



Safeguarding Children and Adults at Risk Policy and Procedures 2026

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1. Introduction

The Danish YWCA in London hostel provides a safe place in London for Danish workers, students, and visitors alike. The house is "a home away from home" for young Danes over the age of 18 years and can accommodate up to 60 young people, who can spend the night and live at the YWCA.

As a registered charity, we will ensure our service delivery and activities meet the safeguarding standards expected by the Charity Commission.

We are committed to working in partnership with other agencies to protect children and adults at risk from abuse and neglect, including radicalisation. This includes those experiencing domestic abuse, stalking, female genital mutilation, and modern slavery. Protecting adults and children may require the sharing of information with statutory agencies where there is a suspicion of risk to the public.

Danish YWCA in London recognises its responsibility to ensure the safety, well-being and protection of its staff and volunteers, its residents, and their children and all those involved in all its activities and events.

All persons, regardless of age, gender, ability, disability, ethnicity, religious belief, and sexual identity, have a right to take part in our activities in an enjoyable and safe environment and to be protected from abuse.

These safeguarding policies and procedures have been developed by drawing on recognised good practices in the hostel sector. Reference has been made to relevant safeguarding legislation, key guidance, and best practice in creating our safeguarding policies.

Any breach in these safeguarding procedures may make a staff member or volunteer liable to disciplinary action.

Chair of the Board of Trustees

2. Scope of the Policy

This Policy and Procedures apply to all aspects of the Danish YWCA in London, Registered Charity No. 249198. The Policy and Procedures apply to all trustees, managers, all staff (including temporary staff) and long-term volunteers working for or delivering services on behalf of the Danish YWCA in London.

Our trustees are responsible for ensuring that those benefiting from or working with our charity are not harmed in any way through contact with it. This includes people who benefit from our work, our staff, and volunteers, and it will also include other people who come into contact with us through our work.

3. Purpose of the Policy

The purpose of this policy is to protect and safeguard children and adults at risk who come into contact with the Danish YWCA in London. The policy defines abuse, outlines legislation, and sets out the procedure to be followed if abuse or neglect of a resident or resident's child is suspected. It is designed to protect Charity staff and volunteers as well as those who use the hostel facilities and engage in Danish YWCA in London events. It clarifies the roles and responsibilities of trustees, managers, staff, and volunteers when faced with suspected abuse or neglect of a resident or their child.

4. Safeguarding Statement

“Safeguarding is Everyone’s business – the Danish YWCA in London is committed to safeguarding and promoting the welfare/wellbeing of children, young people, and adults at risk. It expects all trustees, staff, and volunteers to share this commitment”.

5. Safeguarding Principles and Definitions

5.1 Safeguarding Children

A child is anyone who has not yet reached their 18th birthday.

The welfare of a child or young person will always be paramount.

Safeguarding is the action we take to promote the welfare of children under the age of 18 years, including unborn babies, protect them from harm and is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.

Safeguarding and promoting the welfare of children is defined for this guidance as:

- protecting children from maltreatment.
- preventing impairment of children's mental and physical health or development.
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care, and
- taking action to enable all children to have the best outcomes.

(Working Together to Safeguard Children, H.M. Gov 2018).

Significant Harm: Significant harm is the level of harm that justifies compulsory intervention in family life in the best interests of children and gives Local Authorities a legal duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering or likely to suffer significant harm. There are no absolute criteria upon which to rely when judging what constitutes significant harm; sometimes, a single traumatic event may constitute significant harm. More often, however, significant harm is a compilation of significant events, both acute and long-standing, which interrupt, change or damage a child's physical and psychological development.

Types of Child Abuse as defined by Working Together 2018

- Physical abuse
- Emotional abuse

- Sexual Abuse & CSE
- Neglect
- County Lines
- Extremism
- Cyber Bullying
- Use of social media and online technology

Please refer to Procedures Section Appendix A Signs and Symptoms of child abuse for more information

5.2 Safeguarding Adults at Risk

Safeguarding adults means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's well-being is promoted, including, where appropriate, having regard for their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear, or unrealistic about their personal circumstances. Care and Support Statutory Guidance (2014, Section 14.7)

Abuse is a violation of an individual's human and civil rights by any other person(s) or group of people. Abuse may be a single or repeated act.

Six Principles that Underpin Safeguarding Adults: Care Act 2014

The principles should inform how the Danish YWCA in London staff and volunteers work with adults.

- Empowerment
- Prevention
- Proportionality
- Protection
- Partnership
- Accountability

Adults at risk: Definition

The safeguarding duties apply to an adult who:

- has needs for care and support (whether the local authority is meeting any of those needs or not),
- is experiencing, or at risk of, abuse or neglect,
- as a result of those care and support needs are unable to protect themselves from either the risk of/ the experience of abuse and neglect.

Types of Abuse as defined by Care and Support Statutory Guidance

- Physical abuse
- Domestic violence
- Sexual abuse
- Psychological abuse
- Financial or material abuse

- Modern slavery See Modern Slavery Act 2015
- Discriminatory abuse
- Organisational abuse
- Neglect and acts of omission
- Self-neglect

Additional Types of Abuse

- Control
- Coercion
- Stalking
- Honour-Based Violence
- Forced Marriage
- Female Genital Mutilation
- Radicalisation
- Prevent
- Mate Crime
- Cyber Bullying

Please refer to Procedures Section Appendix B - Types of Adult Abuse for more information.

6. Safeguarding Governance

6.1 Trustee oversight

Trustees hold the ultimate legal responsibility for all Danish YWCA in London activities. This includes the effective management of Danish YWCA in London resources, the development and delivery of a long-term strategy and the protection of the charity's reputation and values. Ensuring that robust safeguarding management and reporting processes are in place is, therefore, a vital area of assurance for all Trustees. (Charity Commission Safeguarding Guidance).

To discharge its Safeguarding responsibility, the Board of Trustees will:

- Approve all safeguarding policies and procedures annually.
- Agree content of a risk register relevant to the activities of the Danish YWCA in London.
- Receive an annual safeguarding report from the Designated Safeguarding Officer.
- Ensure effective reporting and auditing processes are in place and that the same are regularly reviewed, e.g., serious incidents to the Charity Commission.
- Ensure adequate resources are available for effective safeguarding training across the organisation and the implementation of safeguarding plans.
- Support the development of an organisational culture that promotes effective safeguarding practices.

The Board may delegate authority on safeguarding matters to the Designated Safeguarding Officer (DSO) and deputy, including an annual review of all safeguarding policies and procedures.

<p>Lead trustee/ Chair of the Board of Trustees</p>
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<p>Name: Steen Rosenfalck</p>

<p>Email: chair@kfuk.co.uk</p>

6.2 Designated Safeguarding Officer & Deputy

The Designated Safeguarding Officer is the Danish YWCA in London's General Manager or Safeguarding Officer. As such, he/she/they take overall ownership of the policy and will promote the importance of child and adult safeguarding within the Danish YWCA in London. The organisation will name a Deputy who will deputise in the absence of the DSO. The DSO will report to the Lead Trustee for safeguarding with any safeguarding and protection issues and report to external authorities beyond the Danish YWCA in London if necessary.

The appointed Designated Safeguarding Officer and deputy will have received a higher level of safeguarding training in line with up-to-date legislation and best practices, and the Charity Commission Safeguarding Standards.

Further responsibilities of the Designated Safeguarding Officer include:

- Develop and implement safeguarding policies and procedures.
- Ensure new starters /volunteers receive safeguarding training as part of their induction, complete the safeguarding declaration and have a DBS check where relevant.
- Advise and guide staff and volunteers who are concerned about safeguarding issues.
- First point of contact for staff and volunteers concerned about the safety and welfare of a child or adult at risk, and on hand to support the development of individual cases.
- Communicate any changes in policy and procedures.
- Record keeping of DBS checks (including reference number and renewal date), and records of any safeguarding issues raised, and actions taken.
- Ensure that the Danish YWCA in London meets any requirements of its insurers and government policy, regarding its safeguarding responsibilities.
- Manage investigations into complaints about poor practice, with the support of external HR advisors and trustees as required.
- Support decisions about appointing a staff or volunteer who has a non-relevant or spent criminal record to the General Manager and the appropriate line manager; and to
- Trigger Safeguarding Procedures as required, including contacting statutory social services care in cases where a child or vulnerable adult is at risk of harm.

6.3 All staff and volunteers

- Staff and volunteers have a shared responsibility to safeguard and promote the welfare of children and adults at risk.
- All staff and volunteers should be alert to the potential abuse of children both within their families and from other sources, including abuse by people involved in our activities.
- Staff and volunteers should know how to recognise and act upon indicators of abuse or potential abuse involving children and adults at risk.
- All staff and volunteers are responsible for reporting any abuse or neglect or suspected abuse or neglect of any child or adults at risk immediately to the Designated Safeguarding Officer.
- In an emergency, staff and volunteers will be expected to report urgent cases directly to statutory agencies. i.e., Police or Ambulance 999.

7. Consent and Capacity

It is a fundamental principle of English law that adults have the right to make decisions on their own behalf and are assumed to have the capacity to do so. This is known as the 'presumption of capacity' and extends to decisions that may entail personal risks, and that may not be in accordance with an objective view of their best interests.

The Danish YWCA in London realises the importance of listening to all children and adults and will always act in their best interest, even if this may mean contradicting their wishes.

There may be times when staff and volunteers will need to act and contact a third party when safety is an overriding concern. The Danish YWCA in London will obtain the contact details of residents' preferred contact if this is the case.

If consent is refused or if someone lacks the capacity to make a decision about contact, then the organisation may still share such information when interventions are needed to protect a resident, their child, or other vulnerable groups. i.e., children and other adults accessing the Danish YWCA in London activities and events.

Any decision made on behalf of a person who lacks capacity will be made in that person's best interest and according to the MCA Code of Conduct.

See Appendix E of these Procedures 'Mental Capacity Act' and [Mental Capacity Act 2005 Code of Conduct](#).

Any sharing of such confidential information will be done in accordance with the Data Protection Act and Common Law Duty of Care. See next Section 8 below.

8. Sharing Information

Information sharing is essential for effective safeguarding and promoting the welfare of children and adults at risk. It is a key factor identified in many serious case reviews (SCRs), where poor information sharing has resulted in missed opportunities to take action that keep children and young people safe.

Danish YWCA in London will share relevant information only where it is lawful and ethical to do so and following the Data Protection Act 2018 and General Data Protection Regulation ("GDPR").

See also:

- [London Safeguarding Children Procedures](#)
- [London Adult Safeguarding Procedures](#)
- Danish YWCA in London Procedures Section Appendix D.

9. Recruitment Selection and Training

Danish YWCA in London will ensure that all trustees, staff and volunteers are safe and trustworthy to work with our residents and their families, as well as other vulnerable individuals that they may come into contact with whilst working for Danish YWCA in London.

The Danish YWCA in London will ensure all trustees are authorised to hold the position and not disqualified by the Charity Commission. See vetting of Trustees rules.

To deter unsuitable individuals from working in our charity and inappropriate behaviour once appointed, we will enforce robust recruitment and selection procedures to promote a safe environment for our residents at the hostel. See also Danish YWCA in London, “General Rules and Code of Conduct.”

We will ensure that the Danish YWCA in London’s trustees, staff and volunteers are suitable and legally able to act in their positions. In doing this, we will consider the following:

- criminal records checks where the position is eligible
- references and checks on gaps in work history,
- Criminal Record Certificates (UK visa application)
- confirmation that staff can work in the UK.

See also the Danish YWCA Risk Assessment with respect to the staff Document.

9.1 Training

Danish YWCA in London identifies that training and raising awareness of safeguarding issues, policies and procedures is fundamental to the development and maintenance of a safe environment, safe organisation, safe residents, and safe staff.

We will also ensure that all current staff and volunteers are trained to the appropriate standards in safeguarding to maintain and promote safer staff, a safer culture, and a safer organisation. The following training model is advised for best practice.

- Level 1 – all staff and employees every 3 years
- Level 2- Managers and DSL every 2 years
- Level 3- Designated Safeguarding Officer and deputy (refresher annually)

Safeguarding training will not be regarded as a 'once only' activity but as an ongoing development of skills and knowledge of safeguarding. Safeguarding refresher training events will be provided at least every three years and in response to staff turnover.

10. Safeguarding Allegations against staff

On occasion, trustees, staff, and volunteers may be the subject of an allegation of abuse or neglect or a concern. Such instances will be rare; however, the Danish YWCA in London will take them seriously, and all suspicions and allegations of abuse will be responded to swiftly and appropriately.

The Danish YWCA in London recognises its duty to report safeguarding concerns (or allegations) against its trustees, staff and volunteers working for the organisation.

It will ensure that residents, their families, and other vulnerable persons are protected from possible abuse or further abuse, and should an allegation be made about a member of staff or volunteer, the Designated Safeguarding Officer will ensure that the alleged victim and other vulnerable people are immediately protected whilst an investigation takes place.

Danish YWCA in London will offer support in these circumstances and refer where appropriate to the Charity's Staff Handbook - disciplinary procedures.

Staff and volunteers should seek the advice of the Designated Safeguarding lead in cases of doubt. It may be very hard for a team member to report a concern about a colleague to a line manager, but, as with all the other difficulties people will come across, the safety and protection of a child or adult at risk must be the priority in any decision that is made.

The Danish YWCA in London will respond to any complaints about poor or dangerous practices. See also section 12 Complaints and section 13 Whistleblowing.

11. Support for staff

The Danish YWCA in London recognises that staff and volunteers who work directly with children and adults at risk are sometimes faced with complex and challenging decisions on some of the most vulnerable members of the community. Involvement in situations where there is risk or actual harm can be stressful for staff concerned.

Danish YWCA in London will provide safe and confidential environments for staff to discuss their work and their personal and professional responses to their work.

Danish YWCA in London will commission external HR Services to support staff which include:

- Debriefing support for paid and unpaid staff so that they can reflect on the issues they have dealt with.
- Seeking further support as appropriate e.g. access to counselling.
- Clinical supervision (routine)

12. Complaints

All complaints that are received about the conduct or behaviour of the Danish YWCA in London trustees, staff or volunteers will be dealt with according to its Complaints Procedure. If a complaint is identified as a potential safeguarding concern, then the Danish YWCA in London will ensure that it is directed through to these Safeguarding Procedures.

13. Whistleblowing

The Public Interest Disclosure Act of 1998 introduced protection for workers from reprisals for disclosing information in the public interest. It emphasises the importance that 'whistleblowing' can play in deterring and detecting malpractice and abuse of children and Vulnerable Adults.

The Danish YWCA in London will promote practical arrangements for whistleblowing to enable its staff and volunteers to voice their concerns, made in good faith, without fear of

repercussion. Any member of staff or volunteer who uses the whistleblowing procedure will be made aware that their employment rights are protected.

Staff members and volunteers will be supported in this individual responsibility to bring matters of concern to the attention of senior management and/or relevant external agencies. This is particularly important where the welfare of children, young people and vulnerable adults may be at risk.

Danish YWCA in London will:

- Ensure it has appropriate whistle-blowing policies in place.
- Ensure that it has clear procedures for dealing with allegations against staff.
- Encourage and support staff and volunteers to report any behaviour by colleagues that raises concern, regardless of source.

14. Quality and Review

The Danish YWCA in London is committed to striving for excellence in the provision of all its services. We do this by regularly reviewing our safeguarding data via quarterly Board meetings and reports.

Our Designated Safeguarding Officer will be responsible for day-to-day monitoring and recording of safeguarding concerns, as well as compliance and is an integral part of the safeguarding governance structure and workings of the Danish YWCA in London.

15. Local Safeguarding Partnerships or Boards (Children and Adults)

The Danish YWCA in London will work with Local Safeguarding Children Partnerships/ Local Safeguarding Adult Boards to promote the welfare of and safeguard children and adults at risk they work with. They will also ensure that its Safeguarding Policies and procedures are based upon and reflect local multi-agency safeguarding policies and procedures.

- [London Safeguarding Children Procedures](#)
- [London Adult Safeguarding Procedures](#)

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1. Introduction

Providing day to day support to vulnerable adults or their children requires vigilance and understanding by all staff and volunteers. These Safeguarding procedures have been developed from Legal requirements, National guidance, and Charity Commission safeguarding standards to help you provide the required level of safeguarding response if the situation arises. You will be expected to use these procedures if you have a concern about a resident, a child or other person accessing Danish YWCA in London activities or events.

Any breach in these safeguarding procedures may make you liable to disciplinary action.

These procedures provide information about your safeguarding responsibilities and include webpage hyperlinks to National guidance and London Multi-agency Safeguarding Procedures.

2. What is Safeguarding?

Safeguarding is the action you are required to take to protect children and adults at risk who come into contact with Danish WYCA services.

Refer to Section 5 of Policy - page 4.

3. How to Recognise a Safeguarding Concern?

The signs of abuse aren't always obvious, and a young person or vulnerable adult might not tell anyone what's happening to them. They might be scared that the abuser will find out and worried that the abuse will get worse. Or they might think that there's no one they can tell or that they won't be believed. Sometimes, individuals don't even realise that what's happening is abuse.

Listing indicators (possible signs and symptoms) of abuse does not provide a failsafe mechanism for identifying abuse, but it can provide helpful indicators of the possibility of abuse. Young people or vulnerable adults may behave strangely or appear unhappy for many reasons, particularly if starting new employment as part of the individual's first major move away from the support of their families and friends. It should be remembered that there may be other explanations for a young person or a vulnerable adult showing such signs or behaviour.

When making difficult judgements around possible signs and symptoms of abuse and neglect, it is crucial that all available information and presenting injuries or behaviours are seen in context. e.g. is the behaviour change a result of a sudden illness? You may have to use your professional judgment to determine if someone is being abused or at risk of abuse.

The list of 'Signs and Symptoms of child abuse' (see Appendix A of these procedures) and Types of Adult abuse (see Appendix B of these procedures) only provides a guide and should not be considered a complete list.

If in doubt, ALWAYS share your concerns with your Designated Safeguarding Officer.

4. How to Respond to a disclosure of abuse?

The signs of abuse are not always obvious, as someone might not tell you what's happening to them. They might be scared that the abuser will find out, and worried that the abuse will get worse. Or they might think that there is no one they can tell or that they will not be believed. Sometimes, individuals do not even realise that what is happening to them is abuse.

Remember, you are not the INVESTIGATOR.

The manner in which an individual responds to someone who makes a disclosure or raises a concern is extremely important. The following checklist can be used as a guide to help you respond appropriately.

Checklist

1. Ensure emergency response is considered - see Emergency Response Action at the end of this section.
2. Listen to the information and accept what you hear without passing judgment or minimising the information.
3. Do not put words into the individual's mouth or make judgmental statements about any person.
4. Consider the individual's age and level of understanding, their culture and use of language.
5. Do not interrogate the individual (it is not your responsibility to investigate), but be calm and reassuring.
6. Do not make promises you cannot keep, e.g. not to tell anyone else.
7. Be clear about what you are going to do next and when.
8. Tell them who you will need to contact, i.e. your Designated Safeguarding Officer
9. Do not promise total confidentiality, but explain that the information will be treated with great care and, where necessary, shared on a 'need to know' basis only to safeguard the individual.
10. Make careful notes, using the Danish YWCA in London Safeguarding Concern form, as soon as you can and include dates, times of the incident and when the recording was made, who was present and sign the notes. Ensure any other written notes are kept securely in the event of them being required in a criminal investigation.
11. Provide the individual with some means to contact you and be clear about how and when you contact them to tell them what will happen next.
12. Where possible, tell the individual you are concerned about who will be the person contacting them as well as timescales, contact numbers and where the contact will take place. e.g. Police officer or social worker.
13. Do not contact the alleged perpetrator or person causing the harm to tell them about the information, you could be putting a child or adult at risk in serious danger, e.g. where there is domestic violence taking place, and it may prejudice any investigation.

Confidentiality

Do not confuse confidentiality with 'secrecy'. It is inappropriate for you to give assurances of absolute confidentiality in situations where there are concerns about abuse.

5. How to report (internally), including emergency situations

5.1 Reporting Emergency Situations: immediate risk of serious harm

Emergency Response - Actions

- **If you believe that a child or adult is at immediate risk of serious harm, then you must ensure their safety by calling 999 for the Police or Ambulance immediately - and then**
- **Report asap to your Designated Safeguarding Officer**

5.2 Reporting non-emergency situations

If you have a concern about a child or adult at risk, or have witnessed abuse, or it has been disclosed to you, then you must report it as soon as possible to the Danish WYCA Designated Safeguarding Officer (or deputy) in person or by telephone and in any event within 24 hours.

The Designated Safeguarding Officer (or deputy) must immediately take any further action necessary to provide protection, support or provide additional care to the individual who may have been harmed.

The Designated Safeguarding Officer (or deputy) will discuss with the individual who has been harmed or who is at risk what actions they consider to be appropriate.

In some circumstances, the adult at risk might not wish any action to be taken or agree to a referral being made on their behalf. In such cases, the Designated Safeguarding Officer or Deputy will consider whether there are reasons for overriding the person's wishes, e.g. the individual lacks capacity, or because it is in the public interest and to prevent further harm.

This could include seeking advice on the correct action to take on an anonymous basis from the Local Authority Safeguarding Adult or Children Teams.

No member of staff or volunteer should assume that someone else will pass on information which they think may be critical to the safety and well-being of a child or adult. If you have a concern about a child or adult's welfare and you believe they are suffering or likely to suffer abuse or neglect, then you should share the information with your Designated Safeguarding Officer or Deputy. They will notify the local authority and or the police if they believe or suspect that a crime has been committed.

Designated Safeguarding Officer

Name: Anne Sogaard Bommersholdt

Contact tel. number: 0207 435 7232

Email: anne@kfuk.co.uk

Deputy Designated Safeguarding Officer

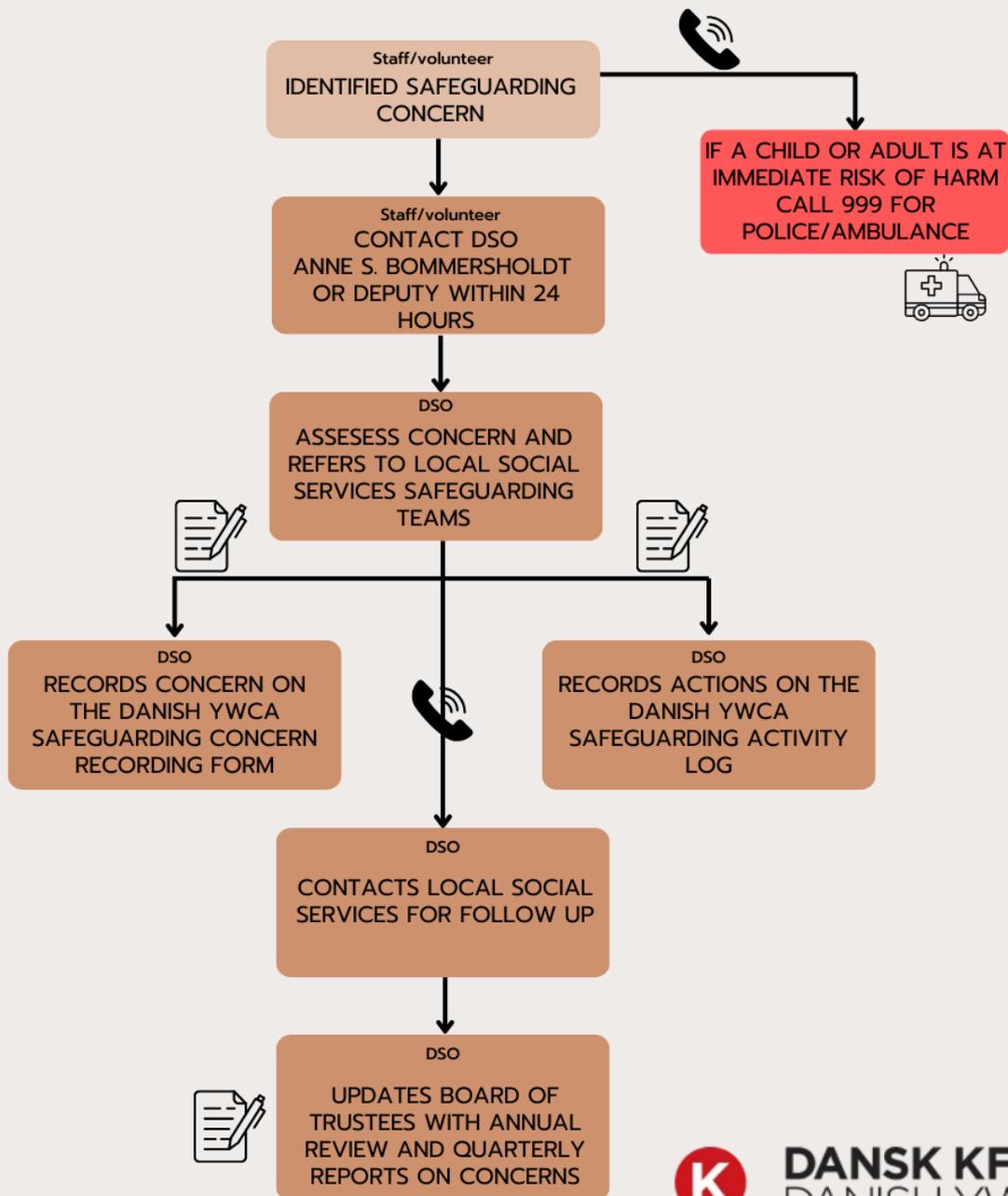
Name: Connie Yilmaz Jantzen

Contact tel. number: 0207 435 7232 or Mob: 0754 736 2534

Email: Connie@kfuk.co.uk

Danish WYCA Safeguarding Reporting - Flowchart

The Danish YWCA Safeguarding Reporting Flowchart



6. How to Refer to Statutory Services? i.e. Social Services and the Police

Normally (i.e., in non-emergency situations), the person responsible for referring Safeguarding concerns to Local Social Services is your Designated Safeguarding Officer (DSO) or deputy.

Your DSO must make the referral by telephone as soon as possible and in any event before the end of the working day.

6.1 Children's Safeguarding

[Children's Safeguarding Contacts London](#)

Barnet

Telephone: 020 8359 4066

Fax: 08715948766

Email: MASH@Barnet.gov.uk

Secure Email: mash@barnet.gcsx.gov.uk

Camden

Telephone: 020 7974 3317 (9.00 am- 5.00 pm)

Out of hours: 020 7974 4444

Email: LBCMASHadmin@camden.gov.uk

Secure email: LBCMASHadmin@camden.gov.uk.cjism.net

6.2 Adult Safeguarding Contacts

Barnet

Social Care Direct on 020 8359 5000 (Monday to Friday, 9 am to 5 pm) or 020 8359 2000 (out of hours).

Camden

Telephone 020 7974 4000 (option 1)

Email: adultsocialcare@camden.gov.uk

A telephone referral will be required to be followed up in writing, using the Authority's relevant online Safeguarding referral form.

Decisions and agreed actions with the Social Services Safeguarding duty manager should be recorded on the Danish WYCA Safeguarding Log, part of your Safeguarding Recording Form. i.e. names, telephone numbers, roles, etc.

It is possible to consult Children's or Adult's Social Services or the Police directly without giving details that would identify the child/adult customer. The advice given may be that a referral must be made; in which case, you must do so immediately. The Local Authority duty manager will advise how to make such a referral (usually via an online form).

The local authority will require detailed information about the person you are concerned about and the source of the harm (or person alleged to have caused harm), and details of the

concern. The local authority will want to know what actions have been taken to assess and manage risk against the individual to ensure they are safe.

The local authority will want copies of body maps, disclosure records, and any other records that have already been gathered to establish if there is a concern.

The Designated Safeguarding Officer is responsible for ensuring that a copy of any completed referral forms is supplied to the allocated Local Authority Safeguarding Team and that a copy is retained on the Danish WYCA secure safeguarding file.

7. How to Record Safeguarding Concerns?

All Safeguarding concerns will be recorded on the Danish WYCA Safeguarding Concern Recording Form - See Appendix F.

The Designated Safeguarding Officer will be responsible for recording concerns on the Danish WYCA Safeguarding Concern Recording Form. This will be completed with the support of the individual who first raised the concern.

Details should include:

- who was involved – the names of key people, including actual or potential witnesses?
- what happened – facts not opinions. Use the person's own words where possible.
- where it happened – specific location and address.
- when it happened – date and time.
- who it was referred to and, if known, what the outcomes were – what happened next, including full names, roles and contact details?
- a signature and date, with the full name printed in capitals next to the signature for clarity.

The DSO will complete the Safeguarding Concern Forms as soon as possible after the event. They should be clear and concise and use the individual's own words. Notes should be relevant and factual, without including opinions, jargon, or judgments. It is not your role to verify or prove that the information given is true.

Safeguarding Activity Log

All decisions and actions taken or made by the DSO should be recorded on the Log part of the Concern Recording form, identifying the persons involved and the date it was made.

If you have made any handwritten notes or records, then you should keep them securely in the event that they are required by investigating authorities.

8. Safeguarding Allegations against staff and volunteers

You must always comply with the Staff Handbook – Code of Conduct.

If you become concerned about another staff member, volunteer, or trustee (either as a potential victim or abuser), then you should report the matter to your Designated Safeguarding Officer (DSO) immediately. Such concerns may include:

- a member of staff or volunteer calling a customer an offensive or discriminatory name.
- a colleague who is being repeatedly abused by a partner and has children living with him/her.
- a colleague taking large amounts of money or gifts from a frail customer.
- a trustee developing a sexual relationship with a resident.

If you are concerned about your DSO, then this must be reported to the Chair of the Board of Trustees.

All safeguarding concerns about trustees, staff or volunteers will be dealt with in the same way as with all other safeguarding concerns using the Danish WYCA Safeguarding Procedures.

Sometimes, making reports about colleagues can be very difficult, and you may wish to make such a report through your confidential whistleblowing arrangements below.

9. Whistleblowing

See also Section 13 in the above Policy and The Danish YWCA in London's Whistleblowing Policy.

What is a whistleblower?

You're a whistleblower if you're a worker and you report certain types of wrongdoing. This will usually be something you've seen at work - though not always.

The wrongdoing you disclose must be in the public interest. This means it must affect others, for example, the public.

As a whistleblower, you're protected by law - you should not be treated unfairly or lose your job because you 'blow the whistle'.

You will be supported in this individual responsibility to bring matters of concern to the attention of senior management and/or relevant external agencies. This is particularly important where the welfare of children, young people and vulnerable adults may be at risk.

You can raise your concern at any time about an incident that happened in the past, is happening now, or you believe will happen in the near future.

You should report all whistleblowing issues to the Danish WYCA General Manager or their deputy. If the issue is about the General Manager or deputy, then you should report your concern to the Chair of the Board of Trustees.

All Safeguarding concerns raised via the 'whistleblowing' pathway must be referred to the Designated Safeguarding Officer for consideration and assessment.

National Whistleblowing Helpline - the NHS whistleblowing helpline was extended in 2012 to staff and employers in the social care sector. The helpline number is 08000 724 725, and further information can be found on the website.

10. Consent and Capacity

Adults should be able to make their own decisions about what they do or don't do. However, occasionally, some adults do NOT make the best decisions when it comes to their own safety.

This can be because they

- are in a relationship with the abuser or
- are under duress not to act or
- lack the capacity to make a decision.

If you have a concern about the abuse or neglect of an adult resident/customer, then you must ask for their consent (if safe to do so) before referring your concern to an external agency. i.e., to Social Service or the Police.

Do not try to seek consent.

If you believe that someone may be at increased risk by seeking their consent, then you do not need to do so. However, you must record your reasons for not seeking consent. i.e. that they have told you that they will harm themselves or run away.

If you have a concern about an adult who is unable to make a specific decision (i.e., to get help) and that lack of ability to make a decision puts them at risk, you may have to tell someone else without their consent to get them help.

This could be because they don't understand how to get help, are confused or could even be suffering from a temporary mental health condition.

You should support the individual to get help for themselves in the first instance, but where this is not practical, you should contact your Designated Safeguarding Officer (DSO) as soon as possible for advice. They will advise you regarding any contact you need to make with the person's family, GP, Adult Social Services, or the police.

Best Interest Decisions

If you need to make a decision on behalf of another adult, i.e. whether to contact the Police or social services, then you should follow the Principles of the [Mental Capacity Act Code of Practice](#) and use the Best Interest Checklist to guide your decision-making.

See Appendix E of these Procedures for more information.

11. Storage of Safeguarding Records

All Safeguarding Concern Recording Forms contain confidential information and should be securely filed in an electronic safeguarding folder on the Danish WYCA.

Access to all safeguarding files will be based on 'tiered' access levels. Access to safeguarding files will be made available to the designated Safeguarding Lead, deputy, and any other relevant member of staff on a 'need to know' basis.

Processing of confidential safeguarding data will comply with GDPR 2018 guidance and is detailed in the Danish YWCA in London Privacy Policy.

Please also refer to the latest guidance issued by [NSPCC on storage of safeguarding records](#) and the Danish YWCA in London Privacy Policy. If in doubt, seek advice and guidance from your data controller.

Appendices - Supporting information.

Appendix A: Possible Signs and Symptoms of Child Abuse

Lists of possible signs and symptoms of abuse must never be considered to be comprehensive or definitive 'checklists' as children and young people may behave strangely or appear unhappy or distressed for several reasons as they move through the stages of development, and as their family circumstances and experiences change. Neither does the presence of one or more of the commonly cited possible signs and symptoms prove that a child has been or is being abused. (We need to be absolutely clear that our role is not to investigate or prove abuse, but to observe, gather and share information where we have concerns.

You should also remember that all children, regardless of age, sex, ethnicity, disability, race or culture, are entitled to the same level of protection and, as such, racial, cultural, religious or similar factors can never be used to 'explain' or justify abuse or maltreatment.

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in, a child.

Most children and young people will collect cuts and bruises as part of the rough-and-tumble of daily life. Injuries should always be interpreted considering the child's medical and social history, developmental stage and the explanation given. Most accidental bruises are seen over bony parts of the body, e.g. elbow, knees, and shins, and are often on the front of the body. Some children, however, will have bruising that is more than likely inflicted rather than accidental.

Important indicators of physical abuse are bruises or injuries that are either unexplained or inconsistent with the explanation given, or visible on the 'soft' parts of the body where accidental injuries are unlikely, e.g. cheeks, abdomen, back and buttocks. A delay in seeking medical treatment when it is obviously necessary is also a cause for concern, although this can be more complicated with burns, as these are often delayed in presentation due to blistering taking place sometime later.

The physical signs of abuse may include:

- Unexplained bruising, marks, or injuries on any part of the body
- Multiple bruises- in clusters, often on the upper arm, outside of the thigh
- Cigarette burns
- Human bite marks
- Broken bones
- Scalds, with upward splash marks,
- Multiple burns with a clearly demarcated edge.

Changes in behaviour that can also indicate physical abuse:

- Fear of parents being approached for an explanation.
- Aggressive behaviour or severe temper outbursts
- Flinching when approached or touched.

- Reluctance to get changed, for example, in hot weather.
- Depression
- Withdrawn behaviour.
- Running away from home

Emotional abuse

Emotional abuse is the persistent emotional 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 needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children to frequently feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Emotional abuse can be difficult to measure, as there are often no outward physical signs. There may be a developmental delay due to a failure to thrive and grow, although this will usually only be evident if the child puts on weight in other circumstances, for example, when hospitalised or away from their parents' care. Even so, children who appear well-cared for may nevertheless be emotionally abused by being taunted, put down or belittled. They may receive little or no love, affection or attention from their parents or carers. Emotional abuse can also take the form of children not being allowed to mix or play with other children.

Changes in behaviour which can indicate emotional abuse include:

- Neurotic behaviour, e.g. sulking, hair twisting, rocking.
- Being unable to play
- Fear of making mistakes
- Sudden speech disorders
- Self-harm
- Fear of parents being approached regarding their behaviour.
- Developmental delay in terms of emotional progress

Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether 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 in 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). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

We have become increasingly aware of the criminal activity of viewing or downloading abusive images of children from the Internet. This is not a “victimless” crime but is both evidence of abuse taking place and is a criminal offence. It should be reported as a concern in all cases.

Adults who use children to meet their own sexual needs abuse both girls and boys of all ages, including infants and toddlers. Usually, in cases of sexual abuse, it is the child’s behaviour that may cause you to become concerned, although physical signs can also be present. In all cases, children who tell about sexual abuse do so because they want it to stop. It is important, therefore, that they are listened to and taken seriously.

The physical signs of sexual abuse may include:

- Pain or itching in the genital area.
- Bruising or bleeding near the genital area
- Sexually transmitted disease
- Vaginal discharge or infection
- Stomach pains
- Discomfort when walking or sitting down.
- Pregnancy

Changes in behaviour which can also indicate sexual abuse include:

- Sudden or unexplained changes in behaviour, e.g. becoming aggressive or withdrawn.
- Fear of being left with a specific person or group of people.
- Having nightmares
- Running away from home
- Sexual knowledge which is beyond their age or developmental level
- Sexual drawings or language
- Bedwetting
- Eating problems such as overeating or anorexia
- Self-harm or mutilation, sometimes leading to suicide attempts.
- Saying they have secrets they cannot tell anyone about
- Substance or drug abuse
- Suddenly having unexplained sources of money
- Not allowed to have friends (particularly in adolescence)
- Acting in a sexually explicit way towards adults

Child Sexual Exploitation

Working Together to Safeguard Children 2018 describes Child Sexual Exploitation as 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 may also occur using technology, e.g., phones, computers, tablets, etc.

Sexual exploitation of children involves exploitative situations, contexts, and relationships where young people (or a third person or persons) receive 'something' (e.g., food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur using technology without the child's immediate recognition; for example, being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion, and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability (UK National Working Group for Sexually Exploited Children and Young People (NWG) and is used in statutory guidance for England.)

See also [Child sexual exploitation: definition and guide for practitioners 2017](#)

Neglect

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 mental and physical health or development. Neglect may occur during pregnancy as a result of maternal substance abuse.

Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing, and shelter (including exclusion from home or abandonment).
- protect a child from physical and emotional harm or danger.
- ensure adequate supervision (including the use of inadequate caregivers); or
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. Neglect can be a difficult form of abuse to recognise yet have some of the most lasting and damaging effects on children.

The physical signs of neglect may include:

- Constant hunger, sometimes stealing food from other children and young people.
- Constantly dirty or 'smelly'
- Loss of weight, or being constantly underweight
- Inappropriate clothing for the conditions.

Changes in behaviour which can also indicate neglect may include:

- Complaining of being tired all the time.
- Not requesting medical assistance and/or failing to attend appointments.
- Having few friends
- Mentioning being left alone or unsupervised.

Bullying

Bullying is not always easy to recognise as it can take several forms. A child may encounter bullying attacks that are:

- physical: pushing, kicking, hitting, pinching and other forms of violence or threats.
- verbal: name-calling, sarcasm, spreading rumours, persistent teasing.
- emotional: excluding (sending to Coventry), tormenting, ridiculing, humiliating.

Persistent bullying can result in:

- depression
- low self-esteem
- shyness
- poor academic achievement
- isolation
- threatened or attempted suicide

These definitions and indicators are not meant to be definitive but only serve as a guide to assist you. It is important, too, to remember that many children may exhibit some of these indicators at some time, and that the presence of one or more should not be taken as proof that abuse is occurring. There may well be other reasons for changes in behaviour, such as a death or the birth of a new baby in the family, or relationship problems between parents/carers. In assessing whether indicators are related to abuse or not, the authorities will always want to understand them in relation to the child's development and context.

Cyber Bullying

This is a form of bullying which uses technology to deliberately harm or upset others. This type of bullying can happen in many ways, using mobile phones or the internet and could include:

- Sending hurtful messages or using images
- Leaving malicious voicemails
- A series of silent calls
- Creating a website about other people to humiliate them.
- Exclude them from chat/messaging rooms/areas.
- 'Happy slapping'- sending video/images of people being bullied, so others can see.

Bullies might be using this form of bullying because it's very difficult to trace the sender.

County Lines

As set out in the Serious Violence Strategy, published by the Home Office, a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other forms of 'deal line'. They are likely to exploit children and adults at risk to move and store the drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons.

Child criminal exploitation

The Serious Violence Strategy 2018 published by the Home Office sets out where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person into any criminal activity (a) in exchange for something the victim needs or wants and/or (b) for the financial or other advantage of the perpetrator or

facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can occur using technology.

Extremism

Extremism goes beyond terrorism and includes people who target the vulnerable – including the young – by seeking to sow division between communities based on race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society. Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist.

The impact of Covid 19 on child abuse

The NSPCC have conducted research into the effect of Covid 19 restrictions on child abuse. By understanding the scale and the risks brought by lockdown, professionals can begin to think about how to mitigate them and ensure children are kept safe while at home, online and as restrictions start to ease.

They identified that the following areas may intensify:

- Increase in stressors to parents and caregivers.
- The research we reviewed confirms that the risk of child abuse is higher when caregivers become overloaded by the stressors in their lives. There are indications that the coronavirus pandemic has increased stressors on caregivers.

Increase in children and young people's vulnerability.

There are indications that the conditions caused by the coronavirus pandemic have heightened the vulnerability of children and young people to certain types of abuse, for example, online abuse, abuse within the home, criminal exploitation, and child sexual exploitation.

Reduction in normal protective services

There is evidence that the 'normal' safeguards we rely on to protect children and young people have been reduced during the pandemic. However, social connections and social support can provide a protective effect for children's safety and well-being.

For more information, see NSPCC Briefing Paper.

More information about possible signs and symptoms of the four categories of abuse is also contained within your local Safeguarding Children Procedures. [London Safeguarding Children Procedures](#)

Appendix B: Types of Adult Abuse

The principles should inform the ways in which the Danish YWCA in London staff and volunteers work with adults who come into contact with our charity.

Empowerment – People being supported and encouraged to make their own decisions and give informed consent.

“I am asked what I want as the outcomes from the safeguarding process, and these directly inform what happens.”

Prevention – It is better to act before harm occurs.

“I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”

Proportionality – The least intrusive response appropriate to the risk presented.

“I am sure that the professionals will work in my interest, as I see them, and they will only get involved as much as needed.”

Protection – Support and representation for those in greatest need.

“I get help and support to report abuse and neglect. I get help so that I can take part in the safeguarding process to the extent to which I want.”

Partnership – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

“I know that staff treats any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”

Accountability – Accountability and transparency in delivering safeguarding.

“I understand the role of everyone involved in my life, and so do they.”

Types of Abuse – [Care and Support Statutory Guidance](#)

Physical abuse. Including assault, hitting, slapping, pushing, misuse of medication, restraint, or inappropriate physical sanctions.

Domestic violence. Including psychological, physical, sexual, financial, and emotional abuse; so-called ‘honour’ based violence - see more information below this list.

Sexual abuse. Including 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.

Psychological abuse. Including 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.

Financial or material abuse. Including 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 misuse or misappropriation of property, possessions, or benefits.

Modern slavery. Encompasses slavery, human trafficking, 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. See Modern Slavery Act 2015 Guidance.

Discriminatory abuse, including forms of harassment, slurs, or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.

Organisational abuse. Including neglect and poor care practice within an institution or specific care setting, such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one-off incidents to ongoing ill-treatment. It can be through neglect or poor professional practice because of the structure, policies, processes, and practices within an organisation.

Neglect and acts of omission. Including ignoring medical, emotional, or physical care needs, failure to provide access to appropriate health care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition, and heating.

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

Other types of abuse

Stalking. A pattern of unwanted, fixated, and obsessive behaviour which is intrusive and causes fear of violence or serious alarm or distress (Paladin 2018).

Coercive behaviour. An act or a pattern of acts of assault, threats, humiliation, intimidation or other abuse that is used to harm, punish, or frighten their victim. *

Honour-Based Violence. A crime or incident, which has or may have been committed to protect or defend the honour of the family and/or community.

This definition is supported by further explanatory text: "Honour-Based Violence" is a fundamental abuse of Human Rights. There is no honour in the commission of murder, rape, kidnap and the many other acts, behaviour and conduct which make up "violence in the name of so-called honour".

It is a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.

Women are predominantly (but not exclusively) the victims of 'so-called honour-based violence', which is used to assert male power to control female autonomy and sexuality. Honour Based Violence can be distinguished from other forms of violence, as it is often committed with some degree of approval and/or collusion from family and/or community members (NPCC & CPS).

Forced Marriage. Marriage conducted without the valid consent of one or both parties, where duress is a factor. Forced marriage is a violation of human rights and is contrary to UK law. A forced marriage is a marriage in which one or both spouses do not (or, in the case of some adults with learning or physical disabilities, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual, and emotional pressure.

Female Genital Mutilation (FGM). Comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue and hence interferes with the natural function of girls' and women's bodies. The practice causes severe pain and has several immediate and long-term health consequences, including difficulties in childbirth, also cause dangers to the child.

Radicalisation. Refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism (H.M. Gov, 2011). See also Procedures Section Appendix C on Prevent.

Mate Crime. A 'mate crime' as defined by the Safety Net Project is 'when vulnerable people are befriended by members of the community who go on to exploit and take advantage of them. It may not be an illegal act, but it still harms the individual.' Mate Crime is carried out by someone the adult knows and often happens in private. In recent years, there have been several Serious Case Reviews relating to people with a learning disability who were murdered or seriously harmed by people who purported to be their friends.

Cyber Bullying. Cyberbullying occurs when someone repeatedly makes fun of another person online or repeatedly picks on another person through emails or text messages, or uses online forums with the intention of harming, damaging, humiliating, or isolating another person. It can be used to carry out many different types of bullying (such as racist bullying, homophobic bullying, or bullying related to special educational needs and disabilities), but instead of the perpetrator carrying out the bullying face-to-face, they use technology to do it.

For more detailed guidance for London, see [London Safeguarding Adults Board](#) procedures.

Appendix C: Prevent Duty

The Channel Programme provides a mechanism for supporting those who may be vulnerable to violent extremism by assessing the nature and the extent of the potential risk and, where necessary, providing an appropriate support package tailored to an individual's needs. A multi-agency panel decides on the most appropriate action to support individuals, taking their circumstances into account.

A programme which uses a multi-agency approach to protect vulnerable people by:

- identifying individuals at risk.
- assessing the nature and extent of that risk; and
- developing the most appropriate support plan for the individuals concerned

Section 26 of the Counterterrorism and Security (CT&S) Act 2015 places a duty on Local Councils in the exercise of their functions to have "due regard to the need to prevent people from being drawn into terrorism.

It also places a duty to co-operate on all partners of a panel to assist the police and the panel in carrying out their functions under the CT&S Act.

Prevent Duty

The Prevent duty has three specific strategic objectives:

1. Respond to the ideological challenge of terrorism and the threat we face from those who promote it.
2. Prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support; and
3. Work with sectors and institutions where there are risks of radicalisation that we need to address.

Indicators

- Use of inappropriate language.
- Possession or accessing violent extremist literature.
- Behavioural changes.
- The expression of extremist views.
- Advocating violent actions and means.
- Association with known extremists.
- Articulating support for violent extremist causes or leaders.
- Using extremist views to explain personal disadvantage.
- Joining or seeking to join extremist organisations.
- Seeking to recruit others to an extremist ideology.

The Channel Police Practitioner (CPP) is responsible for coordinating Channel in their area and is responsible for:

- managing referrals and cases through the Channel process

- ensuring that referrals that are dealt with swiftly, and brought to the
- attention of the Channel panel as soon as possible.
- increasing understanding of Channel amongst panel partners and others.
- establishing effective relationships with panel partners, and others who can deliver support; and
- managing any risk associated with potential involvement in terrorist-related activity.

All concerns about children or adults at risk being drawn into violent extremism or terrorism should be referred to the Local Police Channel Coordinator or single point of contact: 101 or 999 in an emergency.

Appendix D: Sharing Information

The General Data Protection Regulation (GDPR) and the Data Protection Act 2018 introduce new elements to the data protection regime, superseding the Data Protection Act 1998. Practitioners must have due regard to the relevant data protection principles, which allow them to share personal information.

The GDPR and Data Protection Act 2018 place greater significance on organisations being transparent and accountable in relation to their use of data. All organisations handling personal data need to have comprehensive and proportionate arrangements for collecting, storing, and sharing information.

The GDPR and Data Protection Act 2018 do not prevent or limit the sharing of information for the purposes of keeping children and young people safe.

To effectively share information:

- All practitioners should be confident of the processing conditions, which allow them to store and share the information that they need to carry out their safeguarding role. Information which is relevant to safeguarding will often be data which is considered 'special category personal data', meaning it is sensitive and personal.
- Where practitioners need to share special category personal data, they should be aware that the Data Protection Act 2018 includes 'safeguarding of children and individuals at risk' as a condition that allows practitioners to share information without consent.
- information can be shared legally without consent, if a practitioner is unable to, cannot be reasonably expected to gain consent from the individual, or if gaining consent could place a child at risk.
- relevant personal information can be shared lawfully if it is to keep a child or individual at risk safe from neglect or physical, emotional or mental harm, or if it is protecting their physical, mental, or emotional well-being.

Danish YWCA in London will follow the Seven Golden Rules for Sharing Information

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing but provide a framework to ensure that personal information about living individuals is shared appropriately.
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 judgment, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgment on the facts of the case. When you are sharing or requesting personal information from someone, be clear about 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.

For more information, please see - [Information sharing Advice for practitioners Guidance](#) and Danish YWCA in London Privacy Policy.

Appendix E: Consent and Capacity

We must assume that adults have the mental capacity to make informed decisions about their own safety and how they live their lives, unless an assessment says that someone does not have capacity. The Mental Capacity Act 2005 is central to decisions and actions in safeguarding adults. The Mental Capacity Act 2005 applies to individuals 16 years and older.

If a child can understand the significance and consequences of making a referral to Children's Services, they should be asked their view. However, it should be explained to the child that whilst their view will be considered, you have a responsibility to take whatever action is required to ensure the child's safety, and the safety of other children. If a child is at risk of or experiencing harm, abuse and/or neglect, and the alleged abuser is not a parent/caregiver, a discussion will need to be held with the child/young person regarding informing the parent/caregiver of the allegation/disclosure. This is to allow the parent/caregiver an opportunity to protect the child and young person from harm. Before disclosing anything to the parent/caregiver, it must be clear that these individuals are not complicit in the alleged abuse and/or neglect.

In cases of proven or suspected incapacity, the Designated Safeguarding Officer or Deputy will act in accordance with the "best interests" principle following the checklist in the MCA code of practice. You may wish to obtain the services of an independent advocate or another independent representative to elicit the client's views and wishes.

Mental Capacity Act - Making decisions for others.

Basic principles

Decisions and actions carried out under the Mental Capacity Act 2005 should be tested against the 5 key principles set out below.

The five key statutory principles are:

1. A person must be assumed to have capacity unless it is established that they lack capacity.
2. A person is not to be treated as unable to make a decision unless all practicable steps to help him to do so have been taken without success.
3. A person is not to be treated as unable to make a decision merely because he makes an unwise decision.
4. An act done, or a decision made, under this Act for or on behalf of a person who lacks capacity must be done, or made, in his best interests.
5. Before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

Mental Capacity Test

To help determine if a person lacks capacity to make decisions, the Act sets out a two-stage test of capacity.

Stage 1: Does the person have an impairment of, or a disturbance in the functioning of, their mind or brain?

Stage 1 requires proof that the person has an impairment of the mind or brain, or some sort of or disturbance that affects the way their mind or brain works. If a person does not have such an impairment or disturbance of the mind or brain, they will not lack capacity under the Act.

Stage 2: Does the impairment or disturbance mean that the person is unable to make a specific decision when they need to?

For a person to lack capacity to make a decision, the Act says their impairment or disturbance must affect their ability to make the specific decision when they need to. But first people must be given all practical and appropriate support to help them make the decision for themselves.

Stage 2 can only apply if all practical and appropriate support to help the person make the decision has failed.

What does the Act mean by ‘inability to make a decision’?

A person is unable to make a decision if they cannot:

1. Understand information about the decision to be made (the Act calls this ‘relevant information’)
2. retain that information in their mind.
3. use or weigh that information as part of the decision-making process, or
4. communicate their decision (by talking, using sign language or any other means).

The first three should be applied together. If a person cannot do any of these three things, they will be treated as unable to make the decision. The fourth only applies in situations where people cannot communicate their decision in any way.

Refer to the [MCA Code of Practice](#) for further information.

All mental capacity decisions should be recorded on a Safeguarding Concern Recording Form - Log

Independent Mental Capacity Advocates

An independent mental capacity advocate (IMCA) must be instructed for people in the following circumstances.

- The person is aged 16 or over.
- A decision needs to be made about either a long-term change in accommodation or serious medical treatment,
- The person lacks capacity to make that decision, and
- There is no one independent of services, such as a family member or friend, who is “appropriate to consult”.

An IMCA may also be provided to people for other decisions concerning:

- Care Reviews, or
- Adult Safeguarding / Protection

In adult protection cases, an IMCA may be instructed even where family members or others are available to be consulted.

<https://www.scie.org.uk/publications/guides/guide32/>

Instructing Independent Mental Advocate (IMCA)

There is a legal duty to refer vulnerable people who may lack the capacity to make critical decisions to the Independent Mental Capacity Advocate (IMCA) service. Contact details of local IMCA services can be accessed via the [Find an IMCA page](#):

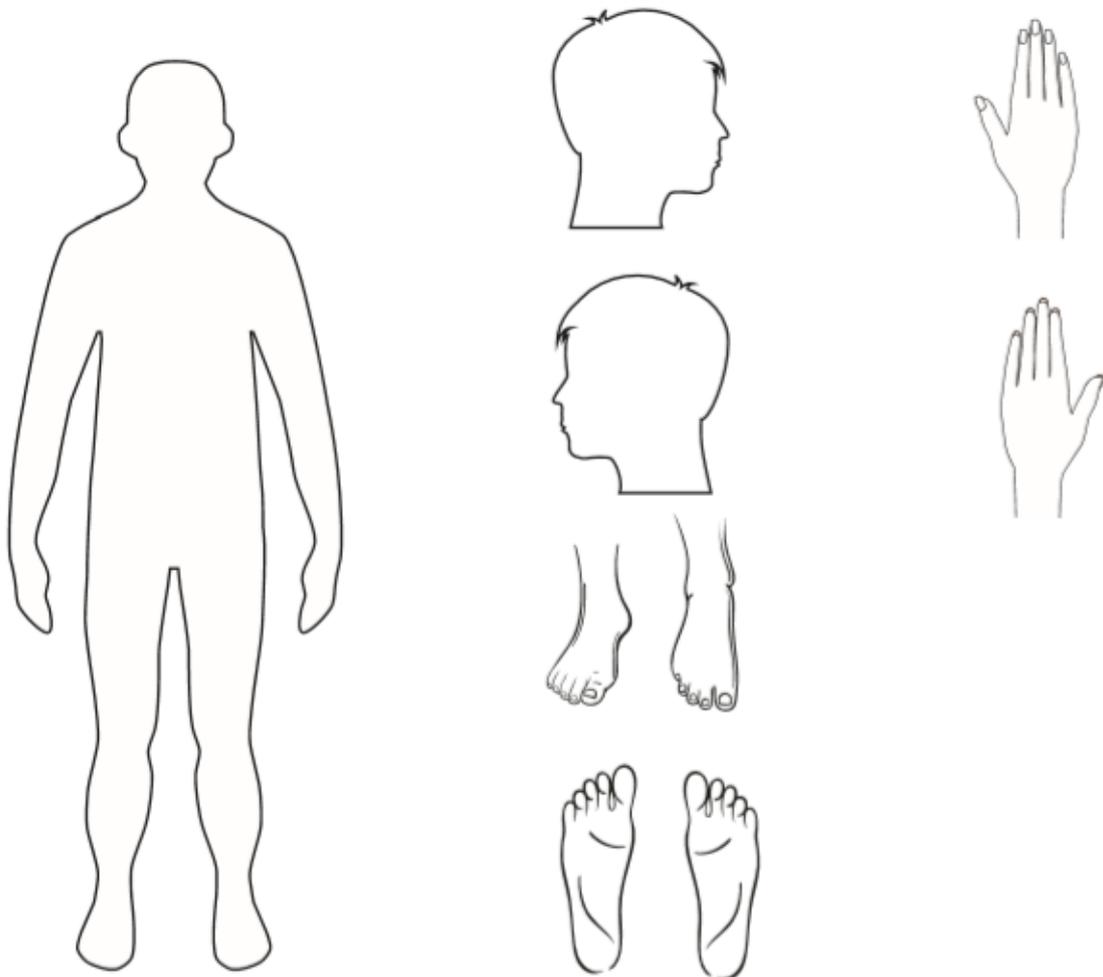
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Once completed, this form should be emailed to
Connie@kfuk.co.uk

Body Chart

Name of child/adult

This chart must be used together with the Safeguarding Concern Reporting Form
You should show clearly the location of your concern and label it with a number and a
brief description, e.g. "1. Burn about 4cm" on the Safeguarding Concern Form, refer
to the injury using the same number and description.



Notes

Guidance on completing the Safeguarding Concern Form

This concern form must be completed in full and on time. The details are important. It is the responsibility of the Designated Safeguarding Office to complete.

- Enter all the details, including date of birth (this will be asked for when a safeguarding referral is made to either Social Services or the police)
- Include full names (not initials)
- Make sure the concern is given in detail using the words of the child/adult about whom the concern is.
- Don't report what other people have told you – write only what you know.
- Only write about one child/adult on each form
- Remember that concern forms are used in court cases and inquests as primary documents – so they must be complete, factual, and accurate.
- Make sure you use the Danish YWCA in London Safeguarding Concern Recording Form to record your concern. Try not to use any other forms, or simply a piece of paper.
- If you jotted your notes down on a piece of paper whilst talking to the child/adult or immediately afterwards, retain, keep secure or scan and electronically retain securely.
- Once completed, the Safeguarding Concern Form should be saved securely to the Danish YWCA in London's electronic files.
- Finally, ensure you sign, date and time the concern form.

Safeguarding Log

This information is gathered to provide an overview of the nature of concerns and details of significant professional interventions.

Date & Time	Nature of contact, including name of person(s)	Key issues discussed & actions agreed or taken in response	Further details in the file? Y/N	Signature and role of the record keeper

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