



Policy Title	Safeguarding Children & Adults at Risk Policy
Policy Number	2
Version Ref.	V 1.1
Live Date	2025
Review Date	2026

This policy applies to all who have a stake in Sebastian's Action Trust, including individuals and families who access our services, supporters, shop customers, donors (including those supporting via their company), volunteers (including Trustees), and staff. Sebastian's Action Trust reserves the right to review, revise, amend or replace the content of this policy, and introduce new policies from time to time, to reflect the changing needs of the Trust and to comply with changes to legislation

SAFEGUARDING CHILDREN AND ADULTS AT RISK POLICY

1 AIM

- 1.1 The purpose of this policy is to outline the duty and responsibility of anyone working on behalf of Sebastian's Action Trust including senior manager, board of trustees, paid staff, volunteers, sessional workers, agency staff and students, in relation to safeguarding children, young people and adults at risk.
- 1.2 All children/adults have the right to be safe from harm and must be able to live free from fear of abuse, neglect and exploitation.

2 OBJECTIVES

- 2.1 To explain the responsibilities the organisation and its staff, volunteers and trustees have in respect of child/adult at risk protection.
- 2.2 To provide staff with an overview of child/adult at risk protection
- 2.3 To provide a clear procedure that will be implemented where child/adult at risk protection issues arise.

3 CONTEXT

3.1 Who is included under the heading 'adult at risk?'

- 3.1.1 An Adult (a person aged 18 or over) who 'is or may be in need of care and support due to age, disability, or illness; and who is or may be unable to protect themselves against significant harm or exploitation'. (Definition adapted from the Care Act 2014)
- 3.1.2 This could include people with learning disabilities, mental health problems, older people and people with a physical disability or impairment. It is important to include people whose condition and subsequent vulnerability fluctuates. It may include an individual who may be vulnerable as a consequence of their role as a carer in relation to any of the above.
- 3.1.3 *It may also include victims of domestic abuse, hate crime and anti-social abuse behaviour. The persons' need for additional support to protect themselves may be increased when complicated by additional factors, such as, physical frailty or chronic illness, sensory impairment, challenging behaviour, drug or alcohol problems, social or emotional problems, poverty or homelessness.*
- 3.1.4 Many adults at risk may not realise that they are being abused. For instance, an elderly person, accepting that they are dependent on their family, may feel that they must tolerate losing control of their finances or their physical environment. They may be reluctant to assert themselves for fear of upsetting their carers or making the situation worse.
- 3.1.5 It is important to consider the meaning of 'Significant Harm'. The Law Commission, in its consultation document 'Who Decides,' issued in Dec 1997 suggested that; 'harm' must be taken to include not only ill treatment (including sexual abuse and forms of ill treatment which are not physical), but also 'the impairment of, or an avoidable deterioration in, physical or mental health; and the impairment of physical, intellectual, emotional, social or behavioral development'.

3.2 What do we mean by abuse?

- 3.2.1 Abuse is a form of maltreatment. A child or adult at risk may be abused by someone inflicting harm or by failing to prevent harm. Abuse may occur in family, community, care, or institutional settings. It may involve one-off incidents or long-term patterns of behaviour.
- 3.2.2 Abuse can be physical, emotional, sexual, financial, or result from neglect. It can be carried out by anyone — including relatives, carers, professionals, peers, or strangers. It may occur face-to-face, in online environments, or through the misuse of technology.
- 3.2.3 Individuals may experience abuse differently. Some, particularly those with communication difficulties, learning disabilities, or neurodivergence, may be at increased risk or find it harder to report what's happening.
- 3.2.4 Abuse may involve:
 - Causing physical harm
 - Emotional cruelty or controlling behaviour
 - Exploitation through grooming, coercion, or manipulation

- Preventing someone from making their own choices
 - Failing to provide essential care, food, or support
 - Using technology to harass, isolate or control
- 3.2.5 Concerns may be raised after a single event or from ongoing poor treatment or neglect. If unaddressed, this can seriously affect physical and mental wellbeing — including leading to long-term harm or death.

4 TYPES OF ABUSE

- 4.1 **Physical abuse:** a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child/adult at risk. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child/adult at risk.
- 4.2 **Emotional/Psychological abuse:** the persistent emotional maltreatment of a child/ adult at risk such as to cause severe and adverse effects to their emotional development. It may involve conveying to them that they are inadequate or unloved, restricting them from expressing their views, inappropriate expectations that are beyond a child's developmental control, over-protective behaviour towards the child/adult at risk which restricts their development and causing them to be emotionally distressed. This type of abuse - includes emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.
- 4.3 **Sexual abuse:** involves forcing or enticing a child/young person/adult at risk to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child/adult at risk is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children/adult at risks in looking at, or in the production of, sexual images or grooming them in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse.
- 4.4 **Neglect:** the persistent failure to meet a child's/adult at risk's basic physical and/or psychological needs, likely to result in the serious impairment of their health or development. This could include failing to provide adequate food, clothing and shelter, failing to protect the child/adult at risk from harm or unresponsiveness to, a child's/adult at risk's basic emotional needs.
- 4.5 **Financial or material abuse** - including theft, fraud, exploitation, pressure in connection with their will, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
- 4.6 **Discriminatory abuse** - including race, sex, culture, religion, politics, that is based on a person's disability, age or sexuality and other forms of harassment, slurs or similar treatment, hate crime.
- 4.7 **Institutional abuse** - Institutional abuse although not a separate category of abuse in itself, requires specific mention simply to highlight that children/adults placed in any kind of care home or day care establishment are potentially vulnerable to abuse and exploitation. This can be especially so when care standards and practices fall below an acceptable level as detailed in the contract specification.
- 4.8 **Multiple forms of abuse** - Multiple forms of abuse may occur in an ongoing relationship or an abusive service setting to one person, or to more than one person at a time, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm. Any or all of these types of abuse may be perpetrated as the result of deliberate intent and targeting of vulnerable people, negligence or ignorance.

5 ADULT AT RISKS AND DOMESTIC ABUSE

- 5.1 Home Office Definition 2004
 'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are, or have been intimate partners or family members, regardless of gender or sexuality.'
- 5.2 Women's Aid Definition

‘Domestic violence is physical, sexual, psychological or financial violence that takes place within an intimate or family-type relationship and that forms a pattern of coercive and controlling behaviour. This can also include forced marriage and so-called “honour crimes”. Domestic violence may include a range of abusive behaviours, not all of which are in themselves inherently “violent”.

- 5.3 Most research suggests that domestic violence occurs in all sections of society irrespective of race, culture, nationality, religion, sexuality, disability, age, class or educational level.
- 5.4 Both definitions would therefore also include incidents where extended family members may condone or share in the pattern of abuse e.g. forced marriage, female genital mutilation and crimes rationalized as punishing women for bringing ‘dishonour’ to the family.
- 5.5 It is important to recognise that Adult at risks may be the victims of Domestic Abuse themselves or be affected by it occurring within their household. This is likely to have a serious effect on their physical and mental wellbeing.
- 5.6 Where Adult at risks are victims of Domestic Abuse, they may need extra support to plan their future. The violence or threat of violence may continue after a victim has separated from the abuser. It is important to ensure that all the vulnerable people in this situation have appropriate support to enable them to maintain their personal safety.
- 5.7 A separate Domestic Abuse Protocol is in place between Police, Social Services and Health.
- 5.8 Incidents reported by the police through the domestic abuse protocols will be addressed under the adult protection processes if it is considered that a adult at risk may be at risk of abuse. (See *Joint Police, Social Services and Health protocol for dealing with cases of domestic abuse where adult at risks are involved*)

6 LEGAL FRAMEWORK

- 6.1 Human Rights Act 1998 and the Mental Capacity Act 2005 remain key legal frameworks. The Public Interest Disclosure Act 1998 (PIDA) provides protection for whistleblowers.
- 6.2 UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018 govern the use, processing and sharing of personal data. The Freedom of Information Act 2000 continues to apply.
- 6.3 The Care Act 2014 is the principal legislation for safeguarding adults in England. It replaces the earlier guidance outlined in the "No Secrets" (2000) document. The Care Act places a duty on local authorities to make enquiries if they believe an adult is at risk of abuse or neglect.
- 6.4 Liberty Protection Safeguards (LPS) were introduced as a planned replacement for Deprivation of Liberty Safeguards (DoLS) under the Mental Capacity (Amendment) Act 2019. Although not yet fully implemented as of June 2025, LPS are expected to take effect in the near future.
- 6.5 The Children Act 1989 and the Children Act 2004 remain essential. They are supported by the Children and Social Work Act 2017, which places new duties on local authorities and practitioners to improve outcomes for looked-after children.
- 6.6 Working Together to Safeguard Children 2023 provides up-to-date statutory guidance for inter-agency working to safeguard and promote the welfare of children.
- 6.7 The Domestic Abuse Act 2021 establishes a statutory definition of domestic abuse and extends protections to survivors, including children who witness abuse.
- 6.8 The Online Safety Act 2023 imposes duties of care on online platforms to prevent and address harmful content, including that which may pose safeguarding risks to children and adult at risks.

7 THE ROLE OF STAFF, VOLUNTEERS AND TRUSTEES

- 7.1 All staff, volunteers and trustees working on behalf of the organisation have a duty to promote the welfare and safety of children/adult at risks.
- 7.2 Staff, volunteers and trustees may receive disclosures of abuse and observe children/adult at risks who are at risk. This policy will enable staff/volunteers to make informed and confident responses to specific child and adult protection issues.

8 CHILDREN LIVING WITH AN ADULT AT RISK

- 8.1 It is essential that the needs of any children within an abusive or domestic violence situation where there is a adult at risk involved are considered and acted upon. Please contact the Designated Safeguarding Lead and/or the local social services Safeguarding Children's team.

9 PROCEDURE IN THE EVENT OF A DISCLOSURE

- 9.1 It is important that children/adult at risks are protected from abuse. All complaints, allegations or suspicions must be taken seriously.
- 9.2 This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion that a child/adult at risk has been abused.
- 9.3 Promises of confidentiality must not be given as this may conflict with the need to ensure the safety and welfare of the individual.
- 9.4 A full record shall be made as soon as possible of the nature of the allegation and any other relevant information.
- 9.5 This must include information in relation to the date, the time, the place where the alleged abuse happened, your name and the names of others present, the name of the complainant and, where different, the name of the individual who has allegedly been abused, the nature of the alleged abuse, a description of any injuries observed, the account which has been given of the allegation.

10 RESPONDING TO AN ALLEGATION

- 10.1 Any suspicion, allegation or incident of abuse must be reported to the Designated Safeguarding Lead (DSL), Assunta Soldovieri, on the same working day where possible.
- 10.2 If the DSL is unavailable, escalate to the Senior Lead for Safeguarding or speak to your line manager.
- 10.3 The reporting individual must document the following and pass to the DSL:
- Date and time of disclosure
 - Location and context of the incident
 - Name and contact details of the person disclosing (if known)
 - Name of the child/adult at risk
 - Description of the concern or incident in factual, non-judgmental language
- 10.4 The DSL must report the matter to the appropriate local social services team.

11 RESPONDING APPROPRIATELY TO AN ALLEGATION OF ABUSE

- 11.1 In the event of an incident or disclosure:

DO

- Make sure the individual is safe
- Call emergency services if needed
- Listen without judgment
- Support and reassure
- Record the facts clearly
- Report immediately to DSL

DO NOT

- Promise confidentiality
- Confront the alleged abuser
- Ask leading questions
- Investigate the matter yourself
- Delay reporting
- Be judgmental or voice your own opinion
- Be dismissive of the concern
- Elaborate in your notes
- Panic

- 11.2 It is important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred. This is a task for the professional protection agencies, following a referral from the Designated Safeguarding Lead.

12 CONFIDENTIALITY

- 12.1 Child/adult at risk protection raises issues of confidentiality which must be clearly understood by all.
- 12.2 Staff, volunteers and trustees have a professional responsibility to share relevant information about the protection of children/adult at risks with other professionals, particularly investigative agencies and social services.
- 12.3 All personal information regarding a child/adult at risk will be kept confidential. All written records will be kept in a secure area for a specific time as identified in data protection guidelines. Records will only record details required in the initial contact form.
- 12.4 If a child/adult at risk confides in a member of staff and requests that the information is kept secret, it is important that the member of staff tells them sensitively that he or she has a responsibility to refer cases of alleged abuse to the appropriate agencies.
- 12.5 Within that context, they must, however, be assured that the matter will be disclosed only to people who need to know about it.
- 12.6 Where possible, consent must be obtained from the child/adult at risk before sharing personal information with third parties.
In some circumstances, information may be shared without consent if it is in the vital interests of the individual or others. This is in line with the UK GDPR and the Data Protection Act 2018, which permit sharing where it is necessary to protect someone from serious harm or to prevent a crime. Staff must always consider whether the risk justifies sharing and document the rationale for doing so.
- 12.7 Where a disclosure has been made, staff must let the child/adult at risk know the position regarding their role and what action they will have to take as a result.
- 12.8 Staff must assure the child/adult at risk that they will keep them informed of any action to be taken and why. The child/adult at risks' involvement in the process of sharing information must be fully considered and their wishes and feelings taken into account.
- 12.9 This policy needs to be read in conjunction with other policies for the organisation including:
- Confidentiality
 - Disciplinary and Grievance (found in the employee handbook)
 - GDPR
 - Recruitment and Selection
 - Whistleblowing
- 12.10 All safeguarding records will be retained securely and only for as long as necessary in accordance with the UK GDPR and the organisation's Data Protection and Record Retention Policies. Retention periods are determined based on legal requirements and operational needs, and records will be securely disposed of once no longer required.

13 THE ROLE OF KEY INDIVIDUAL AGENCIES

13.1 Children social care

- 13.1.1 Children's Social Services are responsible for responding to safeguarding concerns raised about children and coordinating child protection enquiries under Section 47 of the Children Act 1989. They work closely with the police, health professionals and other agencies.
- 13.1.2 Schools and educational settings have a statutory duty to safeguard and promote the welfare of children. Each school must have its own safeguarding policy, a designated safeguarding lead (DSL), and procedures for responding to concerns. They are a vital partner in multi-agency safeguarding arrangements.
- 13.1.3 Referrals made to Children's Services are coordinated through the relevant Multi-Agency Safeguarding Hub (MASH) for effective triage and response.

13.2 Adult Social Services

- 13.2.1 The Department of Health's Care and Support Statutory Guidance under the Care Act 2014 requires that authorities develop a local framework within which all responsible agencies work together to ensure a coherent policy for the protection of adults at risk of abuse.
- 13.2.2 All local authorities have a Safeguarding Adults Board, which oversees multi-agency work aimed at protecting and safeguarding adult at risks. It is normal practice for the board to comprise of

people from partner organisations who have the ability to influence decision making and resource allocation within their organisation.

13.3 Local Authority Designated Officer (LADO)

13.3.1 The Local Authority Designated Officer (LADO) is responsible for managing and overseeing allegations made against adults who work with children in a paid or voluntary capacity.

13.3.2 They ensure that allegations are handled appropriately, fairly and promptly in accordance with statutory guidance.

13.3.3 Any concerns or allegations about a staff member or volunteer at Sebastian's Action Trust should be reported immediately to the Designated Safeguarding Lead, who will then liaise with the LADO for further action.

13.4 The Police

13.4.1 The Police play a vital role in safeguarding children/adult at risks with cases involving alleged criminal acts. It becomes the responsibility of the police to investigate allegations of crime by preserving and gathering evidence. Where a crime is identified, the police will be the lead agency and they will direct investigations in line with legal and other procedural protocols.

13.5 Role of Designated Safeguarding Lead (DSL)

13.5.1 The role of the designated safeguarding lead is to deal with all instances involving child & adult protection that arise within the organisation. They will respond to all child & adult protection concerns and enquiries.

13.6 Role of Line Manager

13.6.1 The role of the line manager is to support the member of staff, trustee or volunteer involved with the incident and to ensure the correct procedures are followed.

13.6.2 The line manager must ensure that any safeguarding concern is escalated to the Designated Safeguarding Lead (DSL) without delay.

13.6.3 The line manager must ensure that all staff within their team are familiar with the organisation's child/adult at risk protection procedures and ensure that all staff undertakes training, where appropriate.

14 SAFEGUARDING TRAINING

14.1 Appropriate safeguarding training will be organised to ensure that staff are aware of these procedures. See annex 1. Specialist training will be provided for the member of staff and trustees in charge of safeguarding.

15 COMPLAINTS PROCEDURE

15.1 The organisation has a complaints procedure available to all staff, volunteers and trustees.

16 RECRUITMENT PROCEDURE

16.1 The organisation operates procedures that take account of the need to safeguard and promote the welfare of children/adult at risks, including arrangements for appropriate checks on new staff, volunteers and trustees where applicable. This includes conducting Baring and Disclosures Services (DBS) checks (enhanced where it applies), for all employees and volunteers. These checks are renewed every three years.

17 REFERENCES, INTERNET LINKS AND FURTHER SOURCES OF INFORMATION

17.1 Care Act 2014: <https://www.gov.uk/government/publications/care-act-statutory-guidance>

17.2 Working Together to Safeguard Children 2023: <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

17.3 UK GDPR and Data Protection Act 2018: <https://www.gov.uk/data-protection>

17.4 Domestic Abuse Act 2021 Summary: <https://www.gov.uk/guidance/domestic-abuse-how-to-get-help>

17.5 Online Safety Act 2023 Overview: <https://www.gov.uk/guidance/online-safety-act-guidance>

17.6 Hourglass (former Action on Elder Abuse) is a charity working to protect, and prevent the abuse of, vulnerable older adults.
[Hourglass \(wearehourglass.org\)](https://www.wearehourglass.org)

- 17.7 Prevent is a national safeguarding programme that supports people who are at risk of becoming involved with terrorism through radicalisation.
Prevent duty guidance: England and Wales (2023) - GOV.UK (www.gov.uk)
- 17.8 Criminal exploitation is child abuse where children and young people are manipulated and coerced into committing crimes
[child-criminal-exploitation-definition-briefing.pdf \(childrenssociety.org.uk\)](#)
- 17.9 Advice to help you keep children and young people safe from sexual exploitation (CSE)
Protecting children from sexual exploitation | NSPCC Learning

18 SAFEGUARDING KEY CONTACT NUMBERS:

18.1 Designated Safeguarding Lead (DSL)

Name(s): Assunta Soldovieri

Email: Assunta@sebastiansactiontrust.org

18.2 Senior Lead for Safeguarding

Name: Vanessa Avlonitis, Trustee

Email: Vanessa.Avlonitis@SebastiansActionTrust.org

18.3 NSPCC Helpline

08088005000

18.4 Childline

0800 1111

18.5 For the most up-to-date contact information for Local Authority Designated Officers (LADOs), Children's Social Services, Adult Safeguarding Teams, and Multi-Agency Safeguarding Hubs (MASH), please refer to the **official website of the relevant local authority**.

Sebastian's Action Trust mainly operates in Hampshire and Berkshire councils, but staff may search directly via:

<https://www.gov.uk/find-local-council>

In any urgent safeguarding situation, staff must not delay — contact emergency services via 999 and inform the DSL as soon as possible.

Signed:



Hazel Bedford
CEO

Date: 01.07.2025

Annex 1

Appropriate training levels:

- **Level 3**

Designated Safeguarding Lead/Officer.
Designated Trustee.
House Manager.

- **Level 2**

Family Services team members working directly with families.
Volunteer coordinators.
CEO.

- **Safeguarding awareness**

Admin, finance and fundraising team.
Volunteers, bank staff.

- **Safeguarding for trustees**

Trustees

Annex 2

Glossary of terms

DSL: Designated Safeguarding Lead

LADO: Local Authority Designated Officer

MASH: Multi-Agency Safeguarding Hub

DBS: Disclosure and Barring Service

DoLS: Deprivation of Liberty Safeguards

LPS: Liberty Protection Safeguards

Annex 3

Safeguarding process flowchart

Concern identified by staff/volunteer
↓
Report immediately to DSL
↓
DSL assesses and records the concern
↓
DSL refers to Social Services or Police if necessary
↓
Follow-up actions and support provided
↓
Case closed or monitored as appropriate

Annex 4

Safeguarding concern / incident report

Safeguarding incident or concern:

This form is designed to report any safeguarding incidents or concerns. It should be completed by the worker who has been disclosed to, who witnessed the incident, was most directly involved or who provided first aid if relevant.

--

Name & role of person completing this form:	
	Date form is completed:

Details of child, young person or adult at risk:

Name:	Address:
Contact number:	Gender:
Date of birth:	Any further information that may be useful to consider:

Parents/carers details (if applicable):

Name:	Address:
Contact number:	Email address:
Have parents/carers been notified of the incident?: Yes / No	If yes, please provide details:

Details of reportee:

Are you reporting your own concerns or responding to concerns raised by someone else?	Reporting my own concerns	•
	Responding to someone else's concerns	•
If responding to someone else's concerns, please provide their details below:		
Name:		
Relationship to child, young person or adult at risk:		
Email address:		
Contact number:		

Incident details:

Date/ Time:	
Location of incident:	
Description of the incident or concern: (continue on separate sheet if necessary & include reference number): <i>(Include relevant information such as what happened and how it happened, description of any injuries sustained, behaviour witnessed and whether the information provided is being recorded as fact, opinion or hearsay)</i>	
Details of any previous concerns, incidents or relevant safeguarding records (For DSL ONLY):	

Child, young person or adult at risk account of the incident or concern: *(use their own words)*

Witness account of incident or concern: *(include further accounts on separate sheets as necessary)*

Details of any witnesses:

Name(s): <i>(Consider anonymising where this will not negatively impact the ability to take immediate response actions)</i>	Relationship to child, young person or adult at risk:	Contact details:
---	---	------------------

Details of any persons involved in the incident or alleged to have caused the incident, injury or presenting risk:

Name(s): <i>(Consider anonymising where this will not negatively impact the ability to take immediate response actions)</i>	Relationship to child, young person or adult at risk:	Contact details:
---	---	------------------

--	--	--

Outcome of incident & immediate actions taken: (tick box where relevant)

<ul style="list-style-type: none"> • Ambulance required? Y/N • Name of hospital / medical facility attended if applicable: • Police/fire/rescue services attended? Y/N <p>Notes:</p>	<p>First aid treatment provided: and by whom</p>	<p>Medication given:</p>
---	--	--------------------------

--	--	--

Signed By Author:	Name:	Date:
-------------------	-------	-------

Reporting to the Designated Safeguarding Lead (DSL) section: *(to be completed by DSL)*

Date & time DSL notified of incident/concern:

Date & time this form passed on to DSL (if different from above):

DSL comments: *(actions taken / impact on rest of programme / external agency involvement / initial lessons learned / follow-up actions required):*

--

External agency referral: (tick box where relevant)

• Social services notified	• LADO notified	• Other referral made
Date & time of referral:	Date & time of referral:	Agency:
Name of contact person:	Name of contact person:	Date & time of referral:
Contact number / email:	Contact number / email:	Name of contact person:
Agreed action or advice given:	Agreed action or advice given:	Contact number / email: Agreed action or advice given:

Signed By DSL:	Name:	Date:
----------------	-------	-------