

**Articles**

[**SAFEGUARDING POLICY**](http://streetvibes.org/index.php/component/content/article/13-policies/30-safeguarding-policy)

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**SAFE GUARDING POLICY**

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**Introduction**

**MFYP Ltd’s Safeguarding Policy Statement**

MFYP Ltd believes every child or vulnerable adult regardless of gender, ethnicity, disability, sexuality or religion deserves to be comfortable and secure in his or her activities. Their carers, family or friends also need to feel sure that the people in charge of these activities are trustworthy, responsible and will do everything they can to keep the vulnerable adult or child safe from harm. We also recognise that anyone may become vulnerable at some stage in his or her life. They may require extra support in the face of difficult situations such as ill health, bereavement, divorce, loss of income, or other challenges.

MFYP Ltd also wants to avoid putting its employees in positions where abuse might be alleged, and to ensure that all workers know exactly what to do should abuse be suspected.  We will enable all our employees and those who work with us to make informed and confident decisions regarding safeguarding issues and take all suspicions and allegations of abuse seriously.

 MFYP Ltd expects all its employees, clients, placement providers, delivery partners and other stakeholders to observe the requirements of this Policy and managers to ensure their continued compliance.

‘Safeguarding’ and ‘protection’ – what’s the difference?

‘Safeguarding’ is the word that applies to all the work an organisation does to provide a safe, positive and friendly environment for its customers. It means actively seeking to involve the whole community in keeping customers safe and promoting their welfare. In this sense, ‘safeguarding’ is anticipatory and preventative and is everyone’s responsibility.

‘Protection’ is a central part of safeguarding and promoting welfare. It is the process of protecting individual customers identified as either suffering or at risk of suffering significant harm as a result of abuse or neglect. In this sense, ‘protection’ refers to the procedures that come into force when there is a particular concern or incident. Protection is a statutory responsibility.

Good safeguarding helps to reduce the need for protection, but it is vital to have rigorous and clear procedures in place in case a problem arises. If a service user suggests that they are being abused or if someone reports abuse or bad practice that could put a person’s welfare at risk, these procedures must be understood and followed by everyone involved.

 Review of this Policy

A Safeguarding Steering Group has been established to assist in developing and updating the Safeguarding Policy and to positively promote the arrangements contained within it throughout the organisation.

This Policy will be reviewed and updated every 12 months or more frequently should new information be received, or should current procedures require review.

Aims and Scope of this Policy

The aim of this policy is to give a clear statement of MFYP Ltd’s approach to

Safeguarding including;

* The roles and responsibilities of all staff in the prevention and report of abuse
* The associated Policies and procedures in place which support this aim
* How MFYP Ltd will embed the principles of Safeguarding through their associated policies and procedures

This policy provides a generic framework, but it is recognised that specific service delivery may require additional guidelines and procedures.

 Roles and Responsibilities

We expect everyone, staff, board, partners, agency staff, volunteers and anyone working on behalf of MFYP to have read, understood and adhere to this policy as well as related policies and procedures.

Board of Directors

MFYP Ltd’s Board of Directors takes full and final responsibility for:

* Integrating Safeguarding into our advice to all our clients.
* Ensuring that any sub-contractors that we employ take account of Safeguarding in their activity.
* Ensuring that all our staff are fully aware of this policy.
* Ensuring that we meet all our legal responsibilities.
* Ensuring that we are continuously updating our practices with the most recent information and guidance

All Employees

All employees including volunteers, temporary staff and those working on behalf of MFYP Youth Arts CIC are responsible for;

* Taking personal responsibility for Safeguarding
* Co-operating fully with this policy and its associated procedures

Designated Safeguarding Officers

MFYP Ltd will appoint a designated officer and deputy designated officer who will be responsible for overseeing Safeguarding issues:

* They will undertake training and keep updated on Safeguarding issues and be the first point of contact for advice and support if a Safeguarding issue occurs.
* They also will have knowledge of reporting procedures for incidents should they occur.
* Each of these Safeguarding Officers will look to form links to Local Authority Safeguarding Boards and ensure MFYP Ltd’s reporting procedures are aligned.

It is not the role of the Designated Safeguarding Officer or MFYP Ltd to decide whether abuse has taken place or not. The responsibility of the Designated Safeguarding Officer is to ensure that concerns are shared and appropriate action taken.

MFYP Ltd Safeguarding Officers will ensure that the Policy and associated procedures are continually reviewed and embedded throughout the organisation. Their contact details are:

Designated Safeguarding Officer

Name: Mr Deon Roach

Tel: Include office no / mobile: 0161 222 6454, 0781 517 9984

Email: info@mfyp.org

Deputy Designated Safeguarding Officer

Name: Miss Diane Roach

Tel: 0161 222 6454, 07939 958 248

Email: info@mfyp.org

The Designated and Deputy Designated Safeguarding Officers will cover for each other if required to ensure full coverage for Safeguarding issues throughout MFYP Ltd at all times.

 Safe Recruitment Procedures

When advertising positions MFYP Ltd will advise applicants for regulated positions that they will be required to undertake a CRB check and should be registered with the ISA or be willing to be registered.

All paid staff and volunteers who may come into contact with children and vulnerable adults will be subject to the full range of standard pre-employment checks, including:

* Identity
* Employment checks (taking up of references)
* Right to work in the UK (asylum and immigration)
* Criminal Records Bureau (CRB)
* Independent Safeguarding Authority (ISA) for those working in a regulated activity (see Appendix A for definition)

All new employees receive an induction programme that covers their responsibilities as employees, the company’s responsibilities to them in respect of all aspects of their employment, training, development, equal treatment, health and safety and their responsibility to others, including safeguarding.  Safeguarding training is mandatory for all regulated roles and forms part of MFYP’s Ltd formal training programme which is evaluated, monitored and kept under review:

* All staff and volunteers will be given details of this policy and training in Safeguarding issues as part of their induction.
* Refresher training will take place annually in order to keep staff up to date and ensure that Safeguarding issues remain a priority.
* MFYP Ltd staff and volunteers will also have relevant health and safety procedures detailed to them as part of their induction.

MFYP Ltd will take a whole organisation approach to safeguarding with targeted activities and communications that take into account the needs of staff, customers, parents and carers. This may include supplying information in differing formats to ensure information and guidance is clearly understood and accessible to all.

Safeguarding is a standing item for all team meetings, ensuring that issues are proactively discussed and considered on a regular basis.

Vulnerable Adults

Recognition of Vulnerable Adult Abuse

The Department of Health (2000) defines a vulnerable adult as: Any person aged 18 or over ‘who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation’.

 Physical Abuse

Including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.

 Sexual Abuse

Including rape or sexual assault or sexual acts, to which the vulnerable person has not consented, or could not consent 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, isolation or withdrawal from services or supportive networks.

 Financial Abuse

Including theft, fraud, exploitation, pressure in connection with wills, property or inheritance of financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Neglect and acts of omission

Including 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.

Discriminatory

Including racist, sexist, that based on a person’s disability, and other forms of harassment, slurs or similar treatment.

 Abuse caused by poor care or by poor practice

Poor professional practice also needs to be taken into account. This may take the form of isolated incidents of poor or unsatisfactory professional practice, at one end of the spectrum, through to pervasive ill treatment or gross misconduct at the other.

In all these incidences it is useful to examine,

•     The impact on the victim or others, i.e. has s/he been caused unacceptable distress, pain, loss, a hospital admission or serious trauma

•     The intention of the suspected perpetrator. Was it a genuine mistake or an act of avoidable ignorance?

 •    The institutionalising pattern of the actions. Repeated incidents of poor care may be an indication of more serious problems and this is sometimes referred to as institutional abuse.

**Recognition of Child Abuse or Neglect**

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger. They may be abused by an adult or adults, or another child or children.

 **Physical Abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or 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.

 **Emotional Abuse**

Emotional abuse is the persistent emotional ill treatment 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 in so far as they meet the needs of another person.

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 participating in normal social interaction. It may involve seeing or hearing the ill‐treatment of another. It may involve serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of ill treatment of a child though it may occur alone.

 **Sexual Abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape or buggery or oral sex) or non‐penetrative acts. They may include non‐contact activities, such as involving children in looking at, or in the production of, sexual online images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

 **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 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 care‐givers) •  ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Individuals within the organisation need to be alert to the potential abuse of children both within their families and also from other sources including abuse by members of that organisation.

 The organisation should know how to recognise and act upon indicators of abuse or potential abuse involving children and where there are concerns about a child's welfare. There is an expected responsibility for all members of the organisation to respond to any suspected or actual abuse of a child in accordance with these procedures.

 **When You Must Not Discuss Your Concerns with Parents/Carers**

It is good practice to be as open and honest as possible with parents/carers about any concerns. However, you MUST NOT discuss your concerns with parents/carers in the following circumstances:

•     Where sexual abuse or sexual exploitation is suspected

Where organised or multiple abuse is suspected (see complex, organised or multiple abuse procedure)

 •    Where fabricated or Induced Illness (previously known as Munchausen

 •    In cases of suspect Forced Marriage

 •    Where contacting parents/carers would place a child, yourself or others at immediate risk

These decisions should not be taken in isolation. Consult with your senior manager/line manager/designated safeguarding lead.

 **What to do if Children Talk to You About Abuse or Neglect**

It is recognised that a child may seek you out to share information about abuse or neglect, or talk spontaneously individually or in groups when you are present. In these situations YOU MUST:

•     Listen carefully to the child. DO NOT directly question the child

•     Give the child time and attention.

•     Allow the child to give a spontaneous account; do not stop a child who is freely recalling significant events.

•     Make an accurate record of the information you have been given taking care to record the timing, setting and people present, the child's presentation as well as what was said. Do not throw this away as it may later be needed as evidence.

•     Use the child's own words where possible.

 •    Explain that you cannot promise not to speak to others about the information they have shared ‐ do not offer false confidentiality.

 •    Reassure the child that:

1.    They have done the right thing in telling you;

2.    They have not done anything wrong;

•     Tell the child what you are going to do next and explain that you will need to get help to keep him/her safe.

 •      DO NOT ask the child to repeat his or her account of events to anyone

**Lone working**

 **Definition**

MFYP Ltd defines lone working as those who work by themselves without close or direct supervision.

Someone should always be aware of a lone workers whereabouts and movements. Lone worker movements are to be logged, shared and monitored with their line manager and /or appropriate colleagues ahead of and during a visit.

If the person who has these details is off, then they should be passed on to an appropriate colleague to check that the lone worker has returned safely.

It is the lone worker’s responsibility to remain in close contact with their manager and or an appropriate colleague and call in at designated times.

If there is a genuine concern about the safety of a lone worker, e.g. they have failed to attend a visit(s) within an agreed time, contact cannot be established, or else they have failed to make contact as agreed, the line manager is responsible for contacting the lone worker and escalating this matter up to the police as necessary.

 **Manage behaviour – cultural sensitivity**

Training is given frequently to all paid staff and voluntary workers to raise awareness of cultural and gender issues before entering a lone working situation, to avoid the possible escalation of a situation.

 **Recognising warning signs**

It is important for lone workers to be able to recognise the warning signs, including if anyone present is under the influence alcohol, drugs, confused, animals present etc. Being aware of warning signs enables action to be taken, including a decision to continue to work or withdraw as appropriate.

Under no circumstances should a lone worker put themselves, their colleagues, other patients or service users in any danger.

**Substance Misuse**

Drug and/or alcohol misuse is a common feature in domestic abuse. The incidence or severity of domestic abuse may increase when a perpetrator is misusing drugs or alcohol and they may seek to use this to evade responsibility for their behaviour. The perpetrator’s withdrawal from drugs or alcohol may trigger domestic abuse. A victim of domestic abuse may seek refuge in alcohol or drugs or be coerced into their use by the perpetrator.

Parental drug and/or alcohol misuse can have a range of effects, including damage to the unborn child; neglect of the child’s emotional and physical needs; exposure to criminal behaviour and the child’s commitment to keeping secret the family dynamic of drug and/or alcohol misuse. These can include:

·  Developmental delay, including foetal alcohol disorders and neonatal withdrawal syndrome;

·    Neglect and other forms of abuse; high levels of accidents in the home, possibly due to poor parental supervision; missed health-related appointments;

·    Attachment issues and behavioural difficulties;

·    Being left at home alone or with inappropriate carers;

·    Emotional difficulties e.g., crying for no apparent reason, inexplicable feelings

·  of anger;

·    Tendency to keep secrets;

·    School problems e.g., poor attendance, non-attendance, levels of attainment

·  dropping, poor concentration;

·    Unwillingness to expose family life to outside scrutiny, social isolation, not

·  taking friends home;

·    Role reversal and confusion e.g., protecting others, acting as a mediator

·  and/or confident, taking on an adult role; being a young carer;

·    Extreme anxiety and fear, fear of hostility, violence;

·    Offending behaviour;

·    Early use of drug and/or alcohol and minimisation of the risks associated

·  with, or conversely a very strong dislike of drug and/or alcohol;

·    Self-harming/suicidal behaviour;

·    Feelings of gloom, worthlessness, isolation, shame and hopelessness, poor

* self-esteem, disempowerment;
* Family dislocation e.g., moving schools,
* relationship conflict, domestic abuse.

Risk assessment

The ability to assess risk as a result of parental drug and/or alcohol misuse draws on childcare understanding and some knowledge of the effects of drugs and/or alcohol. This guidance does not negate the need for training. All practitioners should undertake basic drug/ alcohol awareness training at the very least to facilitate confidence to raise issues and appropriately challenge parents.

Practitioners working primarily with children and families must adopt a proactive approach to routinely enquire about drug and/or alcohol misuse. Open questions such as “Can you tell me about your use of alcohol and drugs?” are more likely to prompt discussion than a closed question such as ‘Do you use illegal drugs’?

Practitioners should be mindful that people will minimise drug and alcohol use and its impact on their lifestyle. Judgements should be based on evidence not optimism and practitioners must be prepared to challenge an individual’s account of their drug and/or alcohol use as necessary.

They should be open to comments made by children or other family members. They should always try to imagine the impact of parental drug and/or alcohol misuse from the child’s perspective, i.e. what is it like to be a child in that family? Where there are concerns for the welfare of the children, consideration should be given to seeking the views of wider family members, siblings and any absent parent.

Practitioners must also be mindful of the relationship between drug and/or alcohol misuse, mental ill-health and domestic abuse. Good communication between practitioners and seeking appropriate specialist advice will be particularly important in such cases.

Specialist drug and/or alcohol misuse services require referrals for their intervention to be voluntary. However, Manchester Drug Services, Community Alcohol Services and Lifeline will offer informal consultation and advice to any practitioner concerned about the impact on the children of a parent’s or carer’s drug and/or alcohol use.

**E – Safety Policy**

Statement

MFYP Ltd recognise the benefits and opportunities which new technologies offer to teaching and learning.

Use of technology to enhance skills, achievement and promote accessibility is encouraged. MFYP Ltd is aware of potential risks and challenges that are associated with ICT and have implemented safeguards to support both learners and staff to manage risks independently where possible, but the MFYP Ltd will also provide a support structure through a combination of security measures, training and guidance where this is necessary.

**Scope of the Policy**

All learners and staff who have access to ICT systems on premises or remotely are in scope. E- Safety applies to all use of the internet and electronic communication devices such as email, mobile phones, games consoles and social networking sites.

**Responsibility for E – safety**

Overall responsibility lies with the Safeguarding Lead. An E –safety officer will be responsible for ensuring compliance with all technical security requirements through MFYP Ltd. All staff are responsible for ensuring the E- Safety of themselves and their learners and should report any concerns or incidents immediately through the Record of Concern form ( ROCAE 1) following the safeguarding guidelines within the policy. Staff will actively promote E- Safety through embedding good practice within the sessions. They will access staff training on E- Safety and display a model example to learners at all times.

 All teaching staff are required to incorporate e- safety into their session as part of the Health and Safety checklist induction and all learners must sign and keep a copy of the Be E - Safe Acceptable Use form.

Where any report of an E- safety incident is made, all parties should know what procedure is triggered and how this will be followed up. If an incident is illegal the Police will be contacted.

 Learners are responsible for use of the ICT equipment in accordance with the acceptable use rules. They will be expected to seek help and to have read the Safeguarding Guidelines for Learners and follow procedures if they are worried or concerned or where they believe an e- safety incident has occurred concerning themselves or another member of the learning community.

They must act safely and responsively at all times when using the internet and/or mobile technologies communications must be carried out in line with the Service Communications Policy and be professional in tone and content at all times. Online communication must only be done through or the use of social networking sites. Other sites, not hosted must only be used where a Risk Assessment form has been completed by the E- Safety officer.

The impact of this policy will be monitored and reviewed regularly and a full review carried out yearly.

**Security**

Security software will be compliant with MFYP Ltd policy. This includes enhanced filtering and protection of firewalls, servers, routers, work stations and remote access to prevent accidental or malicious access to systems and information. Digital communications including email and internet postings, over the network will be monitored in line with this policy.

**Use of images**

The use of images or photographs should be encouraged where there is no breach of copyright or rights of another person. This includes images downloaded from the internet and images belonging to staff or learners. Permission will be sought from all learners or where appropriate parents or carers, before any images are used for the purposes of enhancing group learning or MFYP Ltd publicity. No image / photograph can be downloaded, shared or distributed online without the permission of the course tutor, parent or carer and learner. No photograph or image should contain personal details of the individual without their permission or where appropriate that of their parent or carer.

Personal Information

Processing of personal data is strictly monitored and complies with the Data Protection Act 1998.

Any mobile ICT device (laptop, USB) must be encrypted, password protected and signed out by staff.

 **Ensuring a Safe Environment**

MFYP Ltd is committed to ensuring that a safe and suitable environment is provided for all users of our services.

Managers will be responsible for ensuring that a safeguarding risk assessment is undertaken by a trained individual to assess and determine the potential risks a new client/customer may pose as well as determining the potential risks a new client/customer may be exposed to based on their individual level of vulnerability.

 Risk assessments are carried out as part of our assessment of prospective contracts and business development opportunities, including new premises. Risk Assessments will be reviewed on an annual basis and in response to any incident.

Please see also:

Health & Safety Policy

Employee Handbook

Teachers Handbook

**Support for Staff**

MFYP Ltd recognises that working with situations that involve the abuse of a vulnerable person can be very upsetting and stressful for staff.  Staff may also feel their personal safety may be put at risk or they have been placed under undue stress.  Any concerns raised will be dealt with in a sensitive way. All MFYP Ltd staff will receive confidential support and debriefing from their line manager, and, where appropriate, counselling outside the workplace may be offered.

 Protection of Staff who report or allege Abuse

Reporting abuse, whether or not it is found to be correct, is never an easy option. Dealing with Suspicions or Allegations of Abuse made against MFYP Ltd:

Employees:

An individual who is the subject of an allegation may be asked not to report for work until MFYP Ltd is satisfied that it is appropriate for the individual to resume normal duties. Such a period will be on full pay.

Any internal action following the results of the investigation will be dealt with in accordance with MFYP Ltd Disciplinary Procedure. In enforcing this Policy, any disciplinary action taken will be carried out using MFYP Ltd Disciplinary Procedure and every employee has the right to raise a Grievance using the Company’s grievance procedure.

 Dealing with Suspicions or Allegations of Abuse against someone who is not a member of MFYP Ltd:

Where there is uncertainty about whether the concern relates to abuse or misconduct, the Designated Safeguarding Officer must firstly be consulted for advice on the appropriate course of action.

 Managing Information

Safeguarding training will include Guidelines for all staff when discussing the rights of confidentiality and safeguarding - for example breaches of confidentiality are acceptable if the welfare of an individual is at stake or if it is in the public interest.  MFYP Ltd will maintain confidentiality, with others informed on a “need to know” basis only.  Written records of disclosures will be kept in a locked cabinet.

Appendix A – SVG Act and Regulated and Controlled Activity

Background to the Safeguarding Vulnerable Groups Act 2006

In response to recommendation 19 of the Bichard Inquiry Report into child protection procedures following the Soham murders, new arrangements for people whose jobs and voluntary work bring them into contact with children and vulnerable adults (previously referred to as the Vetting and Barring Scheme) was phased in from October 2009 under the Safeguarding Vulnerable Groups Act.  The application process is run by the Criminal Records Bureau and decision on who should be placed on the barred lists will lie with the new Independent Safeguarding Authority (ISA) (previously referred to as the Independent Barring Board) which is an independent statutory body.

Regulated and Controlled Activity

The Act covers regulated and controlled activity.

Regulated activity includes:

* any activity which involves close contact with children or vulnerable adults and is of a specified nature (e.g. teaching, training, care, supervision, advice, treatment or transport)
* any activity allowing contact with children or vulnerable adults and is in a specified place (e.g. schools, care homes, etc.)
* fostering and childcare
* certain defined positions of responsibility (e.g. school governor, director of social services, trustees of certain charities) and
* where the activity is ‘frequent’ (once a month or more) or takes place on three or more days in a 30 day period (‘intensive’).

Controlled activity includes;

* support work in general health, NHS, Further Education settings (e.g. cleaner, caretaker, shop worker, catering staff, car park attendant, receptionist)
* those working for specified organisations (e.g. a local authority) with frequent access to sensitive records about children and vulnerable adults
* support work in adult social care settings (e.g. day centre cleaners, those with access to health records) and
* where the activity is ‘frequent’ (once a month or more) or takes place on three or more days in a 30 day period (‘intensive’).

Appendix B - Definitions of a Child or Vulnerable Adult

What is the definition of a child?  A child is legally defined as anyone under the age of 18.

What is meant by the term ‘Vulnerable Adult’?

Section 59 of the SVGA 2006, defines a vulnerable adult as follows:

A person is a vulnerable adult if he has attained the age of 18 and

(a) is in residential accommodation,

(b) is in sheltered housing,

(c) receives domiciliary care,

(d) receives any form of health care,

(e) is detained in lawful custody,

(f) is by virtue of an order of a court under supervision by a person exercising functions for the purposes of Part 1 of the Criminal Justice and Court Services Act 2000 (c. 43),

(g) receives a welfare service of a prescribed description,

(h) receives any service or participates in any activity provided specifically for persons who fall within subsection (9),

(i) payments are made to them (or to another on their behalf) in pursuance of arrangements under section 57 of the Health and Social Care Act 2001 (c. 15), or

(j) they require assistance in the conduct of their own affairs.

Disability

The Disability Discrimination Act 1995 (DDA) defines a disabled person as someone who has: “a physical or mental impairment which has a substantial and long-term adverse effect on his or her ability to carry out day to day activities”.  This can include physical and sensory impairments; mental impairments, including all the variety of learning difficulties, or a mental illness; any hidden conditions such as Autism, Asperger’s Syndrome, Dyslexia, various language impairments and Attention Deficit Hyperactivity Disorder (ADHD). Having an impairment does not necessarily mean someone is disabled. However, having impairment may make someone more vulnerable, in terms of being able to defend themselves against abuse or exploitation.

Appendix C – Definition and identification of abuse

Definition of abuse

“ Any act, or failure to act, which results in a significant breach of a vulnerable person’s human rights, civil liberties, bodily integrity, dignity or general wellbeing, whether intended or inadvertent; including sexual relationships or financial transactions to which a person has not or cannot validly consent, or which are deliberately exploitative.”

(Source: Safeguarding Adults and Children with Disabilities Against Abuse Council of Europe 2002)

* Abuse may be a single incident but is more likely to be part of a systematic pattern.
* The risk of being abused depends upon the situation, the environment and the perpetrators, not primarily on the behaviour of the victims.
* Abuse can occur in any relationship and may result in significant harm to or exploitation of the person subjected to it resulting in the deterioration of a person’s physical, emotional, social or behavioural development.
* Abuse may be a deliberate act or may be the result of a failure to act appropriately.
* Abuse may constitute a criminal offence.

Types of abuse

* Physical abuse
* Sexual abuse
* Psychological abuse
* Neglect
* Discriminatory abuse
* Financial abuse
* Institutional Abuse

These categories of abuse are not mutually exclusive and many situations will contain a combination of different kinds of abuse.

(Source: NO SECRETS (DoH 2000)

 Places where abuse might take place

Abuse can take place in a variety of settings. These can include:

* A person’s own home.
* A relative or friend’s home.
* A day centre or support service.
* Within a supported living scheme.
* Within an adult placement.
* An educational establishment.
* A hospital.
* A care home.

Who might be responsible for the abuse?

Abuse can take place within all types of relationships. These can include:

* A partner, relative or member of someone’s social network.
* A carer i.e. someone who is eligible for an assessment under the
* Carers’ and Disabled Children’s Act (2000).
* Someone paid to provide a service to someone or who is in a professional relationship with them.
* A volunteer or member of a community or faith group.
* Other residents or users of a service.
* Someone who deliberately forms a relationship with a vulnerable person in order to exploit them.
* Some abusers will themselves be vulnerable people and may already be users of social or health care services or be eligible for such services.
* Initial Identification

Reports of allegations or suspicions that a vulnerable person is being abused can come from many sources.

* The person themselves may disclose what has been happening to them
* A member of staff or volunteer may observe behaviour which causes them concern or notice changes in a person’s demeanour which might indicate that they are being abused.
* There may be on going concerns about the standard of care provided within a service or the effect on other people of a service user’s challenging behaviour.

Appendix D - Main Legislation associated with this Policy

The Rehabilitation of Offenders Act (1974)

Anyone who has been convicted of a criminal offence, and received a sentence of not more than 2.5 years in prison, benefits as a result of the Act, if they are not convicted again during a specified period otherwise known as the 'rehabilitation period’. The length of this period depends on the sentence given for the original offence and runs from the date of the conviction. If the person does not re-offend during this rehabilitation period, they become a ‘rehabilitated person’, and their conviction becomes ‘spent’. Custodial sentences of more than 2.5 years never become ‘spent’. There are exceptions to this Act. Occupations with duties involving “substantial, unsupervised access on a sustained or regular basis” to children and/ or vulnerable adults, are excepted from the Act. Application for work in such regulated positions requires full declaration and a subsequent disclosure check to indentify spent and unspent convictions. Full details of all excepted occupations are noted in:-

* The Rehabilitation of Offenders Act 1974 (Exceptions Order) 1975)
* The Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) (No2) Order 2001

It must be stressed that MFYP Youth Arts CIC is committed to combating social exclusion and is in no way mandating or encouraging the exclusion of individuals purely because they have an unspent criminal conviction. While some individuals are likely to be unsuitable because of the nature and seriousness of their offences, there are no blanket bans. Rather the best way to determine whether an individual is a risk is by discussing their offences and their attitudes to those offences with them. Decisions will not be made without giving individuals the opportunity to discuss their offences.

 The Children Act 1989

This act provided legislation to ensure that the welfare and developmental needs of children are met, including their need to be protected from harm.

 The Police Act 1997

This act contained the provision to set up the Criminal Records Bureau for England and Wales.  Under this act it is a criminal offence for an employer to:

* not check an employee working with children or vulnerable adults
* give a job to someone who is inappropriate to work with children or vulnerable adults when they know this to be the case.

Criminal Justice and Court Services Act 2000

This act covers Disclosures and child protection issues. It contains the list of convictions that bar offenders from working with children in ‘regulated positions’. These types of ‘regulated positions’ are defined in this act and include:

* any employment in schools, children’s homes, day care premises where children are present
* caring for, training, supervising, or being in sole charge of children
* unsupervised contact with children
* other positions which give the kind of access or influence which could put children at risk if held by a disqualified person (e.g. management committee members).

Every Child Matters and the Children Act 2004

In September 2003 the Government set out in the Green Paper ‘Every Child Matters’ its proposals for a radical re-organisation of children’s services – from hospitals and schools, to police and voluntary groups. Subsequently ‘Every Child Matters: Change for Children’ was issued and the Children Act 2004 was passed. It sets out the Government’s approach to the well-being of children and young people from birth to age 19.  Every local authority will lead on integrated delivery of services for children and young people through multi-agency children's trusts. Local authorities are also required to set up statutory Local Safeguarding Children Boards that are replacing the non-statutory Area Child Protection Committees. The children's trusts are a direct response to Lord Laming's report of the inquiry into the death of Victoria Climbié, which highlighted the extent to which better working together and better communication was crucial. The Every Child Matters agenda has been further developed through publication of the Children's Plan in December 2007, which aims to improve educational outcomes for children, improve children's health, reduce offending rates among young people and eradicate child poverty by 2020.

Further details from www.everychildmatters.gov.uk

Review of the Vetting and Barring Scheme 2011

The registration element of the Vetting and Barring Scheme (VBS) has been halted as part of the Coalition Government's VBS review. There is no longer a requirement for those working or volunteering with vulnerable groups to register with the Independent Safeguarding Authority.

\* This guidance was last reviewed September 2013

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