)

Safeguarding Children

If a professional believes that a child may be at risk of significant harm, they should both telephone the MASH/CRS (or out of hours children's resource service) and fill in an interagency form.

Telephone:

- Hampshire MASH: 0300 555 1384
- Isle of Wight MASH: 0300 300 0117
- Portsmouth MASH: 023 92 688793 or 0845 671 0271
- Southampton CRS: 02380 83 2300
- Out of hours: 0300 555 1373 or for Southampton City: 02380 23 3344

Website: <https://www.hampshirescp.org.uk/report-a-concern/>

Appendix E**Charity Commission for England and Wales – Protecting People and Safeguarding Incidents
Examples table: deciding what to report**

Serious Incident to Report	Incidents not to Report
<p>A beneficiary or other individual connected with the charity’s activities has/alleges to have suffered serious harm.</p> <p>Allegation that a staff member has physically or sexually assaulted or neglected a beneficiary whilst under the charity’s care.</p> <p>The Chief Executive of the charity has been suspended pending the outcome of an investigation into their alleged sexual harassment of a fellow member of staff.</p> <p>Allegation that a trustee, staff member or volunteer has been sexually assaulted by another trustee, staff member or volunteer.</p> <p>A staff computer is found to contain images of child pornography.</p> <p>An internal investigation has established that there is a widespread culture of bullying within the charity.</p> <p>A beneficiary or individual connected with the charity’s activities has died or been seriously harmed; a significant contributory factor is the charity’s failure to implement a relevant policy.</p> <p>Charity failed to carry out DBS checks which would have identified that a member of staff or trustee was disqualified in law (under safeguarding legislation) from holding that position.</p> <p>Repeated medication errors to beneficiaries in a care home indicating a systemic problem.</p> <p>Charity discovers that an employee or volunteer coming into contact with children or at risk adults is on the sex offenders register</p>	<p>Minor unusual/aggressive behaviour by a beneficiary towards a member of staff.</p> <p>Police called to charity premises because a beneficiary is drunk and disorderly.</p> <p>Charity becomes aware of allegations of abuse or neglect of a beneficiary that occurred outside the charity; the charity has reported the allegations to the appropriate agencies, and there is no harm to the charity’s reputation.</p> <p>Beneficiary in a care home received the wrong medication as a ‘one-off’ error and there was no significant harm.</p> <p>Logged accident book reports where there was no significant harm to individuals.</p> <p>Details of reports under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) where there has been no significant harm to individuals.</p> <p>Minor accidental injury to a charity service user e.g. slipping on a wet floor.</p> <p>A staff member who is not in a senior position or position of specific responsibility (e.g. head of safeguarding) has bullied or harassed a fellow staff member. There is no indication of a widespread culture of bullying or harassment within the charity and the incident is dealt with by minor disciplinary action (for example, the staff member responsible has not been suspended or dismissed).</p> <p>A staff member who is not in a senior position or position of specific responsibility is dismissed for marrying a member of the community in which the charity is working, in breach of the charity’s code of conduct but not in breach of local laws.</p>

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