Safeguarding Handbook: Making Church a Safe Space

2026-2027

For Church Leaders and Safeguarding Officers

England

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Introduction

It is important to recognise that safeguarding is not only about policies and procedures but also about culture, attitudes and behaviours. Churches should actively promote a culture where safeguarding is valued and taken seriously, and within which, leaders model transparency, accountability and healthy challenge.

All individuals should feel able to raise concerns, ask questions and seek advice without fear of criticism.

As a church working with children and adults through a multitude of different activities and ministries, we seek to operate and promote healthy working practices to promote the safety and well-being of all. The guidance below will enable workers and leaders to cultivate safe spaces, develop healthy relationships and respond well to concern.

Throughout this document, each area of guidance will be split into 3 sections: must, should and may. To understand our meanings behind these terms, please see the table below.

Terminology	**How it is to be understood**
Must	Reflects legal obligations or Elim requirements which are essential to follow.
Should	Reflects our strong recommendations, which we would expect of each Elim seeking to implement 'best-practice'. If permanent, locally-endorsed practice is in opposition to the guidance in these sections, churches should record written justification for this.
May	Reflects what churches can implement to create a safer environment, however, is not considered 'essential'.

1. Safer practices

Welcoming environment

Creating a welcoming environment goes beyond a friendly greeting at the door – it involves the removal of barriers that prevent people from fully participating in worship and community life. Accessibility reflects the inclusive heart of the Gospel and demonstrates that everyone belongs in God's family. The following is a non-exhaustive list of practical ways to make your church a place where everyone can enter, engage, and flourish.

Must:

Physical Accessibility: Ensure buildings are welcoming to everyone by identifying and addressing design barriers. For example, installing a working lift or a ramp so that people can access the building more easily, providing accessible parking and toilets, and ensuring suitable seating for people with different mobility needs.

Should:

Inclusive Language: A negative Church culture can also be an access barrier for people engaging in Church and feeing safe to flourish in Church. Language reflects attitudes and shapes culture. Use respectful, appropriate language and avoid terminology that marginalises or excludes.

May:

Visual Communications: Take care to ensure on-screen content is legible and accessible. Avoid low-contrast combinations like black text on white backgrounds, which can be difficult for many people to read. Consider using high-contrast, dyslexia-friendly fonts and colour schemes for worship lyrics, Bible verses, announcements, and other projected content so that everyone can fully engage.

Acoustics: Consider how sound and acoustics can be accessible to all. This may mean maintaining appropriate volume and ensuring sound level does not cause sensory difficulties. You may provide an alternative space in your building where people can watch and listen to the service from a quieter location. Also consider how hearing aid loops can be connected.

Lighting: Balance atmosphere with practical visibility and functionality by ensure adequate brightness for reading and safe navigation. Avoid harsh or flickering lights that can cause sensory difficulties.

Safeguarding Training

Must:

All church leaders/ministers and those who work with children and/or adults at risk on behalf of an Elim church, must participate in role-appropriate safeguarding training every 2 years.

Elim's Core Safeguarding Training is applicable for all workers, ministers, leadership teams and safeguarding teams. Elim's Advanced Safeguarding Training is applicable for all ministers, leadership teams and safeguarding teams, building on the learning from our Core content. Alternatively, other relevant courses from external providers may be applicable, however churches should verify the suitability of such courses with the National Safeguarding Team.

For more information about our regional training requirements and options, please visit ElimHUB.

Physical Contact

Individuals are likely to feel safe and secure, valued and loved if they are able to receive *appropriate* physical contact from trusted adults. However, adults in positions of responsibility and trust must implement healthy boundaries and should not make unnecessary physical contact with children or adults at risk.

Should:

Physical contact/interactions should:

- meet the needs of the child/adult at risk, not that of the worker.
- be age/developmental stage appropriate.
- be initiated by the child/adult at risk, where possible.
- take place in public view.

Workers should support one another in promoting safe physical contact. This may include constructively challenging behaviour which could be misunderstood or misconstrued. If a team member is unsure about whether the actions of another volunteer or worker might constitute a concern, they should raise this with the DSO/DDSO.

Must:

Workers must avoid any physical contact that is, or could be perceived as, sexually suggestive or inappropriate, or repeated gestures (however well intentioned) such as putting an arm around the individual's shoulders.

Photographs, videos and live streaming

Images of people count as personal data, so aspects of both safeguarding and data protection/GDPR apply. Since the introduction of the Data Protection Act in 1998, churches must take caution if using still or moving images of clearly identifiable people. Images which infer a person's religious beliefs could be consider **special category data** and therefore should not be shared without consent.

Videos and Photographs of Children

Must:

Churches must consider what the purpose of the photograph/video being taken is. There must be a genuine reason for images/video being taken, for example, to produce advertisement for a church holiday club, rather than simply taking photos because the activity is fun.

In order to take, store and share images of a child, you must obtain informed, written consent from their parent/carer. Workers must then be informed of who can/cannot have their images taken, as well as where the images can/cannot be shared. Renewed consent must be gained regularly (for example, every year) as preferences, circumstances etc may change over time.

Any and all photographs/videos should only be kept for as long as is necessary.

Should:

You should also consider what devices are being used to take the photographs/videos, how photos/videos are stored and for how long.

- Personal devices should not be used to take images of others. Consider using a specific phone, tablet or camera which can be used solely for church activities. This can be stored securely with access limited to those with a genuine need to access, for the purpose of their role (E.g. creating media content).
- If you are using a camera, consider using a specific memory card, and therefore consider where this memory card will be securely stored. We want

to mitigate the possibility of photographs getting into the hands of people who don't have consent to access them.

- Because of the seriousness of the risks to children, we strongly advise that Elim churches should not post identifiable images of children online, including the church website, YouTube or social media accounts. (Posting images where children are not identifiable – for example the back of a child's head, is preferable).
- We strongly advise reducing the number of identifiable photos shared, using privacy settings, avoiding close-up images, and ensuring that personal details such as names, and locations are not visible or included.
- When sharing images online, note that AI software can remove emoji's from images and therefore this method should not be relied upon where images are shared of children for whom parental consent has not been given.

Considerations for adults

Must:

When taking images/videos of adults, consent is also important. If you take images/video footage during activities of the church, for example the Sunday service, it is important to make sure people are aware of this. This can be done by displaying posters which inform congregants that images are being taken and that those who do not wish to be photographed can speak to relevant members of the church leadership/tech team.

Live streaming

Should:

People who appear on screen and are recorded or broadcast are sharing their image with those watching online. This is the sharing of personal data. There may be adults or children within your church community for whom appearing online would be a risk to their safety, for example, survivors of domestic abuse, or children who are, or have been in foster care or who are adopted. There are others who do not wish to appear online out of personal preference. Consider:

- Clearly marking out which spaces and areas do and do not appear on the streamed image, give enough space for those who do not wish to appear on screen to worship and move around.
- Publicise and remind all the congregation that the service or event is being recorded and broadcast, this could be via physical notices and signs, information in newsletters or on social media feeds and reminders relayed by the service or event host at the start.

Give opportunities for those who are concerned or have questions about their appearance in recordings to speak to relevant members of the church leadership and technical teams. Live streaming live services and data protection - Elim Hub

Must:

- The parents, carers, or legal guardians of children should give informed consent before children's images are recorded and shared. Personal identifiers such as surnames, the area in which they live and the school they attend should not be shared as this can have safeguarding implications.

For more information, see ElimHUB.

Computers and internet accessing devices

Should:

Consider the following:

1. Who has access to the church owned devices and for what genuine purpose?
2. What passwords and safeguards are in place to protect users from accessing harmful and/or illegal content? This will make it more difficult for those who may use the device inappropriately and will help to protect any vulnerable users.
3. How is use/access supervised or monitored?

Safer Use of Artificial Intelligence

As Artificial Intelligence (AI) tools become more widespread in everyday life, it is essential that their use within our churches is consistent with our safeguarding duties.

AI technologies – including chatbots, image generators, recommendation engines, and predictive tools – pose both opportunities and risks. All use of AI must therefore be guided by a safeguarding-first approach.

We recognise that there are many emerging safeguarding risks associated with AI:

- Exposure to – or ability to create – inappropriate content: AI tools may generate or suggest violent, sexual, or disturbing content, even in error. AI can also be used to purposefully create sexualised or nude-looking images of a real person from an ordinary photograph.
- Misinformation or bias: AI may present fabricated or biased information that could mislead individuals.
- Identity deception and impersonation: AI-generated media can be used to mimic voices or faces, showing them saying or doing something that never happened (e.g. “deepfakes”).
- Exploitation or manipulation: Individuals may be targeted with AI-enhanced scams, grooming, or coercive behaviour.
- Emotional or psychological impact: Over-reliance on AI, or negative experiences with it, may affect self-esteem, relationships, or mental health.

Appropriate use:

Must:

- Children must not have access to unsupervised or unfiltered use of generative AI tools during activities of the church.
- Church members (children and adults) must not be asked to enter personal information (e.g. names, photos, locations, or identifying facts) into AI platforms.
- Leaders and workers must not enter personal, sensitive, or safeguarding-related information about members or attendees of the church into any AI service unless this is authorised by the church **and** lawful under data protection requirements.
- Workers should ensure that any use of AI does not compromise confidentiality or result in personal information being disclosed to unauthorised individuals or organisations.
- AI tools must not be used as a substitute for safeguarding judgment, decision-making or reporting procedures.
- Where AI-generated content is used in church activities, workers should consider the potential for inaccuracies, bias or misrepresentation and take reasonable steps to verify information before relying upon it.

Those working in regulated activity, or in designated safeguarding roles must:

- Remain vigilant to signs that children or adults may be misusing AI or encountering distressing content.
- Report any concerns involving AI use – in or outside of church activities – through the standard church safeguarding procedures.
- Ensure they do not use AI to create educational materials that have not been reviewed for safeguarding risks.

Safeguarding concerns involving AI must be treated in line with the church Safeguarding Policy and may involve referral to external agencies (e.g. police, LADO, CEOP).

Where concerns involve children's use of AI, the church should engage with families to offer support as appropriate. Resources for parents can be found online, such as: Artificial intelligence safety tips for parents | NSPCC

Prayer Ministry

Prayer ministry often involves high levels of trust and vulnerability. It is important that all individuals feel safe when receiving prayer.

Must:

- Consent must be obtained before engaging in prayer ministry and before any physical touch or conversation/prayer about sensitive topics.
- Do not promise totally confidentiality to the person. Pass on any safeguarding concerns or disclosures to the DSO/DDSO. Where appropriate, this should be explained to the person, as per the guidance above.
- Never pressure someone into receiving prayer.
- Healthy prayer ministry must avoid coercion, manipulation, or any form of spiritual pressure.
- Stop if the person becomes distressed.

Should:

- Organised one-to-one prayer ministry (for example, during a church service or prayer event) should be undertaken in visible spaces.
- Organised prayer ministry should be offered by trained individuals who understand safeguarding boundaries, especially when praying with children or adults at risk.

For specific guidance relating to deliverance ministry, visit ElimHUB.

Praying safely with children

Should:

In addition to the above guidance, it is important to make parents/carers of any children who attend your activities, aware that prayer is part of your activities and that sometimes you may pray together as a group or with individuals at a child's request. If someone requests that their child does not participate in prayer, this must be respected.

May:

If children seek prayer within the main church gathering, it may be helpful to invite a children's worker or the child's parent to pray with the child (depending on the request). This may help the child to feel more comfortable.

Discipleship/Mentoring

Discipleship and mentoring relationships often involve high levels of trust and vulnerability. Clear boundaries, accountability and safeguarding awareness are essential to protect all participants.

Must:

- Any disclosures of abuse or potential harm made during discipleship/mentoring meetings must be treated as safeguarding concerns and reported appropriately.
- If the content of discussion gives rise to safeguarding concerns, these must be shared with the DSO/DDSO.
- Practices must avoid coercion, manipulation, or any form of spiritual pressure.
- Mentors must never take advantage of their role and engage in sexual activity with someone with whom they have a discipleship/mentoring relationship.
- Discipleship/mentoring of children must be undertaken as part of a recognised programme of the church, for which clear written processes and expectation have been agreed with the church leadership. Parents/carer must be fully informed of expectations and should provide written consent which confirms they are aware of the conditions within which the discipleship/mentoring is taking place, who will be conducting this with their child, how and when.

Should:

- One-to-one discipleship or mentoring should be conducted in visible settings, which have been pre-agreed by all individuals involved.
- Clear written processes and expectations for adult-adult discipleship/mentoring programmes should be in place and shared with all participants.
- Workers should be aware of the innate power imbalance within discipleship/mentorship relationships and the potential for abuse of trust.
- Workers should be aware of the dangers of dependency developing within a mentorship relationship and should seek advice from the DSO/DDSO if they believe someone they are mentoring is becoming dependent on them or developing an inappropriate emotional attachment.
- Mentors should be mindful of any physical contact or greeting they use, seeking consent if physical contact is offered, for example as a means to offer comfort.
- Mentors must recognise the limits of their own abilities and competencies and seek further help when working with situations outside of their expertise or role – the work of mentoring should not replicate or replace professional counselling.

Providing pastoral care

It is important that anyone seeking pastoral care knows exactly what to expect in terms of good conduct, that those caring for them are accountable and that any boundaries set are respected. Pastoral relationships should remain transparent, accountable and free from financial, emotional or other inappropriate dependency.

Those providing formal pastoral care **Must**:

- Undertake relevant training and adhere to established code of conduct.
- If the content of discussion during pastoral interactions gives rise to safeguarding concerns, these must be shared with the DSO/DDSO.
- All people receiving pastoral ministry must be treated with respect and be encouraged to make their own decisions about any actions or outcomes following meetings.
- Avoid any practice which involves coercion, manipulation, or any form of spiritual pressure.

Should:

- Be aware of the innate power imbalance within pastoral relationships and the potential for abuse of trust, or the development of dependency within a pastoral relationship. (Contact DSO/DDSO if you have concerns in this area)
- Be mindful of any physical greeting or general physical contact within a pastoral relationship, seeking consent where physical contact might be considered appropriate (for example as a means to offer comfort).
- Be aware of the limits of their own ability and competence and seek further help when dealing with situations outside their expertise. The difference between pastoral care and formal counselling is always to be recognised; counselling should only be delivered by those properly qualified, having the required professional insurance and formal supervision arrangements.

When visiting adults at home, consider the following safe practice:

- Ideally, let people know in advance that you are coming, particularly for your first visit.
- If there are any concerns or risks known before a visit is made, visiting in pairs may be advisable, especially if you do not know the person.
- It is reasonable that some individuals may ask to see identification before accepting you into their home. Be prepared to provide this when requested and so not insist on entering the home without this.
- Carry a mobile phone and let someone know where you are and when you expect to return.
- Ask the person whether they would like repeat visits, if and how they would like to be contacted again, and so on. Leave them feeling fully in control of your contact with them.

Working with those who may pose risk to others

Must:

Information about potential risks presented by individuals can come to light in different ways e.g. through a criminal record check, from another agency, an individual might make a self-disclosure or someone else in the church may share information. Whenever you become aware of an individual attending or requesting to attend your church or work with vulnerable groups, who may pose a risk of harm to others, you must inform the National Safeguarding Team. The National Safeguarding Team will take the lead in supporting with and overseeing the procedures outlined below.

The church aims to provide pastoral care for all its members, including those who are suspected of causing harm or have caused harm to others. However, in this context, such care must be provided in a way that prioritises the safety of other church members, while enabling the person who poses a risk to worship and be a part of the church community safely.

The church is responsible for implementing safe boundaries for such individuals to promote the safety and wellbeing of all. In all cases where it is identified or suspected than an individual may pose risk of harm to others, a risk assessment must completed, using Elim's templates and guidance material. Copies, and supporting documentation can be accessed via ElimHUB.

The purpose of a risk assessment is to provide an evidence base for any risk management plans/actions put in place, ensuring these are proportionate and relevant to the specific risks presented in each individual case. The National Safeguarding Team will advise on when a risk assessment is needed, how this should be carried out and who else should be involved e.g. statutory agencies. The amount of detail involved / length of time taken will vary in each situation (e.g. may need to be quite brief initially when a quick decision is needed or may be more in-depth when dealing with a known serious offender), but the overall process is the same. Risk assessments following blemished criminal record checks are unlikely to be complex, as those with serious convictions are likely to be barred from applying to work in regulated activity.

Where appropriate, the risk assessment should be completed by the Designated Safeguarding Officer (or Deputy). Communication with relevant professionals currently engaged with the individual, such as a Police Offender Manager or Probation Officer, should be maintained. Such professionals can inform you of their consideration of risk presented by the individual, and effective strategies for risk mitigation. Risk assessments should clearly identify any areas of risk, along with all identified methods of risk mitigation to be undertaken by the church.

Once the risk assessment is complete, you must then consider if it is reasonable for the person to attend the church. If it is evidenced that the church is not equipped to support the individual, help can be given to support the individual in locating/accessing another church.

If the risk assessment indicates that the church can safely support the individual, the next step is to compose a behaviour agreement, to outline the specific boundaries which the individual is expected to adhere to throughout their attendance of the church. This should be informed by the risk assessment and discussed with the individual.

It will be important for the church Elders (and in some cases, where part of a team, key leaders) to know that the person is attending the church and the details of the agreement that the church and the individual have entered into or the parameters

that have been laid by the church leadership. This information must be treated in the strictest of confidence and individuals informed will be actively reminded of this.

The behaviour agreement must be signed and agreed by the alleged or known offender, the senior minister, DSO and an Elder. These documents must be uploaded to the Elim iKnow safeguarding management system and should reviewed every 3 months for the first year, and annually thereafter.

As outlined above, pastoral support should be implemented to support any individual to may pose a risk of harm to others.

Working with Children

Registration Forms

Must:
The first week a child attends a group/activity of the church (such as Sunday school or youth club), workers should record their name, emergency contact information and any important medical information. The child (or their parents) should then be given a registration form, which must be completed and returned if the child wishes to continue attended the activity. Without completion of the registration form, the child should not attend, as the workers will not be able to effectively safeguard that child.

Registration forms should include key information about that child relevant to the activity being undertaken, including:

- Address, name, telephone number, date of birth etc.
- Any medical conditions/considerations
- Dietary needs
- Any additional needs
- Any other professionals involved/information which the church should be aware of to effectively safeguard the child (option)
- Emergency contact details
- Media consent
- Consent for emergency medical treatment
- Consent for arrival and departure arrangements

Registration forms must be signed and dated by the child's parent/carer. The registration form must be kept in a safe and secure place as this will contain

confidential information. However, essential information must be accessible in the event of an emergency. Forms may either be on paper or online.

For additional information and helpful templates, visit the following link.

Ratios

Should:

In line with the recommendations of the NSPCC, churches should adhere to the following minimum ratio requirements of safely recruited adult workers to children (at least 2 adults should always be present, even where groups are small in size).

Ages of the children	Ratio
0-2 Years old	1 adult: 3 children
3 Years old	1 adult: 4 children
4-8 Years old	1 adult: 6 children
9-12 Years old	1 adult: 8 children
13-18 Years old	1 adult: 10 children

If the group is mixed gender, the supervising adults should ideally include both male and female workers. If there are young people helping to supervise younger children, Only those aged 18 or over should be included as adults when calculating adult-to-child ratios – any young people (under the age of 18) helping to supervise children should be considered within numbers of children.

In some situations, additional adults may be required. For example, during outings/trips or overnight events, if children or young people have specific support needs, or if a risk assessment highlights potential behavioural concerns, it will be necessary to increase the number of supervising adults accordingly.

If only one adult is available to lead the activity, it should be postponed until an appropriate number of adult leaders are available. If it is consistently impossible to meet the recommended ratios, the church Leadership/Elders will need to consider the sustainability of the children's work being offered and whether a different model should be adopted.

For further information about this, please click this link:

Supporting Children with Additional Needs

Children and young people with additional support needs may be more vulnerable to abuse. Some may require additional assistance such as with personal care tasks. Some may also have limited understanding or display behaviours that are not typical for their age.

Should:

It is important to speak with parents/carers to understand the best ways to support the child or young person during your activities. Where appropriate, older children should be given the opportunity to share their own views on how they would like to be supported. It may be beneficial to produce a written plan, with the family of the child, to detail how the church will support the child during the activities of the church. Guidance and advice can be found on ElimHUB.

For further information on ways to support children with additional support needs, Follow these links: How to support young people with additional needs ♡ - Elim Hub Limitless Kids: Inclusive Children's Ministry

Digital Communication with Children

Must:

- Workers must report any concerns arising from communication with children to the DSO/DDSO.
- Workers must not use personal contact information obtained through their church role for personal, commercial or inappropriate purposes.
- Contact information must not be shared with third parties without an appropriate lawful basis.
- Workers must not create private communication arrangements with children that bypass appropriate accountability and safeguarding measures.

From Spring 2027, the Government intends to ban social media for under 16s. This ban is intended to include platforms like Instagram, YouTube, TikTok, Snapchat, Facebook and X. At present, Government guidance suggests that there is no intention for WhatsApp to be included in the social media ban.

Therefore, churches and individual workers must not use social media platforms to communicate with children under the age of 16.

Should:

Communication relating to church activities should take place through agreed church communication channels wherever possible. Private messaging is not the most appropriate way to communicate with children and young people, and therefore any instant messaging should take place via group conversations, within which at least 2 workers are present to ensure accountability and transparency throughout any

communication. Platforms like WhatsApp Channel allow for one-way communication to groups, where participants are not able to access contact details for other members. However, it is important to consider what restrictions are currently in place for specific apps. For example, the age restriction for WhatsApp is 13 and therefore communication with younger children should take place via their parents.

Written consent from parents/carers should be obtained when children are engaging in any communication groups. Written engagement expectations should also be provided to workers, young people and their parents/carers, to ensure all are aware of the safe boundaries for their involvement, and any consequences for unacceptable use.

Workers should be cautious about sharing personal contact details, social media accounts or home addresses with children, young people or adults at risk.

Churches should consider providing role-based email addresses, telephone numbers or social media accounts where regular communication is required.

Online Activities

Should:

- Online activities involving children and young people must be planned, risk assessed and supervised appropriately.
- Parents/carers must be informed when children are participating in online church activities and provided with relevant joining information where appropriate.
- At least two workers should have access to online meeting platforms used for children's activities.
- Workers must ensure appropriate privacy and security settings are enabled on online platforms.
- Clear expectations regarding behaviour and online conduct should be communicated to children, young people, workers and parents/carers.
- Online activities should be conducted through church-approved, risk assessed platforms wherever possible.
- Consideration should be given to the age, understanding and support needs of participants when planning online activities.
- Workers should be aware of how children can access support or report concerns during online activities.

Must:

- Any safeguarding concerns arising during or relating to online activities must be reported in accordance with the church's safeguarding procedures.
- Workers must not use online activities to bypass safeguarding expectations relating to supervision, accountability or communication.

Social Media

Should:

- Should a Church decide to have social media accounts for children's work or youth work, this account should be a completely separate account from any worker's personal account.
- Children under 16 should not be permitted to join/follow any social media accounts for the church/activities.
- Workers should not send private messages to children from their personal social media accounts. Workers should ensure that all communications are transparent and open.
- Workers should implement appropriate boundaries such as giving careful consideration to accepting or sending 'friend' or 'follow' requests from/to children on their personal accounts where those children engage in activities that the worker is part of.

If you utilise 'official' church/activity social media accounts, it is important that you consider the following:

1. Who has access?
2. Who is responsible for updates etc?
3. How is 'safe use' monitored?
4. What are the guidelines for behaviour of users and administrators?
5. What guidelines are there for workers and children/young people interacting from personal social media accounts?

Outings, Events and Inter-Church Activities (including overnight):

There are some specific considerations which need to be made for outings and overnight events involving children:

Must:

Step 1: Risk Assessments

- For the travel to and from the event.
- For the place you are attending, for the length of time that you are attending and for any activity that is occurring whilst you are at the event.
- Any risk assessment needed for specific individuals attending (e.g. those with support needs, medical needs, etc)

Step 2: Consent forms

- Parents will be informed of all arrangements in writing.
- Consent forms to be obtained for the event, along with any medical issues that you may need to know about and photography and videography consent (if necessary).

Step 3: First Aid and Food Hygiene

- There will be workers that are First Aid trained with valid certificates.
- Those handling food should hold valid Food Hygiene certificates.

Sleeping Arrangements:

Sleeping arrangements for overnight events must be planned with care.

Should:

- Workers should not share sleeping spaces with young people. Instead, workers should be located nearby and ensure that young people know how and where to get help if needed.
- At least two workers should remain on duty until all young people are asleep.
- Children should be separated by gender.
- Adult workers should not enter children's sleeping spaces (rooms/tents etc.) alone, unless in the case of emergency.

Safety:

Must:

It is the responsibility of the workers to always know the whereabouts of every child/young person participating in an overnight event, and this may include

monitoring access on and off the site. General safety rules must be applied as appropriate.

Inter-Church Activities:

Must:

Where working in partnership with other churches or groups e.g., ecumenical youth events, the Elim church should ensure there is a suitable safeguarding policy, which includes reporting to the National Safeguarding Team in instances where safeguarding allegations are made against an Elim worker (whether in paid or voluntary employment).

Working with Adults at Risk

Support Plans

May:

In some instances, it may be helpful to implement personalised support plans for individuals, to provide a written record of the support the church will provide to an adult at risks. This ensures expectations are understood by all, and support can be tailored to individual needs. Where possible, liaise with professionals already working with the adult at risk, who will know the individual well and may be able to inform and facilitate planning processes.

Financial Integrity

Should:

To avoid any occurrence or impression of financial abuse/manipulation, clear procedures should be implemented for managing money, financial transactions, and gifts.

- Safely recruited individuals working with adults at risk may occasionally assist with personal financial matters such as shopping, or banking. When handling money on someone else's behalf, always obtain receipts or other appropriate documentation to account for all transactions, and ensure other workers/group leaders are aware of your undertaking of such tasks.

- Offers of money should not be accepted and should not influence a worker's decisions or actions.
- Careful consideration should be given to accepting gifts, other than token items. If courtesy demands that you accept a small gift, declare it to someone at church, for instance an Elder or the treasurer, to ensure transparency.
- It is important to avoid soliciting donations from adults who may be vulnerable.

Consent and Medical Information

Adults at risk are mostly able to give consent for their own inclusion in photography and medical treatment. However, there are some things to consider:

- There may be occasions when you need to involve others in decision making. If you feel that this is the case, please speak to your DSO(s) and follow their advice.
- Have you got a medical consent form from each member of the group? This should include any current medical health issues, emergency contact information, contact details for their GP, any allergies, any dietary requirements and consent for emergency medical attention.

Holding and Dispensing of Medication

It is not appropriate for any workers to hold or dispense medication for adults at risk. If someone is unable to manage their own medication, then a risk assessment may be appropriate to consider, working in communication with any professionals already supporting the adult.

Events/trips with Adults at Risk (Including overnight)

Must:

When planning events/trips for adults at risk, you must consider the following:

- Have you completed risk assessments for all activities? This will include, travel, the location, the activities you will be doing, the needs of the group and any other relevant factors.
- Have you considered the specific medical, physical, and support needs of each person and how these needs will be appropriately met?
- Have you considered allowing adults at risk to be actively involved in planning for the trip to ensure the activities are accessible for all?

- How accessible and suitable is the venue? Is the length of travel time accessible and suitable? Is the cost of the event suitable and reasonable?
- Do you have enough workers to support the group?
- Who will be the named person for safeguarding during the outing/trip?

Sleeping Arrangements:

Must:

If you are staying overnight, you will need to consider the individual needs of the group. For example, if there is a need for personal care or support during the night, it would be more suitable that the person's usual caregiver attends. It would not be appropriate for a worker to undertake personal care for an adult at risk.

Health and Safety

Must:

Whilst Health and Safety is an area to be considered on its own, there is often overlap between Health and Safety and Safeguarding processes. All activities for children or adults at risk should comply with the church's Health and Safety policy which will include giving attention to first safety, first aid and food hygiene expectations. All those responsible for preparing and handling food during activities hold valid food hygiene certificates are effective ways of ensuring the safety of all. For more information of Health and Safety, visit: Health and safety introduction - Elim Hub

Do your workers know:

- who is responsible for health and safety in your church?
- How health and safety issues are reported, resolved and monitored?

Risk Assessments

Must:

Risk assessments are important tools to help us carefully consider potential risks and to identify how these risks can be mitigated to the best of our ability. Separate risk assessments should be completed for each activity undertaken with children or adults at risk, and it is advisable to appoint specific individuals to complete these (for example, the leader of the particular activity). Consider how risk assessments can be shared appropriately with relevant individuals, and ensure all assessments are stored carefully and reviewed regularly.

You can find risk assessment templates and guidance on ElimHUB.

Where a criminal record check is completed for a worker in regulated activity, and reveals information about convictions or cautions, individual risk assessments must be completed by the DSO/DDSO. These risk assessments evidence that careful consideration has been given to how associated risks can be mitigated, enabling the worker to safely undertake their responsibilities. If it is considered that the associated risks are too high, the worker may not be able to continue in post. The National Safeguarding Team should be informed in all such cases.

Transportation

Must

Where a church provides transport for children or adults at risk, it is responsible for their safety and must comply with all legal requirements.

- Only approved drivers who have completed the church's safer recruitment process may provide transport.
- A risk assessment must be completed where transport forms part of a church activity.
- Drivers must hold a valid licence, be fit to drive, and ensure vehicles are roadworthy, appropriately insured, and legally compliant.
- Seatbelts and appropriate child restraints must be used at all times.
- Transport arrangements, emergency contacts, and passenger records must be in place for organised trips.
- Any accidents or incidents must be reported in line with church procedures.
- Drivers must not exceed the vehicle's seating capacity.
- Drivers must not transport children or adults at risk if disqualified from driving or awaiting proceedings likely to result in disqualification.
- Drivers must not use handheld mobile devices while driving.

Should

- Drivers should have at least two years' driving experience.
- Lone transportation should be avoided where possible. Where unavoidable, consent should be obtained, the reason recorded, and another leader informed.
- Head counts should be completed when passengers enter or leave vehicles.
- Drivers should carry a charged mobile phone and avoid driving when tired or impaired.

Additional Requirements for Children

Must

- Parental consent must be obtained for journeys.
- Parents/carers must be informed of transport and collection arrangements.
- Children must be returned to an agreed collection point and never left unsupervised.
- Wherever possible, two unrelated workers should be present when transporting children. Where this is not possible, parental permission must be obtained and another leader informed.
- Children should travel in rear seats where available and use appropriate restraints.

Additional Considerations for Adults at Risk

Should

- Consider any mobility, medical, communication, or support needs.
- Agree transport arrangements with the adult at risk and, where appropriate, their carer or advocate.
- Make reasonable adjustments to enable safe transportation.

Record Keeping and Expenses

Must

- Maintain records of approved drivers, incidents, accidents, and exceptional transport arrangements.
- Any mileage or fuel reimbursement must comply with HMRC guidance and must not result in a profit being made.

2. Responding to and reporting Concerns

Concerns may arise due to the behaviour of a child or adult, or due to the conduct of an individual towards a child or adult. Alternatively, individuals may raise concerns directly by making an allegation or disclosure, or my say something during conversation with causes concern. Please refer to Elim Hub for flowchart overview's of the following guidance.

Respond and reassure

When receiving a disclosure, it can feel overwhelming and confusing. Here is a quick guide on what to do in that situation.

What to do when responding	What ***not*** to do when responding
• Remain calm. • Listen actively, with minimal interruptions, acknowledging what is being said. For example, nodding and giving eye contact. • Reassure them that they are doing the right thing, they are not to blame, and you are taking what they have said seriously. • Be honest and transparent, explaining what you will do and what will happen next, including who you might have to tell and why. • Be supportive and kind. • Give contact details for them to report any further details themselves or ask any questions that may arise. • Without delay, follow the process of reporting concerns as outlined in the safeguarding policy.	• React with visible/evident shock, disbelief, or judgement. (Be mindful of facial expressions). • Minimise, ignore, or dismiss what the person is saying. • Ask leading questions. • Make promises about confidentiality, or other promises/reassurances you can't guarantee. • Investigate the matter yourself, including talking to others who may be involved.

Record and Report

Must:

The DSO/DDSO must be informed of any concern, allegation or disclosure of abuse. Information should be written down and passed to the DSO/DDSO within 24hrs.

Recording a concern/disclosure:

- Record the disclosure as soon as possible, either by writing it down or by completing the church's online reporting form.
- State the facts accurately; avoid including personal opinions or interpretations.
- Note any visible injuries you may have observed, if applicable.
- Include the name and date of birth/age of all involved and the location of the conversation/observation.
- Clearly describe the nature of the concerns/allegation/disclosure.
- Document exactly what the child or adult at risk has said, using their own words where possible.
- Include what was said by the person to whom the concerns were reported.
- Include any initial action taken because of the concerns, if applicable.
- Sign and date it.

DSO/ DDSO Actions

Must:
If there is an emergency/threat of immediate danger to anyone, dial 999 and follow their guidance. Once you have contacted the emergency services and followed their advice, inform the DSO/DDSO, who will advise on and oversee any further action to be taken.

Under no circumstances should you contact an individual who an allegation is made against.

Where there is not an emergency, inform the DSO/DDSO within 24hrs and provide a copy of your written notes, as above.

Concerns about a child:

Where there is no emergency, but there is still concern of significant harm, or concern that a crime has been committed, the DSO/DDSO must contact relevant statutory authorities e.g. Social Services and/or Police, via 101. A

Where the subject of an allegation/concern is working in a position of trust with children, the DSO/DDSO must also report the concerns to the Local Authority Designated Officer (LADO), or equivalent.

All relevant information must be shared with the relevant statutory authorities, and the DSO/DDSO will follow the advice given by them. Details of communications, advice and action must all be recorded on Elim's iKnow safeguarding management system. For detailed information on how to use this system, including what to upload, see ElimHUB.

If any statutory authority chooses to investigate, the DSO/DDSO will follow their advice regarding action to be taken by the church. Where allegations involve workers in positions of trust, action may include stepping down from their role whilst further information is gathered/investigated.

For lower-level concerns which do not require reporting to statutory authorities or other bodies, the DSO/DDSO should consider alternative forms of support and help for the child and/or their family. For example, this could include guidance and supporting in accessing a GP, CAMHS, Counselling, Health Visitor engagement and Children's Services support.

Mandatory Reporting of Child Sexual Abuse:

It is important to note that individuals working in regulated activity have a legal duty to report concerns relating to child sexual abuse, including non-recent abuse. When an individual reports a concern relating to child sexual abuse to their DSO/DDSO, they retain personal responsibility for ensuring the concern has actually been referred on to statutory services and must not simply assume it has been dealt with. Therefore, DSO/DDSO should inform the reporter once they have made an onward referral to the police or children's services, and individual remain within their right to make direct reports to statutory services where they believe the church has failed to do so. For more information on this topic, visit ElimHUB

Concerns about an adult at risk

If there is reason to believe the adult at risk has experienced or is at risk of experiencing serious harm, then the DSO/DDSO should refer to Adult Social Care and/or the Police (for example if a crime has been committed).

Where the subject of an allegation/concern is working in a position of trust with adults at risk, the DSO/DDSO should make a Person in a Position of Trust (PiPOT) referral to Adult Social Care, or equivalent.

For lower-level concerns, then the DSO/DDSO will consider other appropriate options for action. For example, a referral to Adult Social Care, referral to the Police or is it a matter for the Church to pastorally support with.

Please note that in every case, whether responding to concerns about a child or adult, the DSO/DDSO should:

- continue to monitor and review any actions where necessary
- re-activate process if concerns remain or increase
- ensure accurate records of all information and action taken have been collated and stored appropriately on iKnow.
- ensure appropriate pastoral support is implemented for those involved

Lack of certainty should not prevent concerns from being reported, information sharing, or advice from being sought. The DSO/DDSO should seek advice from Elim's National Safeguarding Team where situations are complex, high risk or uncertain.

When any report is made to any statutory authority, the DSO/DDSO should inform the minster, as well as Elim's National Safeguarding Team.

Self-determination and independence for adults

Adults have the right to self-determination, choice, and independence. The Care Act (2014) emphasises empowering adults, balancing their choice and control with the need to prevent harm and manage risk appropriately. Adults may accept or request that formal reports are made in response to concerns for their welfare, if necessary. In such cases, appropriate referrals should be made by the DSO/DDSO.

If an adult refuses safeguarding intervention or does not want information shared, their wishes should normally be respected, and this decision should be recorded. However, information can be shared without consent in certain situations, including when:

- The adult has identified care or support need or lacks mental capacity to make a safe decision. (Workers should presume that an adult has capacity to make their own decisions unless there is evidence to suggest otherwise.)
- Others may be at risk, including children.
- A serious crime has occurred or may occur.
- The alleged abuser is also vulnerable.
- The person appears to be under duress or coercion.
- The risk is very high (e.g. meets MARAC criteria).
- There is a court order or legal requirement.
- It is an emergency or life-threatening situation.

Workers/church leaders/ministers must always inform the DSO/DDSO of any safeguarding concerns, even without the individual's consent. However, you must record clearly if consent has not been given and why. The DSO/DDSO will assess

and decide on next steps. If no action is taken or information is not shared, the reasons must be recorded and the situation regularly reviewed.

Workers should not make decisions on behalf of an adult solely because they disagree with the decision being made. When Speaking with the Adult about consent and next steps make sure to:

- Help them understand risks and possible outcomes.
- Support their decision-making and build trust.
- Use gentle persuasion and promote self-protection.
- If they object to sharing:
    - Explore their concerns and explain why sharing may help.
    - Clarify who would receive the information and why.
    - Explain benefits and possible consequences of not sharing.
    - Reassure about confidentiality and available support.

If they still do not consent, and information must be shared for safety reasons, explain why you are going to share this and record the decision. Always apply the principle of proportionality - share only what is necessary and appropriate.

Important Notes:

- If unsure, the DSO/DDSO should seek advice from statutory agencies without initially revealing the person's identity.
- Sharing information can sometimes increase risk (e.g. in cases of domestic abuse or hate crime). Always assess risks and seek professional advice.
- Only professionals should assess mental capacity or determine if a risk level requires a multi-agency response. The DSO/DDSO should refer to Adult Social Care if they have concerns regarding an adult's capacity to make safe decisions.
- The DSO/DDSO should recognise that safeguarding adults is a recognised legitimate interest and that information may be shared without consent where this is necessary, proportionate and required to prevent abuse, neglect or serious harm.

Domestic Abuse

In cases of Domestic Abuse, there can be increased risk to individuals when sharing information, and therefore careful consideration must be taken when deciding what action to take.

All information about the concern and any decisions for action must be recorded accurately and store securely.

Must:

Always inform the DSO/DDSO if you receive a disclosure or have concerns about domestic abuse. As above, inform them if the adult has already expressed that they do not wish for any action to the taken.

If there is an immediate risk of harm/threat to life, police should be contacted.

If there is no immediate risk of harm **and there are children in the home/involved**: the DSO/DDSO must make a referral to children's services, as the Domestic Abuse Act 2021 identifies children who see, hear or experience the effects of domestic abuse as victims in their own right.

Should:

If there is no immediate risk of harm **and there are no children in the home/involved:**

- Outline realistic options for the victim, such as contacting the police, connecting with local safe houses/refuges etc. Provide information about what support is available and help them to consider these options. The DSO/DDSO can make referrals on the victim's behalf, with their consent.
- If the victim does not consent to any further action (given that you have made them aware of all of the consequences) then you cannot force them to take any action. The victim will know they can return to you for help in the future and may choose to do so.
- Churches should not engage in couples mediation where domestic abuse is alleged or suspected.

Record all information about the concern and any decisions for action accurately and store securely.

Support and guidance are available from various networks such as:

- www.restored-uk.org
- We are SafeLives - Ending domestic abuse
- Domestic Abuse Helpline for Men | Men's Advice Line UK (mensadviceline.org.uk)
- www.womensaid.org.uk/information-support
- National Domestic Abuse Helpline (nationaldahelpline.org.uk)

Confidentiality, Consent and Information Sharing

In addition to the above content in relation to confidentiality, consent and information sharing, the following should also be observed:

Should:

- Consent for information sharing should be sought wherever it is safe, appropriate and practical to do so, however, information may be shared without consent where it is necessary to protect a child, adult at risk or another person from abuse, neglect or significant harm.

Must:

- Personal information must only be shared with those who have a legitimate interest for the purpose of keeping individuals safe. Only information that is relevant, necessary and proportionate to the concern should be shared.
- Information sharing must comply with Data Protection legislation and the UK GDPR. However, data protection law does not prevent the sharing of information where this is necessary to protect children, adults at risk, or others from harm.
- The DSO/DDSO must ensure that decisions relating to information sharing are recorded, including:
    - what information was shared;
    - who it was shared with;
    - why it was shared;
    - whether consent was sought;
    - if consent was not obtained, the reasons for the decision.

- Training must support workers in understanding that safeguarding concerns are shared on a need-to-know basis only and must not discussed more widely.
- All records containing safeguarding information must be stored securely and accessed only by authorised persons, via Elim's iKnow safeguarding case management system.
- Churches should ensure safeguarding information is retained, stored and disposed of in accordance with their data retention and data protection procedures.

Concerns About Workers

Workers have a responsibility to raise safeguarding concerns about those working in positions of trust or authority, regardless of the position, role or status of the individual involved. Concerns should always be reported in good faith and in accordance with safeguarding procedures.

Concerns about the conduct, behaviour or suitability of workers, volunteers, leaders, ministers, or others acting on behalf of the church must always be taken seriously and reported to the DSO/DDSO. Concerns may relate to conduct towards children, adults at risk, or behaviour that falls below expected standards and has the potential

to cause harm. This includes allegations of abuse, breaches of safeguarding procedures, abuse of trust, inappropriate relationships, and patterns of low-level concerns which may indicate wider safeguarding risks.

Should:

- The DSO/DDSO should ensure workers know how concerns can be raised or escalated if they feel unable to approach local leadership.
- Workers should seek advice from the DSO/DDSO, National Safeguarding Team, or relevant statutory agencies where they are uncertain about the appropriate reporting route.

Must:

- Workers should seek advice from the DSO/DDSO where they are unsure whether behaviour gives rise to concern.
- Workers must raise concerns where they believe that children, adults at risk or others may be at risk of harm, regardless of the position held by the person involved. Workers must not allow personal relationships, loyalty, seniority, influence or reputation to prevent them from reporting concerns.
- Workers must not investigate concerns about another worker themselves, nor attempt to resolve safeguarding concerns about another worker informally.
- Workers must not share information more widely than is necessary for safeguarding purposes.
- Workers must not victimise, intimidate or disadvantage a person who raises a genuine safeguarding concern.

Supporting those affected by abuse

Elim is committed to supporting the wellbeing of those with lived experiences of abuse, as well as those close to them who may have been affected by such abuse, regardless of the type of abuse or when/where it occurred.

It is important that individuals who have experienced abuse are met with love and compassion and are listened to without judgement. Individuals must not be made to feel responsible for what has happened to them and must not be met with judgment or accusation. They should be reassured that they are not alone and that support is available to them.

We recognise that pastoral care needs differ from person to person and by the nature of the harm that a person has endured and some individual may need or want professional guidance. Recognising this, those who have experienced abuse should be offered pastoral care informed by their expressed needs, as well as support in accessing professional counselling or other relevant professional support agencies, programmes etc.

Appendix A: Terminology

This safeguarding policy covers children and adults. A child is defined as someone under the age of 18; this includes children and young people.

An adult is generally defined as someone aged 18 and over. The different constituent parts of the UK can have country specific legislation e.g., the age of criminal responsibility. In Scotland, for example, an ‘adult at risk’ is defined as someone over the age of 16. In England, for concerns about domestic abuse, the legislation is for those 16 and over.

As adult safeguarding systems have developed there has been a move away from using the term ‘vulnerable adults’, whilst recognising that certain pieces of legislation (e.g., the Police Act 1997) and different agencies still use this term. The term ‘adult at risk’ is generally now replacing the previously used term ‘vulnerable adult’ (focusing on the situation rather than the characteristics of the adult themselves, as an adult can be more or less vulnerable at different points in their life). The Care Act 2014 does not use the word vulnerable, but rather an ‘adult with care and support needs’, who is, or is at risk of abuse or neglect. Other descriptions include ‘adults at risk’ (the Adult Support and Protection (Scotland) Act 2007, Adult Safeguarding Prevention and Protection in Partnership, July (DHSSPS)) and ‘adults in need of protection’.
‘Adult at risk’ is used in this policy to mean adults in need of protection.

This safeguarding policy will use various terms interchangeably except when referring to specific legislation or government guidance.

The term ‘Leadership’ is used to refer to the governance arrangement within an Elim church; this may be Pastors and Elders, or Senior Leaders and team.

Appendix B: Definitions and Indicators of Abuse in Children

Abuse against a child is defined as a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them, or more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate online abuse. Children may be abused by an adult or adults, or another child or children.

Child protection legislation throughout the UK is based on the United Nations Convention on the Rights of the Child. Each nation within the UK has incorporated the convention within its legislation and guidance. The definitions of abuse below operate in England based on the government guidance 'Working Together to Safeguard Children: a guide to inter-agency working to safeguard and promote the welfare of children." (H M Government 2023).

Types of Abuse	Definition	Indicators of Abuse [1]
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. In Scotland and Wales, physical punishment of a child (including hitting, shaking, slapping) is now illegal.	• Injuries not consistent with the explanation given for them. • Injuries that occur in places not normally exposed to falls, or usual children's activities. • Injuries that have not received medical attention. • Reluctance to change for, or participate in, games or swimming. • Repeated urinary infections or unexplained tummy pains. • Bruises on babies, bites, burns. Fractures which do not have accidental explanation. • Cuts/scratches/substance abuse (these can also be indications of self-harm).
Emotional Abuse	The persistent emotional maltreatment of a child such as to cause severe and	• Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clingy. • Depression, aggression or extreme anxiety.

[1] The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life.

	persistent adverse effects on the child's emotional development. It may involve conveying to a child 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 a 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 also involve seeing or hearing the ill-treatment of another individual. It could involve serious bullying (including cyber bullying), frequently causing children to feel frightened or in danger, as well as 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.	• Nervousness or frozen watchfulness. • Obsessions or phobias. • Sudden under-achievement or lack of concentration. • Inappropriate relationships with peers and/or adults. • Attention-seeking behaviour. • Persistent tiredness • Running away, stealing or lying.
Sexual Abuse	Whether or not the child is aware of what is happening or not involves forcing or enticing a child or young person to take part in sexual activities. It does not necessarily involve a high level of violence. The activities may	• Any allegations made concerning sexual abuse. • Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour. • Age-inappropriate sexual activity through words, play or drawing. • Child who is sexually provocative or seductive with adults.

	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. Sexual abuse can take place online and technology can be used to facilitate offline abuse. Adult males do not solely perpetrate sexual abuse; women can also commit acts of sexual abuse, as can other children.	• Inappropriate bed-sharing arrangements at home. • Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations. • Eating disorders, such as anorexia and bulimia.
Neglect	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 because 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);	• Under nourishment. • Failure to grow. • Constant hunger. • Stealing or gorging food. • Untreated illnesses. • Inadequate care.

	ensure access to appropriate medical care or treatment; it may also include neglect of, or unresponsiveness to, a child's basic emotional needs.	
Domestic Abuse	An incident or pattern of incidents of controlling, coercive, threatening, degrading and violent behaviour, including sexual violence. This is often by a partner or ex-partner but also by family members or carers (Women's Aid, 2022). The Domestic Abuse Act 2023 recognises the impact on a child who sees, hears, or experiences the effects of domestic abuse and treats them as victims of domestic abuse in their own right where they are related to or under parental responsibility of either the abuse or the abused. It is also recognised that young people can experience abuse in their relationships.	• Anxious or depressed. • Difficulty sleeping. • Complain of physical symptoms such as tummy aches. • Start to wet the bed. • Behave as though they are much younger than they are. • Have problems with school. • Become aggressive or internalise their distress and withdraw from other people. • Lowered sense of self-worth. • Older children may begin to truant or start using alcohol or drugs. • Begin to self-harm by taking overdoses or cutting themselves.
Child Criminal Exploitation	Occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into becoming involved in criminal activity. This is often in exchange for something the victim needs or wants, and/or the financial advantage or increased status of the perpetrator or facilitator and/or through violence or threat of violence. For example, gifts, status in a group or gang, somewhere to live etc. The acts or favours required in return are usually criminal in nature. A child may still have	• Frequently absent from and doing badly in school. • Going missing from home, staying out late and travelling for unexplained reasons. • In a relationship or hanging out with someone older than them. • Being angry, aggressive or violent, isolated or withdrawn. • Having unexplained money and buying new things. • Wearing clothes or accessories in gang colours or getting tattoos. • Using new slang words. • Spending more time on social media and being secretive about time online. • Making more calls or sending more texts, possible on a new phone or phones. • Self-harming and feeling emotionally unwell. • Taking drugs and abusing alcohol.

	been criminally exploited even if the activity appears to be something that they have agreed or consented to. There are several types of CCE: child sexual exploitation, county lines, trafficking, modern slavery and money mules (Safeguarding Network, 2023).	• Committing petty crimes like shop lifting or vandalism. • Unexplained injuries and refusing to seek medical help. • Carrying weapons or having a dangerous breed of dog.
Child Sexual Exploitation	Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur using technology.	• Unhealthy or inappropriate sexual behaviour. • Being frightened of some people, places or situations. • Being secretive. • Sharp changes in mood or character. • A sudden change in their family relationships/dynamics. • Having money or things they cannot or won't explain, such as hotel key cards or unexplained gifts. • Physical signs of abuse, like bruises or bleeding in their genital or anal area. • Alcohol or drug misuse. • Sexually transmitted infections. • A sudden and urgent request to go onto contraception or to obtain the 'morning after pill'. • Pregnancy.
County Lines	Involves illegal drug networks between large urban areas, small towns, and rural areas. Intimidation, blackmail, and violence are used to coerce children and young people into transporting and selling items for criminal enterprise such as drugs, cash and weapons. This takes place across counties and the dedicated mobile phones used to make these arrangements are known as the "county/deal lines."	• Persistently going missing from school or home and/or being found out-of-area. • Unexplained acquisition of money, clothes, jewellery, or mobile phones. • Excessive receipt of texts or phone calls. • Spending more time online or on their devices. • Using more than one phone. • Having hotel cards or keys to unknown places. • Being secretive about who they are talking to and where they are going. • Relationships with controlling older individuals or groups. • Leaving home/care without explanation. • Unexplained absences from school, college, training or work.

		• Returning home unusually late or staying out all night. • Suspicion of physical assault or unexplained injuries. • Carrying weapons. • Starting or increasing drug use or being found to have large amounts of drugs on them. • Starting or increasing alcohol use. • Loss of interest in school and significant decline in performance. • Using sexual, gang, drug-related or violent language you would not expect them to know. • Meeting with unfamiliar people or associating with a gang. • Becoming isolated from peers or social networks.
Modern Slavery	This affects anyone no matter what their age and gender. Examples include, human trafficking, exploitation servitude and forced or compulsory marriage. Modern slavery is used as an umbrella term for mostly hidden crime, therefore acquiring a true picture of the situation and its prevalence is challenging.	• Behaviour not typical of their age. • Have no friends of their own age. • Have no access to education. • Have no time for playing. • Persistently missing from home and/or school. • Decline in school performance. • Unfamiliar with the local area. • Unsure of where they live. • Live somewhere inappropriate. • Withdrawal and/or sudden change in personality or behaviour. • Unwilling to explain their whereabouts. • Found out of area and/or travelling to locations they have no obvious connections with. • Travel unaccompanied by adults. • Engaged in work that is not suitable for children. • Unexplained money, clothes, accessories, or mobile phones. • Receive excessive texts or calls. • Have multiple phones and/or sim cards. • Gang association or isolated from peers.
Trafficking	Moving humans from one place to another with the intension of involving them in forced labour, slavery, or sexual exploitation. This is one of the fastest growing areas of international crime involving gangs and criminal organisations.	• Have to do excessive housework chores. • Rarely leave the house and have limited freedom of movement. • Not have any documents (or have falsified documents). • Give a prepared story which is very similar to stories given by other children. • Be unable or reluctant to give details of accommodation or personal details. • Not be registered with a school or a GP practice.

		• Have a history with missing links and unexplained moves. • Be cared for by adults who are not their parents or carers. • Not have a good quality relationship with their adult carers. • Be one among a number of unrelated children found at one address. • Receive unexplained or unidentified phone calls whilst in a care placement or temporary accommodation
Extremism	Extremism goes beyond terrorism and includes people who target vulnerable, including the young, by seeking to sow division between communities because of 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.	• Withdrawal from family and friends or changing circle of friends. • Hostility towards others. • Talking as if from a script. • Being unwilling to discuss their views. • Increased levels of anger. • Being secretive, particularly around what they are doing on the internet. • Using extremist terms to exclude people or incite violence. • Expressing the values of extremist or terrorist organisations (including political or religious based grievances). • Supporting violence and terrorism towards other cultures, nationalities, or religions. • Writing or creating artwork that promotes extremist values. • Talking about being a 'martyr'. • Possession of extremist literature or other material or trying to access extremist websites. • Possession of any material about weapons, explosives, or military training.
Female Genital Mutilation	When a female's genitals are deliberately altered or removed for non-medical reasons. This can also be called "female circumcision" or "cutting". (NSPCC, 2024).	• A long family holiday overseas to visit family abroad during the summer holidays. • May talk of this holiday including a special ceremony where a girl 'becomes a woman' or is 'prepared for marriage.' Younger children may be excited for this; older children may appear fearful or anxious about this. • A close female relative, like a mother, sister or aunt has undergone FGM. • Unexpected or long absence from school or finishing school year early/starting late due to a holiday. • Acting differently after an absence from school or college, for example more quiet, anxious or depressed.

		• Difficulty walking, standing or sitting. • Spending longer in the bathroom or toilet. • Reluctance to go to the doctors or have routine medical examinations. • Running away – or planning to run away – from home.

Appendix C: Definitions and Indicators of Abuse in Adults

Safeguarding adults is defined in the Care Act 2014 as protecting adults at risk of abuse or neglect, ensuring their well-being and safety. The legislation is relevant across England and Wales but on occasions apples only to local authorities in England.

The safeguarding duties apply to an adult who:

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

Type of Abuse	Definition	Indicators of Abuse
Physical abuse	Including assault, hitting, slapping, pushing, misuse of medication, restraint, or inappropriate physical sanctions.	• History of unexplained falls, fractures, bruises, burns or minor injuries. • Signs of under or overuse of medication and/or medical problems left unattended. • Any injuries not consistent with the explanation given for them. • Bruising and discolouration particularly if there is a lot of bruising of different ages and in places not normally exposed to falls, rough games etc. • Recurring injuries without plausible explanation. • Loss of hair, loss of weight and change of appetite. • Person flinches at physical contact and/or keeps fully covered, even in hot weather.

Domestic abuse and violence	Including psychological, physical, sexual, financial, and emotional abuse, so-called 'honour' based violence. This is also any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence, or abuse between those 16 years or over who are, or have been, intimate partners or family members regardless of gender or sexuality. This might involve but isn't limited to psychological, sexual, financial, and emotional abuse. The Serious Crimes Act 2015 created a new offence of coercive and controlling behaviour within intimate and familial relationships.	• Unexplained injuries or 'excuses' for marks or scars. • Controlling and/or threatening relationships including psychological, physical, sexual, financial, and emotional abuse, so-called 'honour-based' violence and Female Genital Mutilation. • Low self-esteem. • Feeling that the abuse was their fault. • Physical evidence of violence such as bruising, cuts, broken bones. • Verbal abuse and humiliation in front of others. • Fear of outside intervention. • Damage to home or property. • Isolation – not seeing friends and family. • Extreme jealousy and possessiveness.
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 consent or was pressured into consenting.	• Pregnancy in a woman who lacks mental capacity or is unable to consent to sexual intercourse. • Unexplained change in behaviour or sexually explicit behaviour. • Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting. • Infections or sexually transmitted diseases. • Full or partial discloses or hints of sexual abuse. • Self-harming, emotional distress, mood changes, disturbed sleep patterns.
Psychological abuse	Including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyberbullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.	• Alteration in psychological state e.g. withdrawn, agitated, anxious or tearful. • Intimidated or subdued in the presence of a career. • Fearful, flinching or frightened of making choices or expressing wishes. • Unexplained paranoia. • Changes in mood, attitude, behaviour, excessive fear or anxiety. • Changes in sleep pattern or persistent tiredness. • Loss of appetite. • Helplessness or passivity.

		• Confusion or disorientation. • Implausible stories and attention seeking behaviour. • Low self-esteem.
Spiritual abuse	Spiritual abuse is a form of emotional and psychological abuse. It is characterised by a systematic pattern of coercive and controlling behaviour in a religious context. Spiritual abuse can have a deeply damaging impact on those who experience it and can be experienced in a variety of different relationships. Spiritual abuse may occur on its own, or alongside other forms of abuse, such as physical or sexual abuse. It may be used to 'legitimise' or facilitate other forms of abuse.	• Manipulation and exploitation. • Enforced accountability. • Requirements for secrecy and silence. • Coercion to conform, for example, seeking to enforce rather than encourage behavioural changes, failing to allow an individual autonomy to make their own choices. • Exercising control through using sacred texts or teaching to coerce behaviour. • Requirement of obedience to the abuser. • The suggestion that the abuser has a 'divine' position. • Isolation as a means of punishment. • Superiority and elitism.
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.	• Disparity between assets and living conditions. • Unexplained withdrawals from accounts or disappearance of financial documents or loss of money. • Sudden inability to pay bills or getting into debt. • Carers or professionals fail to account for expenses incurred on a person's behalf. • Recent changes of deeds or title to property. • Missing personal belongings. • Inappropriate granting and/or use of Power of Attorney, or unexplained changes to a will.
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	• Physical appearance is unkempt, inappropriate clothing, malnourished. • Movement monitored, rarely alone, travel early or late at night to facilitate working hours. • Few personal possessions or identity documents. • Fear of seeking help or trusting people.

	of abuse, servitude and inhumane treatment.	
Discriminatory abuse	Including forms of harassment, slurs or similar treatment because of race, gender and gender identify, age, disability, sexual orientation, or religion.	• Inappropriate remarks, comments or lack of respect. • Poor quality or avoidance of care. • Low self-esteem, anger or withdrawn. • Person puts themselves down in terms of their gender or sexuality. • Abuse may be observed in conversations or reports by the person of how they perceive themselves.
Organisational abuse	Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home or in relation to care provided in one's own home. This may range from one off incidents to on-going-ill-treatment. It can be through neglect or poor professional practice because of the structure, policies, processes and practices within an organisation.	• Low self-esteem, anger or withdrawn. • Person puts themselves down in terms of their gender or sexuality. • Abuse may be observed in conversations or reports by the person how they perceive themselves. • No confidence in complaints procedures for staff or service users. • Neglectful or poor professional practice.
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.	• Deteriorating despite apparent care. • Poor home conditions, clothing or care and support. • Lack of medication or medical intervention.
Self-neglect	This covers a wide range of behaviour neglecting to care one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Incidents of abuse may be one-off or multiple and affect one person or more.	• Hoarding inside or outside a property. • Neglecting personal hygiene or medical needs. • Looking unkempt or dirty and has poor personal hygiene. • Malnourished, has sudden or continuous weight loss, is dehydrated, is constantly hungry, stealing or gorging on food. • Dressed inappropriately for the weather. • Dirt, urine or faecal smells in a person's environment. • Home environment does not meet basic needs (for example, no heating or lighting).

		• Depression.