



## The CIP Project CIC.

### Safeguarding Children and Vulnerable Adults Policy

Date Reviewed by CIP Project Director                      1st January 2024  
Date for Review    31 December 2024

#### Contents

<b>POLICY STATEMENT</b> .....	<b>2</b>
<b>EQUALITY STATEMENT</b> .....	<b>3</b>
<b>CONFIDENTIALITY STATEMENT</b> .....	<b>3</b>
<b>AWARENESS OF THE ISSUES</b> .....	<b>4</b>
<b>INDICATORS OF ABUSE</b> .....	<b>5</b>
<b>RESPONDING TO DISCLOSURE OF ABUSE</b> .....	<b>6</b>
<b>DESIGNATED PERSON</b> .....	<b>5</b>
<b>SAFE RECRUITMENT PROCEDURES FOR STAFF/VOLUNTEERS</b> .....	<b>6</b>
<b>TRAINING FOR STAFF/VOLUNTEERS</b> .....	<b>7</b>
<b>CODES OF CONDUCT</b> .....	<b>7</b>
<b>GUIDELINES RELATING TO AWAY DAYS AND RESIDENTIALS</b> .....	<b>7</b>
<b>SUPPORT &amp; SUPERVISION</b> .....	<b>8</b>
<b>GUIDELINES FOR REPORTING ACCIDENTS</b> .....	<b>8</b>
<b>GUIDELINES FOR REPORTING ALLEGATIONS/ INCIDENTS</b> .....	<b>8</b>
<b>HEALTH AND SAFETY GUIDELINES</b> .....	<b>9</b>
<b>USEFUL NUMBERS</b> .....	<b>9</b>
<b>INTERNAL CONCERNS FLOW CHART</b> .....	<b>9</b>
<b>EXTERNAL CONCERNS FLOW CHART</b> .....	<b>12</b>
<b>APPENDIX 1: Six Safeguarding Principles</b>	
<b>APPENDIX 2: CIP Child and Vulnerable Adult Protection Code of Conduct</b>	
<b>APPENDIX 3: CIP Project Accident Form</b>	
<b>APPENDIX 4: CIP Safeguarding Alert Form</b>	

## POLICY STATEMENT

We at CIP are committed to good practice which protects children and vulnerable adults from harm. Staff and volunteers accept and recognise their responsibility to provide an environment which promotes the safety of the child and vulnerable adults at all times. To achieve this we will:

- Develop an awareness of the issues which may lead to children and vulnerable adults being harmed.
- Create an open environment by identifying a 'Designated person' on each project to whom the children and vulnerable adults can turn to if they need to talk.
- Adopt child and vulnerable adult centered and democratic mentoring styles.
- Adopt safeguarding guidelines through codes of conduct for all adults working on behalf of CIP. Adult workers include full-time and part-time staff, freelance workers and volunteers.
- Ensure careful recruitment, selection, and management procedures. These procedures will ensure that regular support & supervision is provided to staff/volunteers. All newly appointed CIP staff are required to complete safeguarding training as part of the induction process.
- Share information about concerns with relevant and appropriate external organisations.
- Provide information as required to the Board.
- Ensure good and safe working practices.
- Be involved in training made available through the various agencies and strengthen links with these agencies.
- Keep Safeguarding policies under regular review (every 2 years minimum).
- Have an induction document available for staff and volunteers clearly outlining their rights and responsibilities.

  
\_\_\_\_\_  
Director, CIP Project

1 January 2024

\_\_\_\_\_  
Date

The Children Act (1975) is based on a clear and consistent set of principles designed with the common aim of promoting the welfare of children. At CIP, these principles are also applied to vulnerable adults.

Children and vulnerable adults have the right to be safe. All staff and volunteers should ensure that this fundamental principle takes precedence over all other considerations.

This policy applies to all those involved in The CIP Project: staff, freelance personnel, volunteers, parents, children and vulnerable adults.

Children are defined as:

- All young people under the age of 18.

At the age of 16, a young person is allowed to leave home, consent to lawful sexual intercourse, get married or get a full time job, however, child protection extends to the age of 18 years. In the case of care leavers, child protection can extend to the age of 21 years.

Vulnerable adults are defined as:

- People aged 18 or over
- Who are receiving, or may need community care services, because of learning, physical or mental disability, age, or illness
- Who are or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation

## **EQUALITY STATEMENT**

Available from the CIP office.

## **CONFIDENTIALITY STATEMENT**

We at The CIP Project will never promise to keep secrets. However, information of a confidential nature will only be communicated on a "need to know" basis, with the welfare of the child and vulnerable adult paramount.

Considerations of confidentiality will not be allowed to override the rights of children or vulnerable adults to be protected from harm.

## **AWARENESS OF THE ISSUES**

Background knowledge in relation to child and vulnerable adult abuse, the general principles of safeguarding and the ability to recognise and respond to abuse are important issues. Of primary concern for CIP is the issue of safeguarding of children and vulnerable adults whom we

work with. However, being cognisant of the indicators of abuse in respect of children and vulnerable adults caused by others outside the organisation, are of an equal importance for the safety and well being of that child and vulnerable adult.

**Co-operating to Safeguard Children 2003 formally recognises four types of abuse which can also apply to vulnerable adults:**

### **Physical Abuse**

Physical abuse is the deliberate physical injury to a child, or the wilful or neglectful failure to prevent physical injury or suffering. This may include hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, confinement to a room or cot, or inappropriately giving drugs to control behaviour.

### **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 insofar as they meet the needs of another person. It may involve 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. Domestic violence, adult mental health problems and parental substance misuse may expose children to emotional abuse.

### **Sexual Abuse**

Sexual abuse involves forcing or enticing a child 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 or non-penetrative acts. They may include non-contact activities, such as involving children in looking at or the production of pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

### **Neglect**

Neglect is the persistent failure to meet a child's physical, emotional and/or psychological needs, likely to result in significant harm. It may involve a parent or guardian failing to provide adequate foods, shelter and clothing, failing to protect a child from physical harm or danger, failing to ensure access to appropriate medical care or treatment, lack of stimulation or lack of supervision. It may also include non-organic failure to thrive (faltering growth).

Staff and volunteers should challenge bullying in any form i.e. physical or emotional. Physical bullying can take the form of attacks, such as hitting, kicking, taking or damaging belongings. Emotional bullying may be a verbal assault, including name-calling, insults, repeat teasing, sectarian/racist assaults, or it may take more indirect forms, such as spreading malicious gossip, rumours or excluding someone from a social group. Bullying is not an accepted behaviour towards anyone at CIP be they child, young person, parent, volunteer or staff. Anyone found to be bullying others will be dealt with seriously both in regards to the behaviour exhibited and the reasons for the behaviour. This organisation has an anti-bullying policy in place.

### **INDICATORS OF ABUSE**

The following is a list of some indicators of abuse, but it is not exhaustive:

PHYSICAL INDICATORS	BEHAVIOURAL INDICATORS
<ul style="list-style-type: none"> <li>▪ Unexplained bruising in soft tissue areas</li> <li>▪ Repeated injuries</li> <li>▪ Black eyes</li> <li>▪ Injuries to the mouth</li> <li>▪ Torn or bloodstained clothing</li> <li>▪ Burns or scalds</li> <li>▪ Bites</li> <li>▪ Fractures</li> <li>▪ Marks from implements</li> <li>▪ Inconsistent stories/excuses relating to injuries</li> </ul>	<ul style="list-style-type: none"> <li>▪ Unexplained changes in behaviour - becoming withdrawn or aggressive</li> <li>▪ Difficulty in making friends</li> <li>▪ Distrustful of adults or excessive attachment to adults</li> <li>▪ Sudden drop in performance</li> <li>▪ Changes in attendance pattern</li> <li>▪ Inappropriate sexual awareness, behaviour or language</li> <li>▪ Reluctance to remove clothing</li> </ul>

#### RESPONDING TO DISCLOSURE OF ABUSE

- Stay calm and be sympathetic
- Listen to what you are told without displaying shock or disbelief
- Be observant and attentive without being judgmental
- Do not probe or put words into the persons mouth – accept what is said
- If you can, take notes but if this will stop the person talking or stops you dealing with the person appropriately, take notes as soon as possible afterwards. Be as accurate as you can. Do not ‘fill in blanks’ or add your own words or thoughts. Use the child’s or vulnerable adult’s own words even if they use colloquial language or swear
- Reassure the person, but do not make promises that you may not be able to keep e.g. ‘everything will be alright’ or ‘I won’t tell anyone’. Do not promise confidentiality
- Do not ask leading questions or interrogate. Ask open questions which will encourage the person to talk openly
- It is not your job to investigate; this can only be done by the relevant agencies such as the police or social care. You should only ask enough to establish to nature of the disclosure
- Do not criticise the perpetrator or be judgmental
- Do not touch the person to comfort or reassure them
- Do not ask the person to repeat it all for another member of staff
- Explain what you have to do next and who you have to talk to but ask the person what they would like to happen and encourage them to accept the steps that have to be taken next

#### DESIGNATED PERSON

The designated people within CIP are:

Sarah Vaughan Griffiths (Company Secretary)  
 Michael Wright (Director)

Luke Szachnowski (Director)

Contact number: **01823 680 433**

Cornerways, Clayhidon, Devon EX15 3PQ

Michael and/or Sarah shall be made known to children and vulnerable adults that we work with as the designated person to whom concerns will be addressed. If the concern is about the designated person please report to the CIP board member, Luke Szachnowski. If the concern is about Luke Szachnowski, please report to CIP board member Michael Wright.

Guidelines for recording/dealing with incidents/accidents will be outlined later in this policy document. Also included are four Safeguarding Principles as agreed within the Care Act 2014 (Appendix 4).

### **SAFE RECRUITMENT PROCEDURES FOR STAFF/VOLUNTEERS**

- Staff and volunteers are carefully selected, trained and supervised in an open, fair and transparent manner.
- Individuals working directly with children or vulnerable adults must complete the Care Check Disclosure and Barring Service Check as appropriate. Declaration of past convictions or cases pending and agreement to have an Basic DBS checks completed, is of course a pre-requisite to approval of staff/volunteer to work with young people.

**ALL** staff/volunteers must agree to abide by CIP's Safeguarding Policy.

■

### **TRAINING FOR STAFF/VOLUNTEERS**

CIP will:

- When appointing staff/volunteers consider their current or previous experience of working with children and vulnerable adults.
- Education and training in the fundamentals of safeguarding will apply to all staff/volunteers working with the children or vulnerable adults. CIP is committed to continuous updating and review of our current Safeguarding Policy.

- Safeguarding training will be formally presented by the CIP director, Michael Wright, annually and will include:
  - Fundamental awareness of safeguarding issues
  - Our organisation's Children and Vulnerable Adult Policy and procedures, including our Company Code of Conduct and our Child and Vulnerable Adult Protection Code of Conduct (Appendix 2)
- Ensure that all staff/volunteers have attended safeguarding awareness workshop within six months of taking up their post.
- Ensure all staff and volunteers should receive induction, and training appropriate to their role. Training will be updated and reviewed regularly for new staff/volunteers and in line with changing legislation.

## **CODES OF CONDUCT**

A Code of Conduct lets all our staff/volunteers in our organisation know what behaviour is expected and what is unacceptable. It will also let all involved know what sanctions will be applied for non-compliance with the Code. A written Code of Conduct will be prominently displayed or communicated to everyone associated with our organisation. It will be applied consistently.

## **GUIDELINES RELATING TO RESIDENTIALS**

Travelling to residentials at home and overseas can occur. Trips may vary from short journeys or involve more complicated arrangements involving overnight stays. But CIP is committed to ensuring that we follow certain standards to ensure the safety of the children and vulnerable adults who we work with.

## **SUPPORT & SUPERVISION**

CIP recognises that it is good practice to set up a system of support & supervision of staff/volunteers. This will enable staff/volunteers to become more effective by identifying training needs and dealing quickly with difficulties. Volunteers will be offered regular opportunities to review their experiences at CIP and to identify any training or further support they require.

## **GUIDELINES FOR REPORTING ACCIDENTS**

In the event of an accident, the following procedure will be carried out:-

- Fill in 2 copies of the CIP Project Accident Form (Appendix 3) for **ALL** accidents
- Make contact with parents/guardians/carers
- One copy of form to incident folder
- Forward 1 copy to CIP Director for record keeping/action required
- Contact emergency services/ GP if required

- Record in detail all facts surrounding the accident, witness's etc.
- Sign off on any action required from CIP Ops Director.

#### **GUIDELINES FOR REPORTING ALLEGATIONS/ INCIDENTS**

- Record all incidents reported, or observed, using the CIP Safeguarding Alert Form (Appendix 4)
- Inform Project Manager or Director ASAP
- 1 copy to be sent to the Director within 24 hours
- Ensure confidentiality - only "need to know basis" (reference confidentiality statement)
- Inform parents/guardians/carers, unless to do so may put the child or vulnerable adult at further risk
- The person filling in the Safeguarding Alert Form is responsible for ensuring the report is stored in a safe and secure environment in the CIP Office.

See flow charts for further guidance.

#### **HEALTH AND SAFETY GUIDELINES**

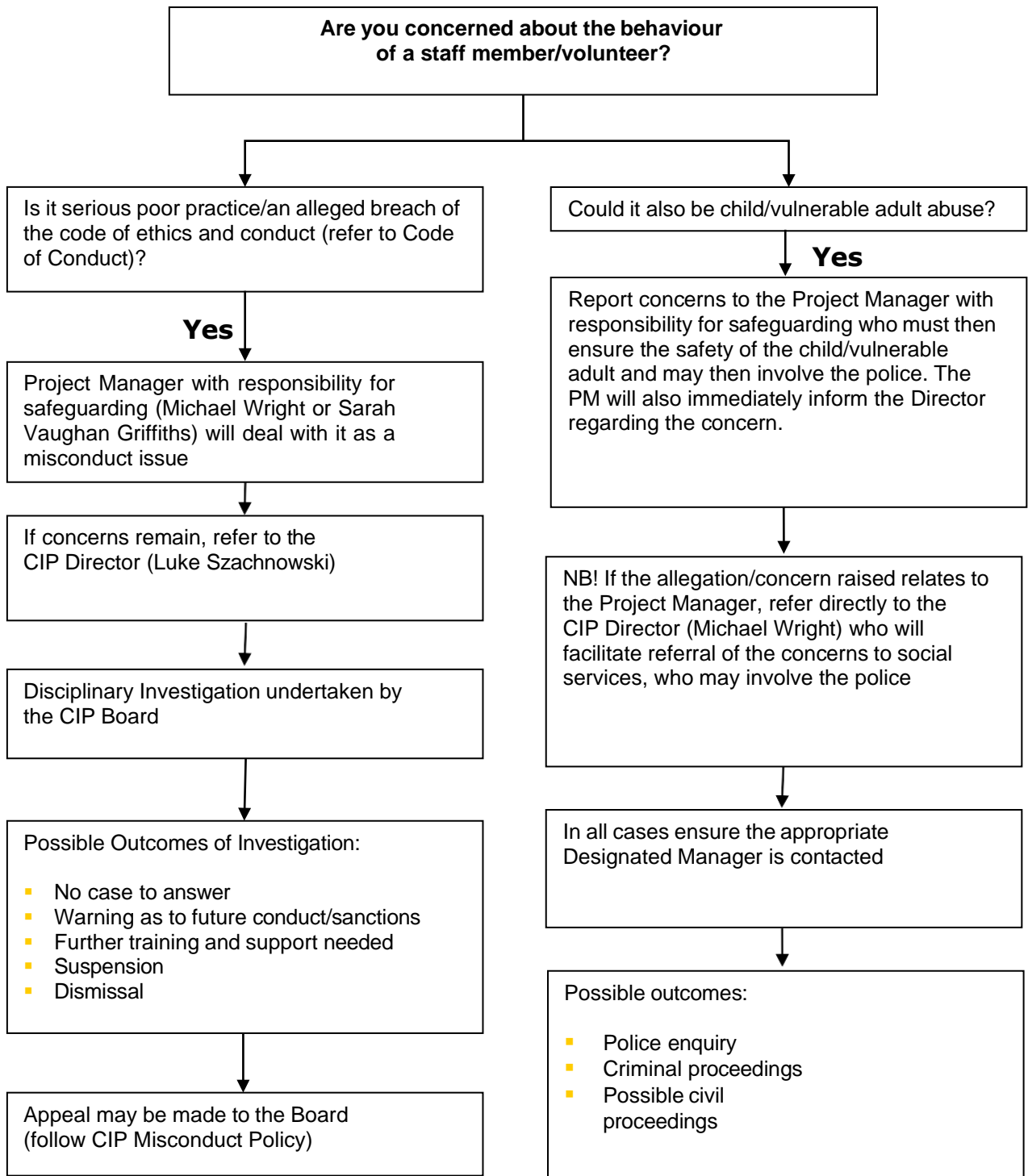
This organisation is committed to ensure the safety of all staff, volunteers and the children and vulnerable adults we are engaged with, by completing a risk assessment for activities and endeavouring to provide first aid treatment for injury, accidents and cases of ill health.

A copy of CIP's Risk Assessment and Health and Safety Guidelines are available from the office.

<b>USEFUL NUMBERS</b>	
<b>CIP Office</b>	01823 680 433
<b>NSPCC Helpline</b>	0808 800 5000
<b>Police Public Protection Unit</b>	101 Ask for your local Public Protection Unit
<b>Childline</b>	Freephone 0800 1111
<b>Lifeline</b>	0808 808 8000
<b>Samaritans</b>	0845 7909090



## INTERNAL CONCERNS FLOW CHART

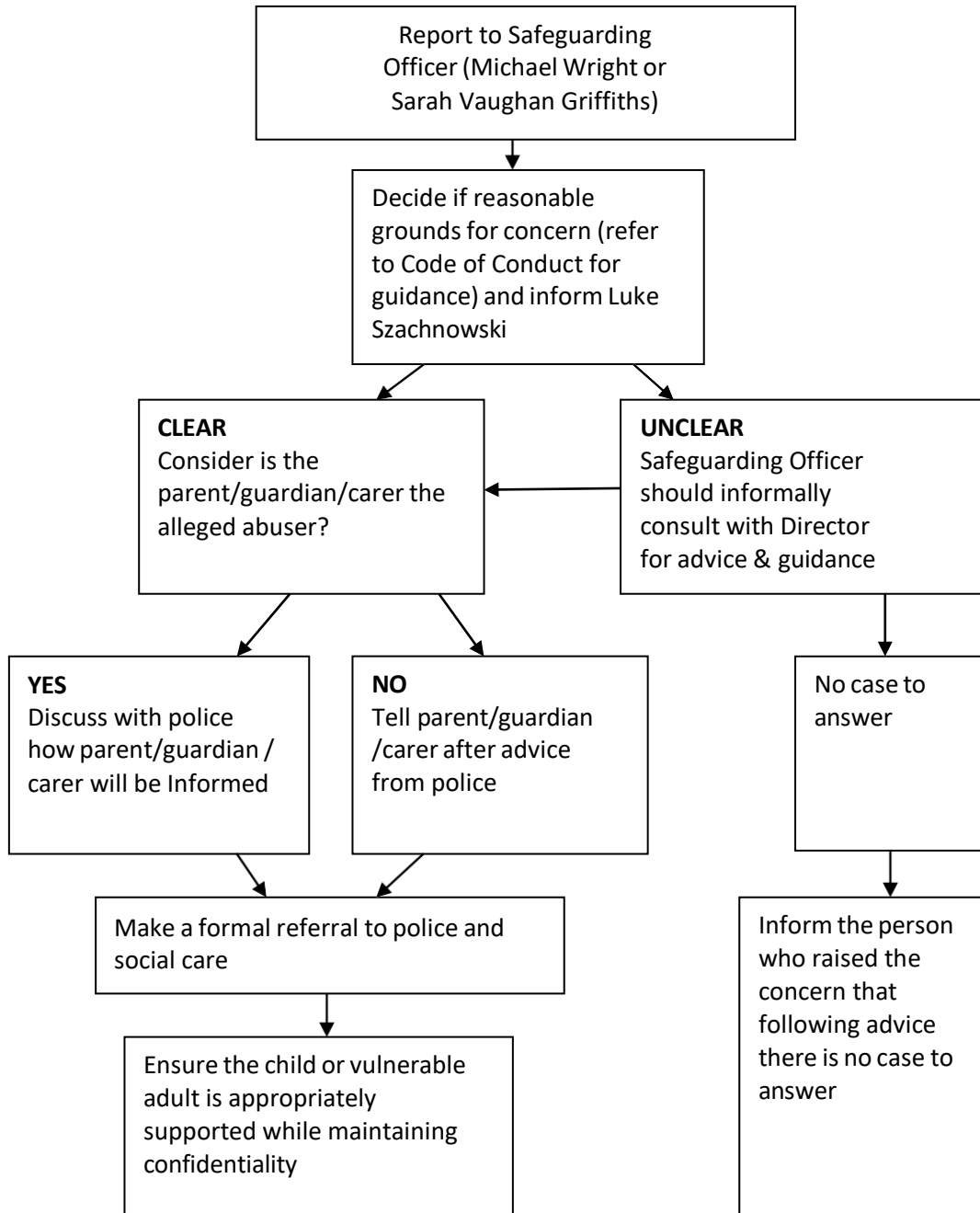


If you do not know who to turn to for advice, or are worried about sharing your concerns with a senior colleague, you should contact one of the external agencies listed above. At any stage during the process in the flow chart, the issue can be referred externally (either formally or informally) for advice.

The vast majority of people who work with children and vulnerable adults are well motivated. Unfortunately, a few do not and it is essential that CIP creates a culture that makes staff and volunteers willing and comfortable to voice their concerns, particularly those about someone with whom they work, or whom they know. Again, CIP's Safeguarding procedures should be followed.

During an investigation, support will be given both to the individual who voices concerns and to the suspected abuser. Once the investigation is completed, CIP will decide what action, if any, is necessary to prevent a similar situation arising again.

**EXTERNAL CONCERNS FLOW CHART**  
**When the concern is about possible abuse outside the organisation**



## Appendix 1

### Six Safeguarding Principles

The six safeguarding principles were originally produced for the safeguarding of adults but can also be applied to the safeguarding of children.

Safeguarding both adults and children is about preventing the risk of harm from abuse or exploitation or having the ability to reduce it by raising awareness and supporting people in making informed decisions.

**The UK Government created these six safeguarding principles especially for the health and social care sector to help better protect adults.**

Together, the principles are an aid to understanding actions that need to be taken to protect people and are agreed within the Care Act 2014.



#### 1. Empowerment

Ensuring people are supported and confident in making their own decisions and giving informed consent.

Empowerment gives individuals choice and control over decisions made.



#### 2. Protection

Providing support and representation for those in greatest need.

Organisations can put measures in place to help stop abuse from occurring and offer help and support to those at risk



#### 3. Prevention

It is crucial to try and take action before harm occurs; preventing neglect, harm or abuse is the primary objective.

Prevention is the act of organisations working to stop abuse before it happens. Raising awareness, training staff and making information easily accessible are all ways that they can demonstrate prevention measures and encourage individuals to ask for help.



#### 4. Proportionality

We must take a proportionate and least intrusive response to the issue presented.

Proportionality ensures that services take each person into account when dealing with abuse. They will respect each individual and assess any risks presented.

## Appendix 2

### CIP Child and Vulnerable Adult Protection Code of Conduct

We have a great opportunity to be a positive role model and help build an individual's ability for later life. However, in doing so we must ensure that we maintain proper conduct, which is outlined below.

**All CIP staff, volunteers and suppliers working with children and vulnerable adults are expected to:**

- Ensure the safety of all participants by careful supervision, proper pre-planning of sessions and using safe methods at all times.
- Encourage and guide participants to accept responsibility for their own performance and behaviour.
- Treat all participants equally and ensure they feel valued. Have no favourites.
- Encourage all participants not to discriminate on any grounds, including: (but not limited to) religious beliefs, race, gender, sexual orientation, or social class.
- Not allow any bullying, use of bad language or inappropriate behaviour.
- Be positive, approachable and offer praise to promote the objectives of the project.
- Not let any allegations of abuse of any kind to go unchallenged or unrecorded if appropriate. Incidents and accidents to be recorded in line with CIP Safeguarding Policy.
- Report accidents or incidents of alleged abuse, or poor practice, to the Safeguarding Officer.
- Have access to telephone for immediate contact to emergency services if required.
- Not abuse those on the project in any shape, including physically, emotionally or sexually.
- Respect and listen to the opinions of all.
- Develop an appropriate working relationship with participants, based on mutual trust and respect.
- Do not ask participants for more personal information that is necessary.
- Be a role model, displaying consistently high standard of behaviour and appearance.
- Refrain from smoking and consumption of alcohol during project activities.
- Never condone the use of prohibited substances.
- Protect themselves from false accusation using sensible precautions (for example not spending excessive amounts of time alone with young people away from others).

**CIP operates a policy of zero-tolerance of abuse wherever it occurs.**

## Appendix 3

### CIP Project Accident Form

In the event of an accident, the following procedure should be followed:

- Administer First Aid if appropriate/Contact emergency services/GP if required
- Fill in 2 copies of the Accident Form for **ALL** accidents
- Make contact with parents/guardians if accident involves a child, or carers (or other named contact) if the accident involves a vulnerable adult
- One copy of form to Project Incident Folder
- Forward 1 copy to CIP Director (Michael Wright)for record keeping/action required.
- Record in detail all facts surrounding the accident, witness's etc.
- Any further action
- Sign off on any action required from CIP Director

<b>Name of Project:</b>
<b>Director in attendance:</b>

<b>Injured person information</b>	
<b>Name of injured person:</b>	
<b>Address:</b>	
<b>Date of birth:</b>	
<b>Gender:</b>	

Accident information			
Date of accident:		Time of accident:	
Date reported:		Time reported:	
Accident reported by who:			
Location of accident:			
Details of injury			
Nature and how accident happened:			
Did anyone witness the accident:	Yes /No <i>(If Yes, state witness name/s and details below)</i>		
Name of witnesses:			
First aid involved: <i>(please provide details)</i>			
Parents/guardians/carers/named contact notified:	Yes/No <i>(If Yes, by whom and when below)</i>		
Parents/guardians/carers/named contact notified by whom and when:			
Form completed by:			
Recommended action to be taken:			
Referred to CIP Director	Yes /No <i>(If Yes, signature and name below)</i>		
Signature:			
Print name:			

Signature of Project Manager:	
Print name:	

**Appendix 4**

**Safeguarding Alert Form**

This form is to be used to notify Police or Social Care of actual or suspected incidents of abuse

**Person completing the form**

**Position:**

**Organisation Name:**

**Phone contact details:**

**Date of Notification:**

**Details of incident/suspected or actual abuse**

**Date of alleged incident/harm:**

**Area where incident/harm took place:**

**Time of alleged incident/harm**

**Who reported the alert:**

**Who was involved**

**1. Details of alleged victim**

**Name:**

**Address:**

**Date of Birth:**

**Phone :**

**Name of GP:**

**Address:**

**Ethnic Origin:**

**Are they a child? Yes/No**

**Are they a vulnerable adult? Yes/No**

**Nature of alleged victims' vulnerability:**

**Any other details (e.g. communication needs):**



## 2. Details of Alleged Perpetrator

Name :

Address:

Date of Birth:

Phone Contact:

If the alleged perpetrator is a staff member please provide staff details: (E.g. job role, employer, address of place of work)

Ethnic Origin:

Relationship to victim:

Are they a child? Yes/No

Are they a vulnerable adult? Yes/No

Alleged perpetrator's vulnerability (if applicable):

Have you made the victim aware that details of the incident are being recorded and will be investigated: Yes/No

If not, why not?

### Type of Abuse

(Please tick one or more)

Sexual		Physical	
Emotional		Neglect or omission	
Psychological		Financial/Material	
Discriminatory Abuse		Institutional	
Other i.e. suspicious death of a service user			

<p><b>Description of alleged incident/alleged harm, detailing all people involved including witnesses</b>  On this page please give a detailed description of the incident (please include times) and any other comments you feel are relevant. If necessary attach further pages.</p>
<p><b>What action did you take immediately after the incident/allegation of harm</b> (E.g. administered first aid, asked perpetrator to leave, took victim to secure area)</p>
<p><b>Were the Police called?      Yes/No</b>  <b>Were any other emergency services called: Yes/No</b>  If yes, which service(s)?</p>
<p><b>Names and badge numbers of Police:</b>  <b>Outcome:</b> (Response time, taken to hospital etc)</p>
<p><b>Are there any other Agencies involved?      Yes/No</b>  If yes, please provide details of Agencies:</p>
<p><b>Are there any capacity issues?                      Yes/ No</b>  If yes, please provide details:</p>
<p><b>Has the victim made any previous referrals/alerts?                      Yes/No</b>  If yes, please provide details (e.g. dates, type of abuse):</p>
<p><b>Is the victim in immediate danger of further abuse?                      Yes/No</b>  If yes, please provide details:</p> <p><b>Have any immediate actions been identified to reduce the potential for further abuse?      Yes/No</b>  If yes, please provide details:</p>

**Has an initial assessment been made to determine further potential risk to the victim? Yes/No**

What actions have been taken to reduce the potential for further abuse?

**Are there any risks to others? Yes/No**

**Please provide details** (include who this information has been shared with – e.g. Children’s Social Care, Adult Social Care, Police):

**Signed:**

**Date:**

**Time:**

**This form must be sent to the CIP Director, Social Services and the Referral Agent (if appropriate) within 24 hours of the suspected or actual abuse, or as soon as possible after being made aware. The Police should also be issued with this form if it has been necessary to contact the police. This must be accompanied by a phone call to the Director/Social Services/Referral Agent advising alert is being sent.**

This is a confidential document and should be stored securely according to CIP's procedures. It is the responsibility of the person completing this form to ensure that this is done.