



## SAFEGUARDING POLICY

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<b>Signed</b>	<i>Y Neve</i>
<b>Lead</b>	Yvonne Neve

This policy meets all the requirements of SEN and Disability (SEND) Code of Practice. It will be reviewed annually or when there is a change in circumstances, in work practices or the introduction of new legislation.

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# LifeBridge ASEND Principles for Safeguarding Adults at Risk

## PURPOSE AND PRINCIPLES

LifeBridge ASEND strives to ensure that all its learners remain safe and free from harm and is committed to playing a full and active part in the multi-agency response to safeguarding concerns. We aim to create a safeguarding culture where opportunities for abuse, neglect or exploitation, and risks of radicalisation and FGM are minimised. The purpose of this document is to ensure that all members of staff are aware of the arrangements that LifeBridge ASEND has in place for safeguarding and promoting the welfare of its learners. It gives guidance to help staff who may have concerns about the safety or welfare of a learner, and sets out LifeBridge's position in relation to all aspects of the safeguarding process.

## INTRODUCTION

The duties imposed by Section 175 (2) of the Education Act 2002 make explicit the responsibility of educational institutions including Further Education (FE) colleges such as LifeBridge to safeguard and promote the welfare of young people as part of their common law duty of care towards the learners for whom LifeBridge is responsible. The responsibility for making sure arrangements are in place, in accordance with the guidance given by the Secretary of State, lies with the Board of Directors as the governing body of LifeBridge ASEND.

The Statement of Government Policy on Adult Safeguarding (Department of Health (DoH), May 2013) outlines the principles which FE institutions should follow in dealing with safeguarding of adults at risk of abuse or neglect. These are:

- **Empowerment:** the presumption of person-led decisions and informed consent
- **Protection:** it's everybody's responsibility to act on suspicions of abuse to ensure that adults are given protection in law
- **Prevention:** it's better to act before harm occurs
- **Proportionality:** make a proportionate, and the least intrusive response appropriate to the risk presented
- **Partnership:** find local solutions through services working with their communities – communities have a part to play in preventing, detecting and reporting abuse and neglect
- **Accountability:** there should be accountability and transparency in delivering safeguarding

This document sets out LifeBridge ASEND's position in response to all aspects of the process of safeguarding adults at risk. At LifeBridge ASEND we support these principles and aim to achieve the following outcomes:

### Empowerment

We give learners information about how to recognise abuse and how they can keep themselves safe in a clear and easy to read format. We inform them about the steps they can take to report abuse and other crime and about what we can do to help. We consult them before we take any action. If a learner lacks the capacity to make a decision we always act in his or her best interest when working with appropriate agencies.

### Protection

We have effective ways of assessing and managing risk. Our complaints and reporting arrangements for abuse and other crimes work well. The local community know how we work and how they can contact us. We take responsibility for putting individuals in touch with the most appropriate person.

## **Prevention**

In all our work we consider ways to make the community safer. We work with the community to identify and report signs of abuse and other crimes. We train staff to recognise the signs and know the procedures to prevent abuse taking place.

## **Proportionality**

We discuss with each individual and where appropriate with any partner agencies what to do where there is a risk of significant harm before we make a decision. Risk is an element of many situations and should be part of any wider assessment.

## **Partnership**

We have multi-agency partnership arrangements and are good at sharing information appropriately. Staff know how to use these arrangements and take a holistic approach, placing the welfare of the learner before those of the institution.

## **Accountability**

Staff understand what is expected of them and of others. The roles of all agencies are clear, along with lines of accountability. Agencies recognise their responsibilities to each other, act on them and accept collective responsibility for safeguarding arrangements.

LifeBridge ASEND follows Bolton MBC's arrangements laid out at [www.Bolton.gov.uk/website/pages/Safeguardingadultsatrisk.aspx](http://www.Bolton.gov.uk/website/pages/Safeguardingadultsatrisk.aspx) and the guidance set out in the Bolton Safeguarding Adults Board (BSAB) Procedures Manual found at [www.proceduresonline.com/bolton/asg/](http://www.proceduresonline.com/bolton/asg/)

## **SCOPE**

This policy and its procedures do not form part of the contract of employment; however, they apply to all full and part time employees of LifeBridge, including those employed on temporary or fixed-term contracts. Volunteers and contractors who offer their services to LifeBridge, and parents and carers will be made aware of this document (see Appendices 1 and 2).

The LifeBridge ASEND Policy and Procedures will apply at all times when LifeBridge is providing services or activities directly under the management of LifeBridge ASEND staff. This policy and associated procedures will be reviewed annually and may be amended from time to time. Should any deficiencies or weaknesses in safeguarding arrangements become apparent, these will be remedied without delay.

## **KEY DEFINITIONS AND CONCEPTS**

### **An Adult at Risk of Abuse or Neglect**

For the purpose of this policy an Adult at Risk has the following definition:

- A person who is over 18 years old
- and who is or may be in need of care services by reason of mental or other disabilities, age or illness
- and who is or may be unable to take care of him/herself or unable to protect him/herself against significant harm or exploitation

Examples include people with learning disabilities, mental health issues, people aged 65 or over or people with physical disabilities.

### **Abuse and Neglect**

Abuse is any form of maltreatment of another person. Somebody may abuse or neglect a young person by inflicting harm, or by failing to act to prevent harm. The young person may be abused by an adult or adults or another young person or people.

- Abuse may be physical, neglectful, sexual, financial, psychological, institutional or discriminatory (see Appendix 13 for a full list of Categories of Abuse)
- It is behaviour towards another person that deliberately or unknowingly causes harm to an adult at risk, or endangers their human or civil rights.
- It can be passive, for example, failing to take action to care for someone or failing to raise the alert about abuse.
- It can be active, for example hitting, stealing from or doing something else that causes harm.
- It can be an isolated event or a series of events.

### **Safeguarding**

'Safeguarding' is one part of safeguarding and promoting the welfare of learners and refers to the activity that is undertaken to protect learners who are suffering, or at risk of suffering significant harm.

### **Significant Harm**

The definition of significant harm is not prescriptive. The interpretation will depend largely on professional judgement, based on the known facts. It can include inappropriate touching, an assault, or a series of compounding events e.g. bullying. Other factors to be considered include the age and vulnerability of the young person, the degree of force used, the frequency of the harm, the nature of the harm in terms of ill treatment, and the impact on the young person's health and development.

## **SAFEGUARDING ADULTS AT RISK OF ABUSE AND NEGLECT AT LIFEBRIDGE**

LifeBridge ASEND puts learners' welfare first. All learners should stay safe and free from harm and LifeBridge is committed to playing a full and active part in the multi-agency response to concerns raised about safeguarding adults at risk.

**During working hours (8.30 am to 3.30 pm), concerns should be reported to the Designated Safeguarding Lead (DSL) Yvonne Neve on 01204 391038. Outside these hours, contact the Adult Safeguarding team on 01204 337000 or the Emergency Safeguarding Adults team on 01204 337777.**

Definitions and categories of abuse may be of limited help where signs are inconclusive, however staff will be expected to familiarise themselves with the definitions and categories of abuse and the indicators as shown in Appendix 13.

Further information can be found at <http://www.scie.org.uk/publications/ataglance/69-adults-safeguarding-types-and-indicators-of-abuse.asp>

**If a member of staff or volunteer has concerns about safeguarding practices at LifeBridge**, they should feel able to raise concerns about poor or unsafe practice and potential failures in the safeguarding regime at LifeBridge. Appropriate whistleblowing procedures, which are suitably reflected in staff training and staff behaviour policies, are in place for such concerns to be raised with the leadership team at LifeBridge.

Where a member of staff or volunteer feels unable to raise the issue with LifeBridge or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them.

If an incident happens **outside normal working time (8.30 am to 3.20 pm) or during an out-of-provision activity**, and neither the DSL, then the member of staff will contact one of the following safeguarding teams:

Postcode areas BL3, BL4, BL5	01204 337000
Postcode areas BL1, BL2, BL6, BL7	01204 333410
Emergency out of office hours	01204 337777

Alternatively, if a crime is suspected, the police can be contacted on 101 (non-emergency) or 999 (emergency). The member of staff must then contact the DSL as soon as possible.

## **GENERAL PRINCIPLES**

The young person's welfare is paramount.

All adults have a right to a life free from abuse, neglect or exploitation.

LifeBridge ASEND is proactive and takes positive steps to inform learners of their rights to safety and protection and the options available to express their fears or concerns. Learners away from LifeBridge premises, for example on a work experience placement, will be given advice on who to contact and how to contact them if they have concerns or suffer abuse.

Where it is deemed that a learner lacks sufficient understanding to make informed decisions about his/her own care or treatment, parents and carers have a right to be informed about any concerns about the young person's welfare or any action taken to safeguard and promote the learner's welfare, providing that this does not compromise the young person's safety.

LifeBridge has in place robust systems of safer recruitment and DBS checks that deter possible abusers and will manage effectively any allegations or concerns about abuse when they arise.

All members of staff at LifeBridge ASEND have a responsibility to be mindful of issues related to young people's safety and welfare and a duty to report and refer any concerns however minor they appear to be. It is not, however the role of LifeBridge staff to investigate those concerns.

When young people make allegations about abuse or neglect they will always be listened to, have their comments taken seriously and, where appropriate, the allegations will be investigated thoroughly by the young person's social worker.

No learner must be promised that anything they say will be kept confidential where the matter relates to safeguarding an adult at risk, or about abuse. It is helpful for a member of staff to say that they will jot down what the learner says to make sure that there is an accurate record for future reference.

Adults at risk are best protected when professionals share responsibility for protective action and work effectively together with the young person and their parents or carers. There is not necessarily a conflict between LifeBridge's need to carry out its responsibilities for safeguarding and its wish to work in partnership with parents and carers.

### **Prevention**

LifeBridge ASEND takes seriously its duty of pastoral care and is proactive in seeking to prevent learners becoming the victims of abuse, neglect or exploitation. It does this in a number of ways:

- Through the creation of an open culture which respects all individuals' rights and discourages bullying and discrimination of all kinds;
- By identifying a member of staff, Yvonne Neve, as Designated Safeguarding Lead, who has overall responsibility for Safeguarding matters.
- By ensuring these members of staff receive training in this field and act as a source of advice and support to other LifeBridge staff including volunteers;
- By informing learners of their rights to be free from harm and encouraging them to talk to LifeBridge staff if they have any concerns, and

- Through the tutorial programme and an ongoing programme of mentoring and support, at an-age appropriate level, which promotes self-esteem and social inclusion, and to address the issue of safeguarding in the wider context of learner safety in general.

## **RESPONDING TO CONCERNS**

In all the following circumstances, LifeBridge will keep a confidential record of its concerns and actions.

If LifeBridge ASEND receives information about a learner which suggests that s/he has been actually abused or neglected, or that this is likely, it has a duty to refer these concerns to Adult Services or to the Police. LifeBridge has no discretion in this matter. However, where things are not clear cut, staff should seek advice from the Duty Adult Safeguarding team on 01204 332032 or 333700. This allows staff working with Adults at Risk to have ready access to consistent information, advice and guidance from suitably qualified and experienced staff in order to explore a situation and determine together the best course of action.

In some circumstances, Adult Services may decide to begin an investigation, in which case their procedures will apply. In cases where it is deemed that the young person lacks sufficient understanding to make informed decisions about the case parents or carers will be informed of what has happened at the earliest opportunity, consistent with the young person's best interests. A referral or consultation with Adult Services is an expression of concern about a young person's welfare, not an accusation or presumption of responsibility about a parent or carer. Not an accusation or presumption of responsibility about a parent or carer.

During an investigation Social Workers or the Police may wish to speak to a learner. The Director of Post-nineteen Provision, acting in loco parentis (where the learner is deemed to lack the ability to make informed decisions about the case) has discretion to agree to allow the authorities to explore concerns and determine whether there are grounds for further action. If this is the case, the Director of Post-nineteen Provision will ensure that the young person's welfare is secured and that s/he has robust without either:

- Parental consent where this is required;
- An order of the Court or a Police Protection Order;
- The young person's own consent, provided that the young person is of an age and understanding to give informed consent.

If the Director of Post-nineteen Provision has general concerns about a learner's welfare then s/he will contact the parents or carers at an early stage in order to work together to resolve the situation. If their concerns continue over time the Director may consult with Adult Services to discuss a way forward. To avoid misunderstandings, parents and carers of young people who sustain accidental injuries which result in cuts, bruises, fractures etc., should inform LifeBridge staff as soon as possible on the next working day.

## **PREVENT STRATEGY AND CHANNEL**

Channel is a national initiative which aims to identify adults who may be at risk from exposure to, and influences of violent extremism, and which these young people may not understand. The Channel group considers information which suggests that a person may be at risk and then determines the appropriate level of information sharing and intervention to safeguard them.

The Single Point of Contact (SPOC) for liaison with our Channel Coordinator is Jane Haslam. The Channel Coordinator for LifeBridge ASEND is DC Claire Donnelly on 0161 856 1030 or [claire.donnelly@gmp.pnn.police.uk](mailto:claire.donnelly@gmp.pnn.police.uk) and further information can be found at [www.gmp.police.uk/content/WebAttachments/14235E109BB80257FCFBAD0F004DCBAE/\\$File/Adult's%20SPOC%20Pack%20v2.pdf](http://www.gmp.police.uk/content/WebAttachments/14235E109BB80257FCFBAD0F004DCBAE/$File/Adult's%20SPOC%20Pack%20v2.pdf)

## DEALING WITH ALLEGATIONS OF ABUSE AGAINST STAFF

The vast majority of adults who work with young people act professionally and aim to provide a safe and supportive environment that secures the wellbeing and very best outcomes for the young people in their care; however learners can be subjected to abuse by those who work with them in any and every setting.

We also know that some professionals may feel vulnerable to false allegations. The length of time taken to deal with cases, plus the widespread publicity some cases attract can have very damaging effects on young people, the adults involved, their families and their carers. It is in everyone's interest to have a rigorous, fair and timely system for dealing with allegations of abuse.

This part of the guidance is about managing cases of allegations that might indicate a person would pose a risk of harm if they continued to work in regular or close contact with learners in their present position, or in any capacity. It should be used in respect of all cases in which it is alleged that a member of staff (including volunteers) at LifeBridge has:

- Behaved in a way that has harmed a young person, or may have harmed a young person;
- Possibly committed a criminal offence against or related to a young person; or
- Behaved towards a child or children, young person or people in a way that indicates he or she would pose a risk of harm to learners

This part of the guidance relates to members of staff who are currently working in LifeBridge ASEND regardless of whether LifeBridge is where the alleged abuse took place. Allegations against a teacher who is no longer teaching should be referred to the police. Historical allegations of abuse should also be referred to the police.

On receipt of such an allegation, advice may be sought from the Local Authority Adult Social Care Team on 01204 337768

If the allegation concerns the Director of Post-nineteen Provision, the member of staff receiving the allegation **must** speak immediately to the Designated Director for Safeguarding. Additionally, the Chair of the Board of Directors (or the Vice Chair in their absence) will be notified.

### Information for Staff

As an employer, LifeBridge ASEND has a duty of care to our employees. LifeBridge will ensure we provide effective support for anyone facing an allegation and provide the employee with a named contact if they are suspended. It is essential that any allegation of abuse made against member of staff or volunteer at LifeBridge is dealt with very quickly, in a fair and consistent way that provides effective protection for the young person and at the same time supports the person who is the subject of the allegation

### Confidentiality

It is extremely important that when an allegation is made, the education provision makes every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered. The Education Act 2002 introduced reporting restrictions preventing the publication of any material that may lead to the identification of a teacher who has been accused by, or on behalf of, a learner from the same school or college (where that identification would identify the teacher as the subject of the allegation).

The reporting restrictions apply until the point that the accused person is charged with an offence, or until the Secretary of State publishes information about an investigation or decision in a disciplinary case arising from the allegation. The reporting restrictions also cease to apply if the individual to whom the restrictions apply effectively waives their right to anonymity by going public themselves or by giving their written consent for another to do so or if a judge lifts restrictions in response to a request to do so.

## **Abuse of Trust**

All education staff need to know that inappropriate behaviour with or towards children, young people or adults at risk of abuse or neglect is unacceptable.

It is against LifeBridge Policy for any member of staff to have a sexual relationship with an adult at risk of abuse.

LifeBridge ASEND generally regards sexual relationships between staff and young people attending LifeBridge as unethical and against the staff code of conduct and such a relationship may lead to disciplinary action.

## **Physical Contact and Restrictive Physical Intervention**

It is unrealistic to suggest that staff should never touch the young people at LifeBridge.

Under Section 550A of the Education Act 1996 staff in FE institutions have the right to use reasonable force to control or restrain young people in certain circumstances. Staff should ensure that any physical contact is reasonable, proportionate and in the best interests of the young person.

## **PEER-ON-PEER ABUSE**

In the event of physical or psychological abuse of one learner by another at LifeBridge, this will be taken seriously and dealt with through the LifeBridge Anti-bullying and Harassment Policy.

If it appears that a sibling, who may not be a learner at LifeBridge, is bullying a learner then LifeBridge in the first instance will inform the learner's parents or carers of its concerns. If the problem persists and the learner continues to be the victim of abuse then LifeBridge will refer its concerns to Adult Services staff.

Where sexual abuse is suspected either as victim or perpetrator, LifeBridge will refer its concerns to the relevant Safeguarding Adults Team or the Police immediately.

## **USEFUL EXTERNAL CONTACT TELEPHONE NUMBERS**

### **Bolton Council**

- To report a safeguarding adults concern Monday to Friday 8.45 – 5.00 (except Bank Holidays) ring Adult Social Care 01204 337768
- To discuss concerns about a Deprivation of Liberty issue: 01204 333891
- For non-urgent queries: [safeguardingadults@bolton.gov.uk](mailto:safeguardingadults@bolton.gov.uk)
- Emergency Duty Team for outside above hours: 01204 337777
- Safeguarding in Education Officer (schools only): 01204 337472
- Professional Advice Line only (do not release number to public) 01204 332032

### **Greater Manchester Police**

In emergencies, where there is a danger to life or a crime is in progress, always dial 999. This number is available 24 hours a day, seven days a week.

For non-emergencies where Police attendance is required, for example to report a crime or other incident, please ring 101. This number is available 24 hours a day, seven days a week.

- Police – Safeguarding Vulnerable Persons Unit: 0161 856 6583
- Police Public Protection Investigation Unit: 0161 856 7949

For more information about safeguarding adults, the Mental Capacity Act or Deprivation of Liberty Safeguards (DoLS) search safeguarding adults or mental capacity or email [www.bolton.gov.uk](http://www.bolton.gov.uk)

For more information including practitioner guidance and procedures around safeguarding adults in Greater Manchester go to:  
[www.manchester.gov.uk/downloads/download/3961/safeguarding\\_adults\\_procedures\\_and\\_guidance](http://www.manchester.gov.uk/downloads/download/3961/safeguarding_adults_procedures_and_guidance)

## **APPENDIX 1**

### **Summary of LifeBridge ASEND Safeguarding Adults at Risk Policy and Procedures for staff**

A young person may seek out an individual member of staff or other adult to share information specifically about abuse or neglect, or they may talk spontaneously, individually or in a group when LifeBridge staff or volunteers are present.

Any member of LifeBridge staff, or any volunteer hearing an allegation from a learner that abuse has, or may have, occurred should:

### **Receive**

- What is said;
- Accept what you are told – you do not need to decide whether or not it is true;
- Listen without displaying shock or disbelief.

### **Reassure**

- The learner;
- Acknowledge their courage in telling you;
- Do not promise confidentiality;
- Remind them they are not to blame – avoid criticising the alleged perpetrator
- Do not promise that “everything will be alright now” (it might not be).

### **React**

- React calmly, respond to the learner but do not interrogate;
- Avoid leading questions but ask open ended ones;
- Clarify anything you do not understand;
- Explain what you will do next i.e. inform the Designated Safeguarding Lead.

### **Record**

- Make notes as soon as possible – during the interview if you can;
- Use form SVA1 – Safeguarding Adult at Risk Concern and Report form (Appendix 4);
- Include:
  - Time
  - Date
  - Place
  - The learner’s own words – do NOT assume: Ask “Please tell me what xxxxx means”;
- Describe observable behaviour;
- Do not destroy your original notes – they may be needed later on.

### **Support**

- Consider what support is needed for the learner – you may need to give them a lot of your time
- Ensure you are supported – such interviews can be extremely stressful and time consuming;
- Talk to your Designated Safeguarding Lead/Director of Post-nineteen Provision/Line Manager

## **Summary of LifeBridge ASEND Safeguarding Adults at Risk Policy for Parents and Carers**

### **Introduction**

LifeBridge ASEND will strive to ensure that all learners remain safe and free from harm, and LifeBridge is committed to playing a full and active part in the multi-agency approach to safeguarding concerns. Additionally, LifeBridge has a legal duty to safeguard and promote the welfare of adults at risk of abuse and neglect, and to have a safeguarding policy and procedures in place, which should be shared with parents, to address concerns about the safety and protection of learners.

Through their day to day contact with learners, and direct work with families, staff who work in schools and colleges have a crucial role to play in noticing indicators of possible abuse or neglect. Parents should be aware therefore, that where it appears to a member of staff that a learner may have been abused, LifeBridge is required, as part of the local safeguarding procedures to report their concern to Adult Services immediately. To avoid any misunderstandings therefore, parents of learners who sustain accidental injuries outside LifeBridge, which result in cuts/bruises/fractures should inform LifeBridge **without delay** and explain the cause.

### **Principles**

Adults 'at risk' have a right to be safe.

Parents and carers should be informed if appropriate under the Mental Capacity Act.

Adults at risk are best protected when home and LifeBridge can work together.

### **Partnership**

LifeBridge will inform parents and carers, if appropriate under the Mental Capacity Act, of any concerns about their learners (providing it does not compromise the learner's safety) and will help and support them as necessary.

### **Prevention**

LifeBridge will take positive action to prevent learners suffering abuse and neglect through the development of an open culture that informs learners of their rights, and encourages them to speak about any concerns. LifeBridge will also address the issue of Learners' safety through the curriculum.

### **Responding to Concerns**

LifeBridge will refer all allegations or concerns that a learner has been, or is likely to be, abused or neglected to Adult Services.

LifeBridge will consult with other agencies when it has concerns that a learner may have been abused or neglected.

LifeBridge will discuss with parents and carers as appropriate under the Mental Capacity Act any concerns they have about their child.

Parents and carers will be kept informed about what has happened as appropriate under the Mental Capacity Act, and placing the needs of the learner first.

## **Peer-on-peer Abuse**

Physical and psychological abuse of learners by other young people will be dealt with, initially, through LifeBridge's anti-bullying policy. Parents/carers will be kept informed. All concerns about possible sexual abuse will be referred immediately to the Adult Safeguarding Team.

## **Safeguarding Adults Protection Strategy Meeting and Conferences**

Members of LifeBridge staff will attend strategy meetings and conferences when required and will provide information about learners and families. This information will be shared with parents and carers as appropriate under the Mental Capacity Act, beforehand if possible. LifeBridge will keep confidential safeguarding records separately from a learner's academic and other records.

## **Confidentiality**

Information from any source, including parents, about possible adult abuse cannot be kept confidential. Information and records about learners who are the subject of a Safeguarding Adults Protection Plan will be given only to those people who need it, and will be kept strictly confidential by them.

If parents have concerns about the safety or wellbeing of their child, they should contact:

Yvonne Neve – The Designated Safeguarding Lead

Signed: Yvonne Neve

Assistant Head of LifeBridge ASEND

Date: November 2020

**APPENDIX 3**

**Summary of LifeBridge ASEND Safeguarding Adults at Risk Policy and Procedures for Contractors**

As a visitor to LifeBridge ASEND we need you to be aware of our duty of care towards the young people who attend LifeBridge. All of our learners are classed as 'Adults at Risk of Abuse' by nature of their learning difficulties. We would therefore please ask that you allow us to keep you in sight at all times while you are on the premises and use only the staff toilet facilities. If in doubt, please ask a member of staff – they all wear identification badges.

It is recognised that a learner may seek out an individual adult to share information specifically about abuse or neglect, or a learner may talk spontaneously, individually or in a group when you are present. Should a young person approach you in this way while you are with us, please try to signal to a member of staff, but if this is not possible, we'd prefer that you:

- Listen to the young person and allow them to freely recall significant events, keeping questions to the absolute minimum necessary to ensure a clear and accurate understanding of what has been said.
- Reassure the learner but tell them that a record of the information given will be made, and do this. Include timing, setting and others present. Record the learner's demeanour as well as what is said.
- Explain that they cannot promise to keep confidential anything the learner says if the matter is related to safeguarding or abuse.
- Explain that help may be required to keep them safe, but do not ask the learner to repeat their account of events to anyone else.

If you receive this kind of information we can assist you in recording it. It is extremely important to pass it on as a matter of urgency to the Designated Safeguarding Lead, Yvonne Neve.

I have read and understood the information above.

Signed.....

Company.....

**APPENDIX 4**

**RECORD OF CONCERN**

Complete this form as accurately as possible. It will support those making decisions about any further actions deemed necessary. Please pass the completed form **immediately** to a Designated Person for Safeguarding Adults at Risk within LifeBridge (and no later than 3 hours of the reported incident to ensure a swift and safe response).

Part 1 – for use by any staff

Learner's Name:	
Date of Birth:	Area/Programme:
Date & time of incident:	
Date and time of concern :	
<b>REASON</b> (Please see Appendix 5):	
Your name:	
Your job title:	
Signature:	
Record the following factually:	
<ul style="list-style-type: none"> <li>• Who:</li> <li>• What – if recording a verbal disclosure by a learner, use their words:</li> <li>• Where:</li> <li>• When: (day and time)</li> <li>• Were there any WITNESSES:</li> </ul>	
What is the learner's account and/or perspective?	
What outcome would the learner like to see?	
Your professional opinion (where relevant):	
Is there an immediate risk to the learner? Yes/No	
Any other relevant information (distinguish between fact and opinion): E.g. previous concerns, SEND	

**Please pass this form to your Designated Safeguarding Lead.**

Part 2 – for use by **DSL**

<b>Time and date information received and from whom:</b>	
<b>Any advice sought (if required):</b>	Date, time, name, role, organisation & advice given:
<b>Action Taken</b>	Referral to adult social care/monitoring, advice given to appropriate staff or EHA with reasons:  Note time, date, names, who the information was shared with etc.
<b>Parents/Carers informed</b>	Yes/No Reasons:
<b>Social Worker informed</b>	Yes/No Reasons:
<b>Outcome</b>	Record names of individuals & agencies who have given information regarding outcome of any referral (if made):
<b>Additional Information</b>	Where can additional information regarding the learner/incident be found (e.g. learner file, serious incident book etc.)
<b>Should a concern or confidential file be commenced*</b>	*if there isn't already one in place: Yes/No  Why – state reasons:
<b>Signed</b>	
<b>Print Name</b>	
<b>Date</b>	

## **APPENDIX 5**

### **Body Map Guidance for LifeBridge**

Body Maps should be used to document and illustrate visible signs of harm and physical injuries.

Always use a blue (or black) pen (never a pencil) and do not use correction fluid or any other eraser.

Do not remove clothing for the purpose of the examination unless the injury site is freely available because of treatment.

**Any concerns should be reported and recorded without delay to the DSL, Lesley Beddows, who will refer on as necessary to the appropriate safeguarding services, e.g. Social Care direct or learner's social worker if already an open case to social care.**

**When you notice an injury to a learner, try to record the following information in respect of each mark identified e.g. red areas, swelling, bruising, cuts, lacerations and wounds, scalds and burns:**

- Exact site of injury on the body, e.g. upper outer arm/left cheek.
- Size of injury - in appropriate centimetres or inches.
- Approximate shape of injury, e.g. round/square or straight line.
- Colour of injury - if more than one colour, say so.
- Is the skin broken?
- Is there any swelling at the site of the injury, or elsewhere?
- Is there a scab/any blistering/any bleeding?
- Is the injury clean or is there grit/fluff etc.?
- Is mobility restricted as a result of the injury?
- Does the site of the injury feel hot?
- Does the learner feel hot?
- Does the learner feel pain?
- Has the learner's body shape changed? Are they holding themselves differently?

Importantly the date and time of the recording must be stated as well as the name and designation of the person making the record. Add any further comments as required.

**Ensure First Aid is provided where required and record.**

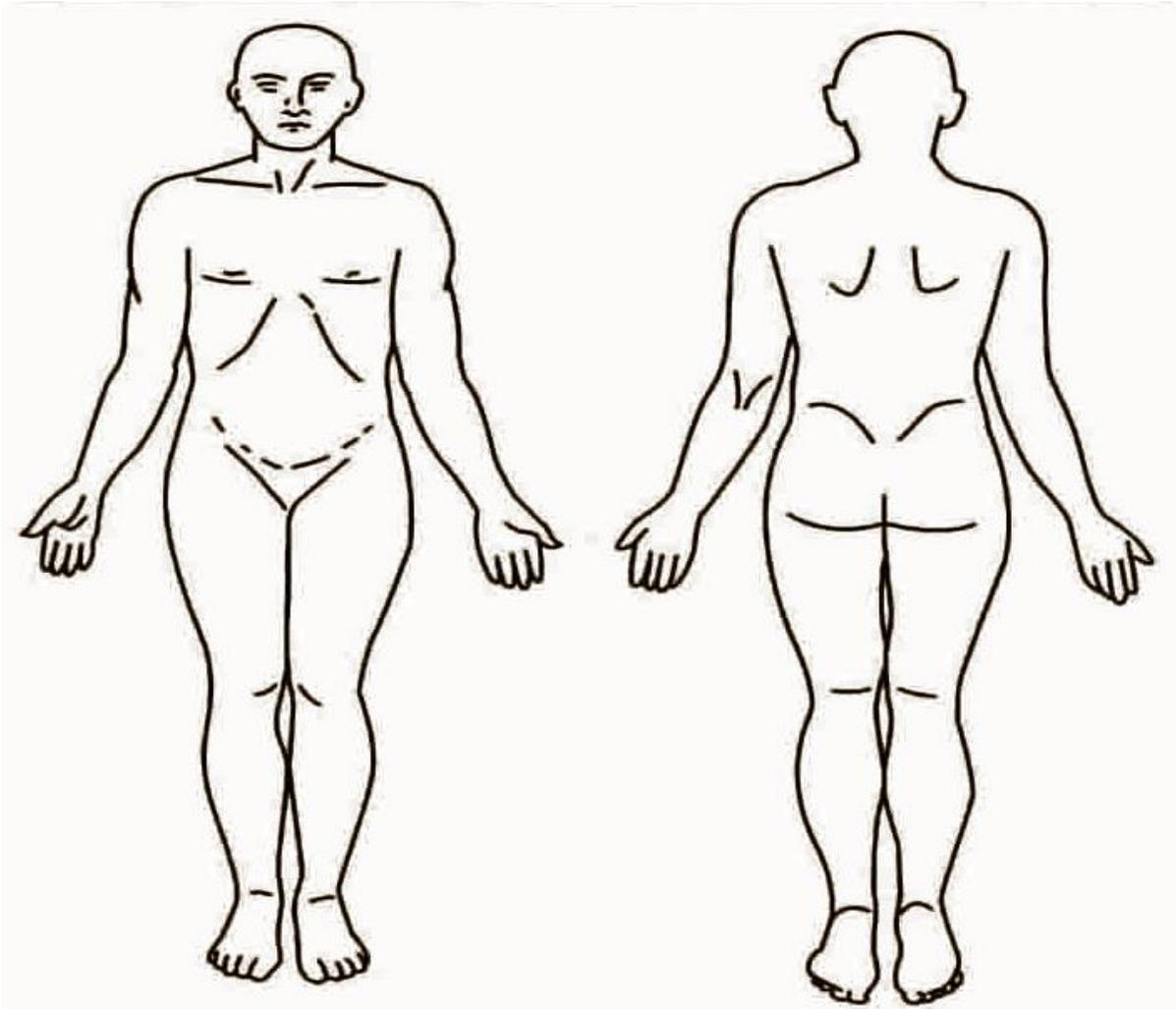
A copy of the body map should be kept on the learner's concern/confidential file.

## Please complete all sections

### Details of the vulnerable adult

Title	First Name	Surname	Learner Reference Number ( <i>if known</i> )
-------	------------	---------	--

Please indicate position on body of marks or injuries, note any colour of any injury, whether skin is broken or anything else of relevance.



Date of incident	Time of incident	Location of incident
------------------	------------------	----------------------

### About you - person completing this form

Title	First Name	Surname	Relationship to vulnerable adult
-------	------------	---------	----------------------------------

Email:	Telephone number:
	Mobile number:

APPENDIX 6

HOME ACCIDENT OR INJURY FORM

This form should be completed when a parent/carer informs LifeBridge that a learner has sustained an injury or had an accident outside of LifeBridge

Date Accident/Injury Reported: \_\_\_\_\_

Name of Learner: \_\_\_\_\_

Area/Programme: \_\_\_\_\_

Person Reporting Incident: \_\_\_\_\_

Relationship to Learner: \_\_\_\_\_

Date Accident Occurred: \_\_\_\_\_

Place of Accident: \_\_\_\_\_

Description of injury (complete body map if needed):

Brief detail of how the accident occurred:

Witnessed by: \_\_\_\_\_

First Aid Treatment given: Yes  No

Was Medical advice sought? Yes  No

If yes, when and where?

Signed by parent/carer: \_\_\_\_\_

Member of staff accident reported to: \_\_\_\_\_

**APPENDIX 7**

**INFORMATION/FRONT SHEET for SAFEGUARDING FILE**

<b>Full Name:</b>		<b>DOB:</b>		<b>Vocational Area &amp; Programme:</b>		<b>Additional needs:</b>	
<b>Gender:</b>		<b>Ethnicity:</b>					
<b>Home Address:</b>				<b>Telephone:</b>			
				<b>E mail:</b>			
<b>Status of file and dates:</b>							
OPEN							
CLOSED							
TRANSFER (include details of college transferred to)							
<b>Any other safeguarding records held in LifeBridge relating to this learner or a learner closely connected to him/her? YES/NO WHO?</b>							
<b>Members of household</b>							
<b>Name</b>	<b>Relationship to learner</b>	<b>DOB/Age</b>		<b>Tel No</b>			
<b>Significant Others (relatives, carers, friends, child minders, etc.)</b>							
<b>Name</b>	<b>Relationship to learner</b>		<b>Address</b>		<b>Tel No</b>		
<b>Other Agency Involvement</b>							
<b>Name of officer/person</b>	<b>Role and Agency</b>		<b>Status of Learner i.e. EHA/CAM</b>		<b>Tel No</b>		<b>Date</b>



**APPENDIX 9**

**TRANSFER OF SAFEGUARDING RECORDS**

This form should be completed when a learner moves to another setting and there are safeguarding concerns and records to transfer.

<b>Learner's Name</b>	
<b>Learner Reference Number</b>	
<b>DOB</b>	
<b>Previous surnames or aliases</b>	
Name of people with parental responsibilities	
Name of social worker/lead professional	

Information and files transferred (to include chronologies and assessments)

<b>Name of sending provision</b>	
<b>Name of receiving provision</b>	
<b>Passed to (name)</b>	
<b>Date of first entry in file</b>	
<b>Date of last entry in file</b>	

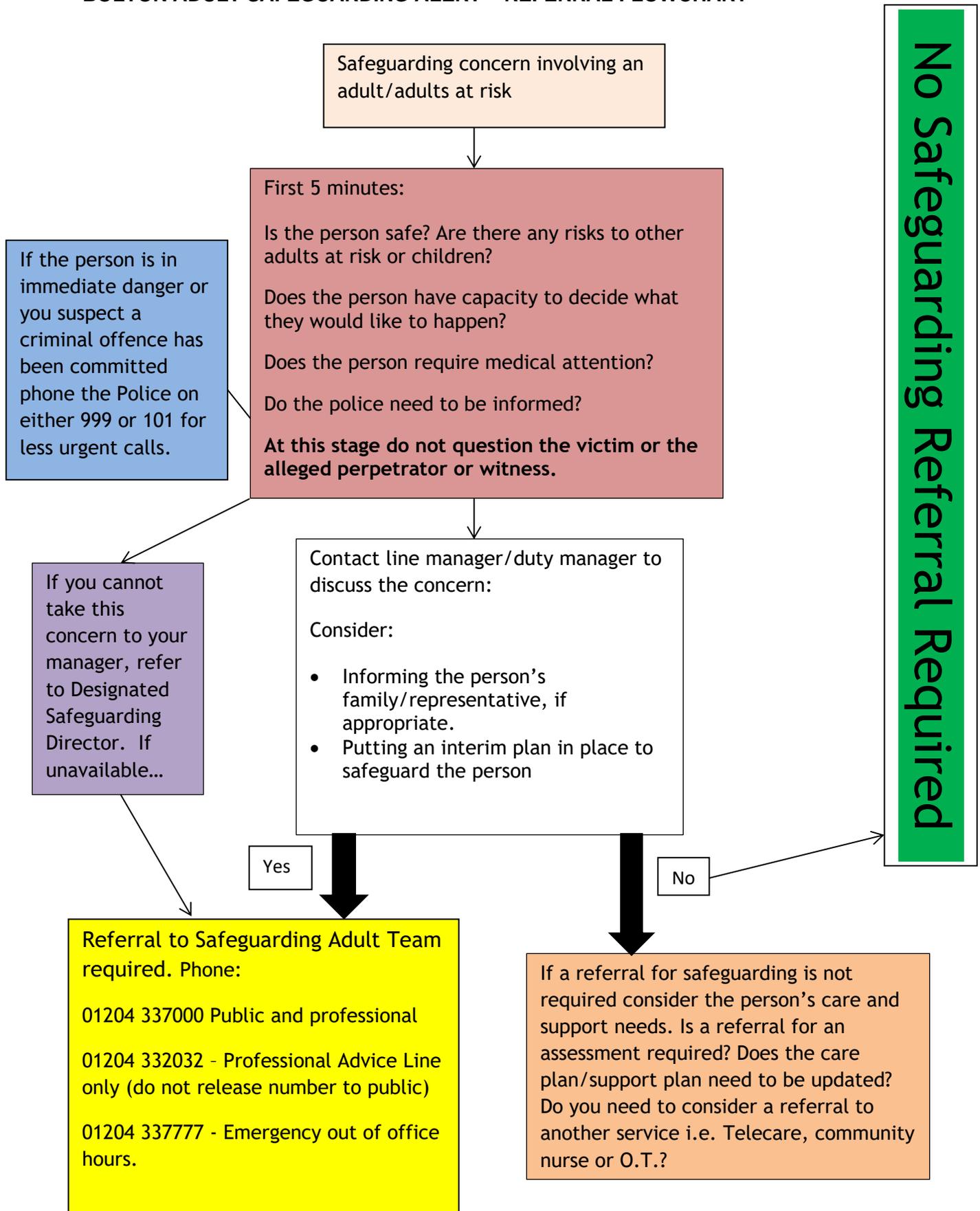
**Learner status: (please tick)**

<b>Safeguarding</b>	
<b>Shared Lives</b>	
<b>Social worker (name)</b>	
<b>Other (please state)</b>	

<b>Transferred by:</b>	<b>Received by:</b>
Name:	Name:
Position:	Position:
Signed:	Signed:
Date:	Date:

APPENDIX 10

BOLTON ADULT SAFEGUARDING ALERT – REFERRAL FLOWCHART



**APPENDIX 11**

**TRACKING FORM - ALLEGATION/CONCERN RAISED ABOUT A MEMBER OF STAFF**

1. When an allegation/concern is received brief details should be obtained and passed to the DSL as soon as possible.

2.

Date:		Time	
Allegation made by:			
Who the allegation is made against:			
<i>NB: The subject of the allegation should not be informed without first seeking advice</i>			
Allegation first received by:			
Brief details of the allegation:			
Date of alleged incident:			
Does this allegation involve a restraint?	YES / NO / NYK		
Case manager appointed and to complete tracking form			

3. Allegations which appear to meet the criteria should be referred to LADO within 24 hours ( see Note 1)

Does this appear to meet the criteria for managing allegations?	YES / NO		
Referred to LADO:	YES / NO	Date:	
Advice given:			
Date:			
Action to be taken:			
<i>Suspension should never be automatic but should be considered and rationale given for decisions made.</i>	Decision to suspend YES / NO		

#### 4. Information gathered about the allegation

Staff witnesses	Account taken	Copy forwarded to LADO
1.		
2.		
3.		
Learner witnesses		
1.		
2.		
3.		
4		
Plan of setting/classroom etc.		
Chronology of event begun		
1 <sup>st</sup> Aid log		

#### 5. Full details gathered

Learner name:	
Date of Birth	
Address:	
Is the learner known to Social Care?	YES / NO
Does the learner have Special Educational Needs?	YES / NO If yes - details
Has the learner raised previous concerns?	YES / NO If yes - details

Staff full name:	
Date of Birth:	
Address:	
Has this person raised concerns before?	

#### 6. Informing others

Have parents of the learner been informed?	
Details of response	
<i>Staff members should be informed of the allegation ASAP - on advice from LADO</i>	
Has the staff member been informed?	YES / NO
Name of Key person nominated to feedback to them:	

**7. Outcome of LADO consultation**

Does this meet LADO criteria:	YES / NO						
Further action required:							
Professional Strategy Meeting to be held:	YES / NO						
Professional Strategy Meeting date:							
Attended by Case Manager:	YES / NO						
Minutes received:	YES / NO						
Outcome: – <i>please circle</i>	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Unfounded</td> <td style="width: 50%; border: none;">Unsubstantiated</td> </tr> <tr> <td style="border: none;">False</td> <td style="border: none;">Substantiated</td> </tr> <tr> <td style="border: none;">Malicious</td> <td style="border: none;"></td> </tr> </table>	Unfounded	Unsubstantiated	False	Substantiated	Malicious	
Unfounded	Unsubstantiated						
False	Substantiated						
Malicious							
Disciplinary investigation to be held:	YES / NO						
Staff member informed of outcome:	YES / NO						
Parents informed of outcome:	YES / NO						
Chair of governors informed:	YES / NO						
Details added to overview table:	YES / NO						
Outcome:							

Lessons learned:

**Note 1 - Criteria for managing allegations**

An allegation may relate to a person who works with learners who has:

- Behaved in a way that has harmed, or may have harmed, a young person
- Possibly committed a criminal offence against or related to a young person
- Behaved towards a young person or people in a way that indicates they may pose a risk of harm to learners

**APPENDIX 12**

**STATEMENT OF STAFF COMMITMENT TO LIFEBRIDGE ASEND SAFEGUARDING POLICY**

**To be completed annually BY ALL MEMBERS OF STAFF and kept in HR Files**

Staff Member: ..... Post:  
.....

Line Manager: .....

I have read and understood the standards and guidelines outlined in the LifeBridge ASEND Safeguarding Policy.

I agree with the principles contained therein and accept the importance of implementing the policies and practices whilst working at LifeBridge ASEND.

I confirm that I have:

- received a copy of the Safeguarding Policy;
- had the opportunity to read and discuss the policy and procedure with my Line Manager;
- discussed and recorded training requirements for ongoing action.

Signed (Staff).....

Signed (Line Manager).....

Date .....

## APPENDIX 13

### TYPES OF ABUSE AND NEGLECT

Abuse is any form of maltreatment of another person. Somebody may abuse or neglect a young person by inflicting harm, or by failing to act to prevent harm. The young person may be abused by an adult or adults or another young person or people.

**Physical abuse:** a form of abuse which may include assault, hitting, slapping, pushing, kicking, misuse of medication or restraint or inappropriate physical sanctions, force-feeding, and unlawfully depriving a person of their liberty.

**Possible indicators:**

- No explanation for injuries or inconsistency with the account of what happened
- Injuries are inconsistent with the person's lifestyle
- Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps
- Frequent injuries
- Unexplained falls
- Subdued or changed behaviour in the presence of a particular person
- Signs of malnutrition
- Failure to seek medical treatment or frequent changes of GP

**Sexual Abuse:** includes 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 at Risk has not consented, could not consent or was pressured into consenting. Denial of a sexual life to consenting adults is also considered abusive practice.

**Possible indicators:**

- Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck
- Torn, stained or bloody underclothing
- Bleeding, pain or itching in the genital area
- Unusual difficulty in walking or sitting
- Foreign bodies in genital or rectal openings
- Infections, unexplained genital discharge, or sexually transmitted diseases
- Pregnancy in a woman who is unable to consent to sexual intercourse
- The uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude
- Incontinence not related to any medical diagnosis
- Self-harming
- Poor concentration, withdrawal, sleep disturbance
- Excessive fear/apprehension of, or withdrawal from, relationships
- Fear of receiving help with personal care
- Reluctance to be alone with a particular person

**Psychological Abuse:** includes **Emotional Abuse**, threats of harm or abandonment, deprivation of contact, humiliation or blaming, controlling, intimidation, coercion, indifference, harassment, verbal abuse (including shouting or swearing), cyber bullying, isolation or unreasonable and unjustified withdrawal from services or support networks.

Psychological Abuse is the denial of a person's human and civil rights including choice and opinion, privacy and dignity and being able to follow one's own spiritual and cultural beliefs or sexual orientation.

**Possible indicators:**

- An air of silence when a particular person is present
- Withdrawal or change in the psychological state of the person

Insomnia  
Low self-esteem  
Uncooperative and aggressive behaviour  
A change of appetite, weight loss/gain  
Signs of distress: tearfulness, anger  
Apparent false claims, by someone involved with the person, to attract unnecessary treatment

**Domestic Abuse:** includes psychological, physical, sexual, financial, emotional abuse and so-called 'honour' based violence.

In 2013, the Home Office announced changes to the definition of domestic abuse:

- An incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse... by someone who is or has been an intimate partner or family member regardless of gender or sexuality;
- Includes: psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence; Female Genital Mutilation; forced marriage;
- Age range extended down to 16.

Many people think that domestic abuse is about intimate partners, but it is clear that other family members are included and that much safeguarding work (that meets the criteria set out above) that occurs at home is in fact concerned with domestic abuse. This confirms that domestic abuse approaches and legislation can be considered safeguarding responses in appropriate cases.

**Possible indicators:**

Low self-esteem  
Feeling that the abuse is their fault when it is not  
Physical evidence of violence such as bruising, cuts, broken bones  
Verbal abuse and humiliation in front of others  
Fear of outside intervention  
Damage to home or property  
Isolation – not seeing friends and family  
Limited access to money

**Modern Slavery:** encompasses slavery, human trafficking, and forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

**Possible indicators:**

Signs of physical or emotional abuse  
Appearing to be malnourished, unkempt or withdrawn  
Isolation from the community, seeming under the control or influence of others  
Living in dirty, cramped or overcrowded accommodation and or living and working at the same address  
Lack of personal effects or identification documents  
Always wearing the same clothes  
Avoidance of eye contact, appearing frightened or hesitant to talk to strangers  
Fear of law enforcers

**Financial or Material Abuse:** includes 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, or the misappropriation of property, possessions or benefits.

It includes the withholding of money or the unauthorised or improper use of a person's money or property, usually to the disadvantage of the person to whom it belongs.

Staff borrowing money or objects from a service user is also considered Financial Abuse.

**Undue Influence:** the concept of 'undue influence' applies where a person has Capacity to conduct a financial or property transaction (usually related to gifts or wills), but they have been not just influenced, but unduly influenced by someone else.

**Possible indicators:**

- Missing personal possessions
- Unexplained lack of money or inability to maintain lifestyle
- Unexplained withdrawal of funds from accounts
- Power of attorney or lasting power of attorney (LPA) being obtained after the person has ceased to have mental capacity
- Failure to register an LPA after the person has ceased to have mental capacity to manage their finances, so that it appears that they are continuing to do so
- The person allocated to manage financial affairs is evasive or uncooperative
- The family or others show unusual interest in the assets of the person
- Signs of financial hardship in cases where the person's financial affairs are being managed by a court appointed deputy, attorney or LPA
- Recent changes in deeds or title to property
- Rent arrears and eviction notices
- A lack of clear financial accounts held by a care home or service
- Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person
- Disparity between the person's living conditions and their financial resources, e.g. insufficient food in the house
- Unnecessary property repairs

**Neglect or Acts of Omission:** includes ignoring medical or physical care needs, failure to provide access to appropriate health, social care, or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Neglect also includes 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.

Neglect and poor professional practice may take the form of isolated incidents or pervasive ill treatment and gross misconduct. Repeated instances of poor care may be an indication of more serious problems. Neglect can be intentional or unintentional.

**Possible indicators:**

- Poor environment – dirty or unhygienic
- Poor physical condition and/or personal hygiene
- Pressure sores or ulcers
- Malnutrition or unexplained weight loss
- Untreated injuries and medical problems
- Inconsistent or reluctant contact with medical and social care organisations
- Accumulation of untaken medication
- Uncharacteristic failure to engage in social interaction
- Inappropriate or inadequate clothing

**Organisational Abuse/Poor Professional Practice:** Institutional Abuse, neglect and poor professional practice may take the form of isolated incidents of neglect, and poor or unsatisfactory professional practice at one end of the spectrum, through to pervasive ill-treatment or gross misconduct at the other. Repeated instances of poor care may be an indication of more serious problems, and this is sometimes referred to as Institutional Abuse.

It may be a result of regimes, routines, practices and behaviours that occur in services that adults live in or use and which violate their human rights. This may be part of the culture of a service to which staff are accustomed and may pass by unremarked upon. They may be subtle, small and apparently insignificant, yet together may amount to a service culture that denies, restricts or curtails the dignity, privacy, choice, independence or fulfilment of adults.

**Staffing:** Staffing levels are insufficient to provide appropriate and timely intervention required to meet the complete range of needs. Routines can become too set and rigid and may be fixed around the needs of

staff and not around the individual. Lack of choice and consultation about social needs, activities etc. There can be a lack of personal belongings, shared toiletries, bulk-buying of personal care items. Staff can be focused on getting the job done rather than spending time with the young people. Lack of staff training, staff morale and low staff self-esteem can lead to an environment in which abuse becomes the norm. EHC Plans do not reflect the needs and wishes of the young people, evaluation and record keeping do not contain evidence of implementation. Poor recruitment procedures leading to inappropriate appointments, for example appointing staff with convictions for theft.

**Environment:** The environment is unsafe, e.g. during building works rendering the area not compliant with Health and Safety legislation. The environment is dirty and does not comply with hygiene /control and infection standards.

**Possible indicators:**

- Lack of flexibility and choice for people using the service
- Inadequate staffing levels
- People being hungry or dehydrated
- Poor standards of care
- Lack of personal clothing and possessions and communal use of personal items
- Lack of adequate procedures
- Poor record-keeping and missing documents
- Absence of visitors
- Few social, recreational and educational activities
- Public discussion of personal matters
- Unnecessary exposure during bathing or using the toilet
- Absence of individual care plans
- Lack of management overview and support

**Discriminatory Abuse:** motivated by discriminatory and oppressive attitudes towards people on the grounds of disability, gender reassignment, age, race, religion or belief, sex and sexual orientation, marriage and civil partnership, pregnancy and maternity. It may be a feature of any form of Abuse of an adult, and manifests itself as Physical Abuse/assault, Sexual Abuse/assault, Financial Abuse/theft and the like, Neglect and Psychological Abuse/harassment, including verbal abuse and racist, sexist, homophobic or ageist comments, jokes or any other form of harassment. It also includes not responding to dietary needs and not providing appropriate spiritual support.

**Hate crime:** any criminal offence that is motivated by hostility or prejudice based upon the victim's disability, race, religion or belief, sexual orientation or transgender identity. If the victim of hate crime is an adult, The BSAB Safeguarding Process should be followed.

**Disability Hate Crime:** 'Disability' means any physical or mental impairment. There is no statutory definition of a disability-related incident. However, the Crown Prosecution Service (CPS) definition is: 'Any incident, which is perceived to be based upon prejudice towards or hatred of the victim because of their disability or so perceived by the victim or any other person'. It also applies to relevant cases where the offender has assumed a person is disabled, whether or not that assumption is correct.

**Possible indicators:**

- The person appears withdrawn and isolated
- Expressions of anger, frustration, fear or anxiety
- The support on offer does not take account of the person's individual needs in terms of a protected characteristic

**Self-neglect:** covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

**Possible indicators:**

- Very poor personal hygiene
- Unkempt appearance
- Lack of essential food, clothing or shelter

- Malnutrition and/or dehydration
- Living in squalid or unsanitary conditions
- Neglecting household maintenance
- Hoarding
- Collecting a large number of animals in inappropriate conditions
- Non-compliance with health or care services
- Inability or unwillingness to take medication or treat illness or injury

### **Online Abuse**

E-safety can be described as safeguarding all users of fixed and mobile devices that allow access to content and communications that could pose risks to personal safety and wellbeing. Examples are PCs, laptops, tablets, mobile phones and gaming consoles such as Xbox, Playstation and Wii.

#### **Possible indicators:**

- Spend lots, much more or much less time online, texting, gaming or using social media
- Withdrawn, upset or outraged after using the internet or texting
- Secretive about who they're talking to and what they're doing online or on their mobile phone
- Lots of new phone numbers, texts or e-mail addresses on their mobile phone, laptop or tablet.

**Exploitation by Radicalisers who Promote Violence:** defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups. If there are concerns related to an adult being targeted for radicalisation, an Alert should be raised and the police should become involved. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The internet and the use of social media in particular has become a major factor in the radicalisation of young people.

As with managing other safeguarding risks, LifeBridge staff should be alert to changes in learners' behaviour which could indicate that they may be in need of help or protection. Staff should use their professional judgement in identifying learners who might be at risk of radicalisation and act proportionately which may include making a referral to the Channel programme.

**Prevent:** from 1 July 2015 specified authorities, including all FE institutions as defined in the summary of this guidance, are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 ("the CTSA 2015"), in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism. This duty is known as the Prevent duty. It applies to a wide range of public-facing bodies. Bodies to which this duty applies must have regard to statutory guidance issued under section 29 of the CTSA 2015 ('Prevent Guidance'). Paragraphs 57-76 of the Prevent Guidance are concerned specifically with schools. LifeBridge should ensure that the DSL undertakes Prevent awareness training and is able to provide advice and support to other members of staff on protecting learners from the risk of radicalisation. LifeBridge must ensure that learners are safe from terrorist and extremist material when accessing the internet in LifeBridge. LifeBridge should ensure that suitable filtering is in place. It is also important that LifeBridge teach learners about online safety more generally.

**Channel:** LifeBridge staff should understand when it is appropriate to make a referral to the Channel programme. Channel is a programme which focuses on providing support at an early stage to people who are identified as being at risk of being drawn into terrorism. It provides a mechanism for LifeBridge to make referrals if they are concerned that an individual might be at risk of radicalisation. An individual's engagement with the programme is entirely voluntary at all stages. When it is suspected that a learner is at risk of radicalisation or there are concerns regarding a learner's behavior, the process is to refer to Bolton's Channel Panel, this generally would be the DSL who would contact DC Keith Galley (12507) North West Counter Terrorism Unit Prevent Engagement Officer Bolton & Bury Divisions Greater Manchester Police HQ, Central Park, Northampton Road, Newton Heath, M405BP. Email: [Keith.Galley@gmp.pnn.police.uk](mailto:Keith.Galley@gmp.pnn.police.uk) Telephone: 0161 856 5662

#### **Possible indicators:**

Physical changes:

- Sudden or gradual change in physical appearance

- Sudden or unexpectedly wearing religious attire
- Getting tattoos displaying various messages
- Unexpectedly growing a beard
- Unexpectedly shaving their head (skinhead)
- Possesses unexplained gifts and clothing (groomers will sometimes use gifts such as mobile phones and clothing to bribe a young person)

**Social changes:**

- Cuts ties with their friends, family or community
- Starts to become socially withdrawn
- Becoming dependent on social media and the internet
- Begins to associate with others who hold radical views
- Bullies or demonises other people freely
- Begins to attend rallies and demonstrations for extremist causes
- Associates with known radicals
- Visits extremist websites, networks and blogs

**Emotional and verbal changes:**

- Begins to complain, often with anger, about governmental policies, especially foreign policy
- Advocates violence or criminal behaviour
- Begins to believe in government conspiracies
- Exhibits erratic behaviour such as paranoia and delusion
- Speaks about seeking revenge
- Starts to exhibit extreme religious intolerance
- Demonstrates sympathy to radical groups
- Displays hatred or intolerance of other people or communities because they are different

**Honour-based Violence:** a crime, and referral to the police must always be considered. It has or may have been committed when families feel that dishonour has been brought to them. Women are predominantly (but not exclusively) the victims, and the violence is often committed with a degree of collusion from family members and/or members of the community. Many of these victims are so isolated and controlled that they are unable to seek help. If a concern is raised through a Safeguarding Adults Referral, and there is a suspicion that the adult is the victim of honour-based violence, a police referral is required. When dealing with victims, staff must not speak with them in the presence of their relatives.

**Possible indicators:**

- Broken communication between victim and friends
- Absence from education/the workplace
- Criticism of the victim for 'western' adoption of dress/make-up
- Restrictions in leaving the house or being accompanied outside the home
- Depressive or suicidal tendencies in an otherwise happy person.

**Female Genital Mutilation (FGM):** a collective term for procedures which include the removal of part or all of the external female genitalia for cultural or other non-therapeutic reasons. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life. Section 5C of the Female Genital Mutilation Act 2003 (as inserted by section 75 of the Serious Crime Act 2015) gives the Government powers to issue statutory guidance on FGM to relevant persons. Once the government issues any statutory multi agency guidance this will apply to schools and colleges, although learners at LifeBridge are generally too old for this procedure.

**Possible indicators:**

- Mention of a female relative coming to visit
- A girl or young woman asking for help from a teacher or another adult if she feels at risk of danger
- A girl or young woman becoming easily distressed, fearful or anxious
- Referencing FGM (or its other alternative names)
- A child or young person taking about a special procedure/ceremony that is going to take place
- The family making preparations to take the girl or young person abroad 'on holiday' e.g. arranging vaccinations or requesting a prolonged absence from LifeBridge

**Forced Marriage:** where one or both of the parties is married without their consent or against their will. A Forced Marriage differs from an arranged marriage, in which both parties consent to the assistance of their parents or a third party in identifying a spouse. In a situation where there is concern that an adult is being forced into a marriage they do not or cannot consent to, there will be an overlap between action taken under the forced marriage provisions and the Safeguarding Adults process. In this case action will be coordinated with the police and other relevant organisations.

**Possible indicators:**

Education/Employment:

- Persistent absence from school/work, requests for extended leave
- Drop in performance, low motivation, decline in behaviour engagement
- Leaving work accompanied, surveillance by siblings or cousins at school
- Limited career options, leaving school early to marry
- Trips etc.

Health:

- Evidence of self-harm, depression, social isolation, eating disorders or substance misuse
- Early/unwanted pregnancy
- Accompanied by family members to doctors or clinics
- Female genital mutilation

Family and Background:

- Evidence of family disputes, domestic abuse, or running away from home
- History of forced or early marriage of siblings
- Unreasonable restrictions e.g. kept at home by parents and financial restrictions
- Secret boyfriend /girlfriend
- Sexual orientation deemed to be against family culture/religion

**Human Trafficking:** acts of recruiting, transporting, transferring, harbouring or receiving a person through a use of force, coercion or other means, for the purpose of exploiting them. If an identified victim of human trafficking is also an adult, the response will be coordinated under the Safeguarding Adults Process.

**Possible indicators:**

- Appearing malnourished
- Showing signs of physical injuries and abuse
- Avoiding eye contact, social interaction, and authority figures/law enforcement
- Seeming to adhere to scripted or rehearsed responses in social interaction
- Lacking official identification documents
- Appearing destitute/lacking personal possessions
- Working excessively long hours
- Living at place of employment
- Checking into hotels/motels with older males, and referring to those males as boyfriend or “daddy,” which is often street slang for pimp
- Poor physical or dental health
- Tattoos/ branding on the neck and/or lower back
- Untreated sexually transmitted diseases
- Security measures that appear to keep people inside an establishment - barbed wire inside of a fence, bars covering the insides of windows
- Not allowing people to go into public alone, or speak for themselves