

**St. Martin's Church  
and Day Centre  
and St. Thomas's Hall**

**Safeguarding Guidelines and  
Procedures  
*Vulnerable Adults***

April 2019  
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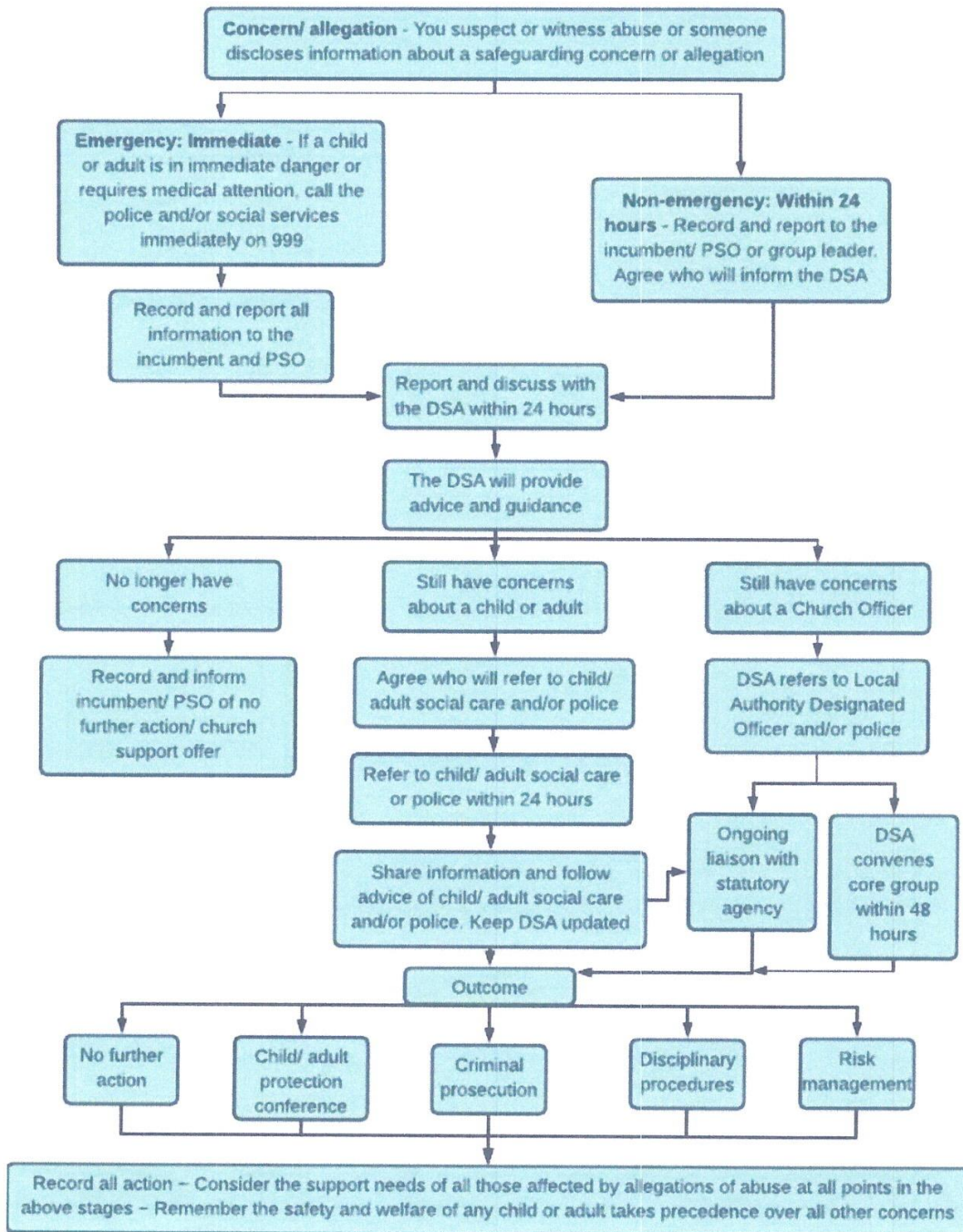
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# Responding Promptly to Every Safeguarding Concern or Allegation

## Quick Guide



**St. Martin's Church and St. Thomas's Hall**  
are pleased to welcome people from diverse backgrounds and  
run a number of groups for vulnerable adults.

*'... the same Lord is Lord of all and richly blesses all who call on him'*  
*Romans 10 vs 12 (NIV Bible)*

As a church, we desire to bring glory to God by knowing Jesus and making him known.

To that end, the aims of our Safeguarding Policy are:

- To uphold the honour of God's name
- To keep the gospel from disrepute

We do this by:

- Protecting the children, young people and vulnerable adults in our care
- Protecting the ministry leaders who serve in this ministry

Safeguarding is an important part of our service in the gospel and one which we take seriously, aiming for a standard of excellence as we implement these guidelines.

We adhere to the House of Bishops 'Promoting a Safer Church Policy'.

Ely Diocese has adopted the House of Bishops policies and procedures, adhering to the House of Bishops safeguarding practise guidance as outlined in the 'Parish Safeguarding Handbook (Oct 2018)'.

The Parochial Church Council (PCC) has adopted the policies and procedures as promoted by Ely Diocese.

These policies may be accessed from our website.

The information in this guidance has been separated into three separate documents, for those working with children 0-11yrs (to be issued), young people 11-18yrs (to be issued) and vulnerable adults.

## Key Safeguarding Roles

### 1. The Parish Safeguarding Officers (PSO)

St. Martin's Church and St. Thomas's Hall have two PSO's given responsibility by the PCC for Safeguarding within the church family and all its various ministries. In addition the Day Centre Manager is the Safeguarding Officer for the Day Centre.

The PSO will be included in decisions about whether to permit someone to be involved in ministry with children, young people and vulnerable adults where their DBS check is blemished or information is provided about them under the DBS scheme.

### 2. Ministry Leaders

A ministry leader is anyone serving in any role within church which involves any oversight of children, young people or vulnerable adults.

All ministry leaders share a particular responsibility for:

- Loving the person as Christ loves them
- Setting an example of proper Christian conduct
- Praying for those in their care

Everyone who is involved in providing formal care (as defined by the Diocesan policy) for vulnerable adults must complete a screening process prior to serving. Full information on the screening process can be found in the full policy.

### IMPORTANT

- All ministry leaders must read **Section A** of these guidelines
- They must then read any additional information from **Section B** that is relevant to any concerns they may have
- A list of **Contact Details** can be found on the last two pages of these guidelines

If an existing ministry leader moves to serve in a different ministry area they must read the relevant information for the new area before commencing their role.

All ministry leaders must complete the Diocesan safeguarding training. We are working towards implementing regular safeguarding training more widely.

## SECTION A

### **Guidelines for Recognising and Responding to Potential Abuse**

St. Martin's, including St. Martin's Day Centre and St. Thomas's are committed to preventing abuse and neglect taking place, and safeguarding the welfare of vulnerable adults within our community. We are committed to ensuring that St. Martin's and St. Thomas's:

- **Provides a safe environment for vulnerable adults and actively seeks to prevent harm**
- **Identifies vulnerable adults who are suffering**
- **Takes appropriate action to see that such vulnerable adults are kept safe from harm**

We all need to know how to respond to signs of abuse or allegations of abuse. The following guidelines are in place to meet that need.

#### ***1. Definitions***

##### **When is an adult vulnerable?**

Through the *Care Act 2014*, the Government defines a vulnerable adult as any person over the age of 18 years 'who has needs for care and support; is experiencing, or may be at risk of, abuse or neglect; and, as a result of those needs, is unable to protect himself or herself against the abuse or neglect or the risk of it.' Some of the factors that may be considered as care and support needs which increase vulnerability to abuse or neglect are:

- sensory or physical disabilities or impairments
- learning disabilities
- chronic or acute physical illness
- chronic or acute mental ill health (including dementia)
- frailty, including age-related frailty
- requiring assistance in conducting own affairs
- living in residential care/support accommodation, or receiving domiciliary care in their own home
- addiction to alcohol or drugs
- homelessness
- providing unpaid care to others, such as an elderly family member

A person who has recently suffered personal adversity (e.g. bereavement, trauma or separation) that makes them in particular need of pastoral support may also be reasonably considered to have care and support needs which increase vulnerability.

##### **What is abuse?**

The *Care Act 2014* provides the following examples of types of abuse. This is not intended to be an exhaustive list, but an illustrative guide as to the sort of behaviour which could give rise to a safeguarding concern.

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

Domestic abuse including: psychological, physical, sexual, financial, emotional abuse or so called 'honour' based violence.

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, sexual assault, or sexual acts to which the adult has not consented or was pressured into consenting.

Psychological abuse including: threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

Financial or material abuse including: theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Modern slavery including: slavery, human trafficking, forced labour, domestic servitude.

Discriminatory abuse is maltreatment or harassment that is based on any characteristic of a person's identity, such as their race, sex, or disability. Many of the signs of discriminatory abuse will be the same as for psychological abuse. The impact of discriminatory abuse can lead to significant self-harming and must never be underestimated.

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

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

Self neglect: This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt enquiry. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.

## **Factors that may lead to abuse**

Abuse can occur in any setting no matter where a person lives or where they are being cared for. Abuse can occur in residential or day care settings, in hospitals, in other people's homes, churches and other places previously assumed safe, and in public places.

Abuse is more likely to occur if the vulnerable adult:

- Rejects help
- Has challenging/unusual behaviour
- Is not helpful or co-operative
- Is behaviourally disturbed or there are major changes in personality behaviour
- Is socially isolated

Research has shown that mistreatment is more likely to occur if carers:

- Are lonely or isolated
- Are under stress due to poor income or housing conditions
- Have other responsibilities i.e. work, family
- Are showing signs of physical or mental illness
- Are becoming dependent on alcohol or drugs
- Family relationships over the years have been poor
- Live where family violence is the norm

## ***2. Recognising signs of abuse***

Safeguarding adults is everyone's business. Anyone can witness or become aware of information suggesting that abuse or neglect is occurring. It may not always be obvious that a vulnerable adult is being abused or mistreated, however there may be general indicators that something is amiss: the adult may say or do things that hint that all is not well. In some cases there may be a marked change in behaviour or a direct disclosure or complaint of abuse.

The Government is clear that workers across a wide range of organisations - including faith groups - are often well-placed to notice changes in an adult that may indicate they are being abused or neglected and, therefore, need to be vigilant in identifying concerns and understand how to respond appropriately. This will include:

- Knowing about different types of abuse and neglect and their signs
- Supporting adults to keep safe
- Knowing who to tell about suspected abuse or neglect
- Supporting adults to think and weigh up the risks and benefits of different opinions when exercising choice and control



### Signs of abuse to look out for

If someone is suffering abuse you may notice one or a combination of the following signs:

- Multiple bruising or finger marks
- Injuries you cannot give a good reason for
- Worsening health for no reason
- Withdrawal or mood changes
- Tearfulness
- Neediness, wanting affection or being clingy
- An unexplained shortage of money
- Inappropriate, dirty or inadequate clothing
- Covering up or rationalising injuries or demeaning behaviours towards them
- Confusion and/or denial that anything is amiss despite marked deterioration
- Flirtatious, precocious or expressive sexual behaviour out of character
- Indications of unusual confinement e.g. closed off in a room.

Behaviours that may be observed about the carer, family member or the person close to the vulnerable person include:

- Getting the vulnerable person to pay for their (i.e. carer's) shopping/petrol/tickets
- Taking advantage of their naivety or trust
- Attitudes of indifference or anger towards the vulnerable person
- Blaming or chastising them e.g. that soiling themselves was deliberate
- Aggressive or harsh behaviour (threats, insults, harassment)
- Inappropriate display of affection or care
- Social isolation or restriction of activity
- Lack of willingness to let other people have access to the vulnerable person
- Obvious absence of assistance or attendance

More information on possible signs of abuse can be found in Section B.

### ***3. Procedures following disclosure or concern of abuse***

You should never assume that someone else will report the concern and pass on the information. It is far better that two people raise their concerns and the person is made safe, than no-one says anything because they assume someone else will deal with it and the person is significantly harmed.

#### Guidelines for when someone tells you they have been abused

It is not easy to give precise guidance, but the following may be of help:

##### General points:

- Above all else, listen, listen and listen!
- Keep calm and show acceptance of what they say, however unlikely it seems
- Let them know you will need to tell someone else - don't promise confidentiality

- Be aware the person may have been threatened
- Never push for information. If they decide not to tell you after all, then accept that and let them know that you are always ready to listen
- Avoid leading the person and ask only what is necessary to ensure a clear understanding of what has been said - you might put something into their mind that was not there. If the case were to end up in court, the case could be thrown out if it is thought that the person had been led.

Concluding:

- Reassure the person that they were right to tell you
- Explain that you will try to take steps to protect them from further harm
- Let them know what you are going to do next and that you will let them know what happens (you might have to consider referring to Social Services or the Police to prevent the person returning home if you consider them to be seriously at risk of further abuse)
- Reassure them that they will be fully involved in any decisions about what will happen next and ask them what they would like to be done
- Make notes as soon as possible (preferably within one hour of the person talking to you, but always within 24 hours), writing down exactly what the person said and when they said it, what you said in reply and what was happening immediately beforehand (e.g. a description of the activity). Record dates and times, including when you made the record. Keep all hand-written notes even if subsequently typed. Such records should be kept for an indefinite period in a secure place. A copy of these notes must be passed onto the relevant PSO.

#### **4. *Responding to Concerns of Abuse***

- Where emergency medical attention is necessary then this should, of course, be sought immediately, informing the doctors of any suspicions you may have.
- You must contact the Parish Safeguarding Officer (PSO) immediately (for contact details see page 19)
- At all stages in the reporting process, you retain the right to report serious matters directly to Social Services or the Police. Even so, as soon as possible (and within 24 hours), you must also contact the PSO (for contact details see pages 19-20)
- Under no circumstances should a church volunteer or employee investigate concerns of abuse themselves. Our responsibility is (in consultation with the Diocesan Safeguarding Team) to refer concerns to statutory authorities who will do the investigating required.
- Apart from telling your Ministry Leader/Parish Safeguarding Officer this information must be treated as confidential. Do not inform/confront any alleged perpetrator under any circumstances.
- You should also consider your own feelings and ask your Ministry Leader for pastoral support if needed.

Even if you may feel the person's story is unlikely, this must not prevent appropriate action being taken.

## Respecting the vulnerable adult's rights to decide if they want help

The Care Act 2014 Statutory Guidance 14.79 states: *'What happens as a result of an enquiry should reflect the adult's wishes wherever possible, as stated by them or by their representative or advocate. If they lack capacity it should be in their best interests if they are not able to make the decision, and be proportionate to the level of concern.'*

The Parish Safeguarding Handbook Oct 2018, page 26 states: *'The starting point is the presumption that an adult can give consent and has the mental capacity to do so. The provisions of the Mental Capacity Act 2005 are complex and questions and concerns about consent and mental capacity should always be discussed with the Diocesan Safeguarding Officer.'*

Sharing without consent - *information can be shared legally without consent, if a person is unable to, or cannot reasonably be expected to gain consent from the individual concerned; or if to gain consent could place someone at risk. Relevant personal data can be shared lawfully without consent if it is to keep a child or vulnerable adult safe from neglect or physical, emotional or mental harm, or if it is protecting their physical, mental or emotional wellbeing.*

*Never make these decisions on your own. If you are going to share personal data, this should always be discussed with the Diocesan Safeguarding Officer. Of course, you may be able to share data, at least initially, without identifying the individual concerned both within the church and with the statutory services.*

*Ultimately the most important consideration is whether the sharing of information is likely to support the safeguarding of a child, young person or vulnerable adult.'*

Even without the consent of the individual, the PSO retains the right to seek advice from Social Services or the Diocesan Safeguarding Officer provided they do not use any names or details.

### **5. Procedures for Responding to Abuse - Outcomes**

When a safeguarding concern is reported to the Diocesan Safeguarding Officer by the Parish Safeguarding Officer:

- If the Diocesan Safeguarding Officer advises further action, the Parish Safeguarding Officer must act upon all directions given by the Diocese in the timescale given.
- If the Diocesan Safeguarding Officer advises no further action required, this is not the end of the process. The Parish Safeguarding Officer must arrange a further meeting in the parish to discuss whether alternative action should be taken or whether to accept that no further action is required.
- This meeting should include the Parish Safeguarding Officer and the Vicar and they can involve others as necessary - for example the Churchwardens.

## **6. Recruitment and Training**

We are in discussion with the Diocese about what recruitment, training and wider implementation of these guidelines will look like in practice. In the meantime we will take each individual situation to the Diocese for discussion.

### **Guidelines for Responding to a Disclosure of Historic Abuse**

In the course of their work ministers and those offering pastoral support may hear disclosures from adults regarding abuse that happened to them when they were children, or from children regarding abuse that happened to them when they were younger. Historical abuse must be treated as seriously as recent abuse and each individual must be treated with great pastoral sensitivity.

The church is required to take advice from the Diocese and may need to report allegations or disclosures of criminal acts to the Police.

When someone tells you they have been abused, or have committed abuse, whether recently or many years ago:

#### **General points**

- Above all else, listen
- Keep calm, and show understanding/acceptance of what is said, however unlikely it seems. Reassure the individual that they were right to tell you
- Never push for information. Avoid leading questions and ask only what is necessary to ensure a clear understanding of what has been said
- Let the individual know what you are going to do next and that you will keep them informed. Let them know that you will need to tell someone else - don't promise confidentiality
- However, do reassure them that you will only tell who you need to and that they will remain involved in decisions going forward

#### **Action you must then take**

- You must contact your Ministry Leader and tell them what you know (you do not need to disclose any names at this stage unless told otherwise)
- If the allegation is against your Ministry Leader, contact the Parish Safeguarding Officer (PSO) - contact details can be found on the page 19 of this document
- You retain the right to report serious matters directly to Social Services or the Police. Even so, as soon as possible (and within 24 hours), you must also contact either your Ministry Leader or the PSO

**Action you must then take cont....**

- Apart from telling your Ministry Leader/PSO, the information must be treated as confidential and not shared with co-leaders, or other church members. Under no circumstances should you investigate concerns of abuse yourself - your role is to pass on the information you've received
- Make notes as soon as possible (preferably within one hour, but always within 24 hours), writing down exactly what was said and when, what you said in reply and what was happening immediately beforehand (e.g. a description of the activity/situation). Record dates and times of these events and when you made the record. Keep all hand-written notes, even if subsequently typed. Such records should be kept for an indefinite period in a secure place. A copy of these notes must be passed onto your Ministry Leader
- Your Ministry Leader/PSO will let you know if you need to do anything else. They are available to answer any questions/concerns that you or the individual involved may have at any stage
- Consider your own feelings and ask your Ministry Leader for pastoral support if needed and consider with your Ministry Leader what pastoral support is needed for the individual involved

## **SECTION B**

### **Further Indicators of Abuse**

A fuller list of possible indicators is listed in the Diocese Guidance as follows:

**(i) Physical Abuse**

Physical abuse is the act of physical ill treatment. It may include hitting, slapping, pushing, punching, kicking, burning, biting, suffocating and misuse of medication, restraint or inappropriate sanctions.

<b>PHYSICAL ABUSE</b>
Possible indicators of abuse
<ul style="list-style-type: none"><li>• any injury not fully explained</li><li>• untreated or poorly treated injuries</li><li>• unexplained bruises or welts, particularly in protected areas</li><li>• bruises in various stages of healing, clusters forming regular patterns</li><li>• any cuts or abrasions</li><li>• injuries to head/face/scalp</li><li>• broken eyeglasses or frames</li><li>• unexplained burns, fractures of lacerations</li></ul>

**PHYSICAL ABUSE** - Possible indicators of abuse cont....

- malnutrition and dehydration without an illness-related cause; loss of weight
- lack of personal care
- urinary/faecal incontinence
- inappropriate use of medication, overdosing or under dosing
- history of moving GPs or frequently moving between agencies (agency hopping)

No suspected injury should be ignored, however, care should be taken as not all marks and injuries are caused as a result of abuse.

The key to identifying mistreatment or abuse is noticing unexplained marks, or injuries with unsatisfactory explanations. Where an injury occurs often, you should at least question the safety of the environment and what could be done to minimise further risks. Always note the site and type of injury observed so that patterns can be identified. If, however, the injury(ies) still give cause for concern discuss the issue with the Parish Safeguarding Officer (within 24 hours) to decide if a further intervention is required.

**(ii) Domestic Abuse**

Domestic abuse is the use of forms of control and/or maltreatment within an intimate or domestic relationship. Types of domestic abuse include:

Physical - For example: hitting, slapping, burning, pushing, restraining, giving too much medication or the wrong medication, assault with everyday implements such as kitchen knives, kicking, biting, illegal drugs as a way of blackmailing and controlling them.

Psychological - (also called emotional, mental, or verbal abuse) For example, shouting, swearing, frightening, blaming, ignoring or humiliating someone, blackmailing them, threatening harm to children or pets in they misbehave, ridiculing every aspect of their appearance and skills, keeping them deliberately short of sleep, being obsessively and irrationally jealous, keeping them isolated from friends and family, threatening suicide or self-harm.

Sexual - For example, forcing someone to take part in any sexual activity without consent, e.g. rape or sexual assault, forcing them or blackmailing them into sexual acts with other people, forcing children to watch sexual acts, sexual name calling, imposition of dress codes upon a partner, involvement in the sex trade or pornography, knowingly passing on Sexually Transmitted Infections, controlling access to contraception.

Economic / financial - For example, the illegal or unauthorised use of someone's property, money, pension book or other valuables, forcing them to take out loans, keeping them in poverty, demanding to know every penny they spend, refusing to let them use transport or have money to pay for it.

Spiritual abuse can also be part of Domestic Abuse.

Stalking and cyber-stalking are also forms of control and abuse. Church workers should remain alert to the use of words, physical or sexual practices to demean and control a vulnerable adult.

<b>DOMESTIC ABUSE</b>
Possible indicators of abuse
<ul style="list-style-type: none"><li>• has unexplained bruises or injuries</li><li>• shows signs of feeling suicidal</li><li>• becomes unusually quiet or withdrawn</li><li>• has panic attacks</li><li>• has frequent absences from work or other commitments</li><li>• wears clothes that conceal even on warm days</li><li>• stops talking about her/his partner</li><li>• is anxious about being out or rushes away</li></ul>

### (iii) **Sexual Abuse**

Sexual abuse is a sexual act (contact or non-contact) carried out without the informed consent or knowledge of the other individual. Non-contact abuse may include sexual suggestions, salacious exposure to indecent material and indecent behaviour. Contact abuse may include rape and sexual assault or sexual acts to which the adult at risk has not consented, or could not consent or was pressured into consenting. Victims suffer emotionally and psychologically. If you believe there is any issue about an individual's capacity to consent to any relationship, you should seek advice from the Parish Safeguarding Officer within 24 hours.

<b>SEXUAL ABUSE</b>
Possible indicators of abuse
<ul style="list-style-type: none"><li>• low self esteem</li><li>• full or partial disclosure</li><li>• nightmares</li><li>• signs of depression or stress</li><li>• unusual difficulty in walking and sitting</li><li>• torn, stained or bloody underclothes</li><li>• pain, itching or any injury to genital area</li><li>• sexually transmitted diseases/infections</li><li>• bites, bruising or any marks on inner thighs or arms</li><li>• significant change in sexual behaviour/language</li><li>• agitation during personal care/examination</li><li>• pregnancy in a person who is unable to consent</li></ul>

#### (iv) Psychological Abuse

Psychological abuse is the use of threats or fear of the use of 'power over' relationships to deny the vulnerable person's independent wishes. This includes: threats of harm or abandonment, deprivation of contact, humiliation and denial of dignity, blaming, controlling, bullying, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal of services / supportive networks.

Harassment may include: name calling, victimization and ostracism, unwanted sexual attention, stalking, compromising invitations or gifts, the display of images that are racially/sexually offensive or the suggestion that sexual favours might be advantageous.

<b>PSYCHOLOGICAL ABUSE</b>	
Possible behaviour by vulnerable adult	Possible behaviour by abuser
<ul style="list-style-type: none"><li>• insomnia/sleep deprivation</li><li>• change in appetite, weight gain or loss</li><li>• ambivalence to carer</li><li>• anger without an apparent cause</li><li>• deference, resignation, helplessness, excessive fears</li><li>• unexplained paranoia</li><li>• self-harming/suicide attempts, emotional withdrawal - the person becomes uncommunicative or non-responsive</li><li>• low self esteem</li></ul>	<ul style="list-style-type: none"><li>• threats, intimidation, bullying</li><li>• threats of abandonment</li><li>• promises which are not kept</li><li>• punitive approach to incontinence etc. blaming, sanctions</li><li>• few visitors or other contact</li><li>• locking the person in</li></ul>

Visible signs may not be evident, however the impact of emotional mistreatment or abuse should never be underestimated as the deterioration in a victim's physical or mental health may take a long time to recover from, and may be irreparable.

#### (v) Financial Abuse

Financial abuse is the wilful use or manipulation of the vulnerable person's property, assets, or monies without their informed consent or authorisation. This can include theft or fraud of monies or possessions, exploitation, pressure or undue influence to change wills, financial arrangements, or the misuse of property, possessions or benefits.

<b>FINANCIAL ABUSE</b>
Possible indicators of abuse
<ul style="list-style-type: none"><li>• signatures on cheques etc. that do not resemble the adult's signature or which are signed when the adult cannot write</li><li>• sudden changes in bank activity including unexplained withdrawals of large sums of money</li></ul>



**FINANCIAL ABUSE** - Possible indicators of abuse cont.....

- inclusion of additional names on an adult's bank account
- issues with Powers of Attorney
- abrupt changes to or creation of wills
- sudden appearance of previously uninvolved relatives claiming their rights to a vulnerable person's affairs or possessions
- unexplained transfers of assets to family member or someone outside the family
- numerous unpaid bills, overdue rent, when someone should have been paying these for the vulnerable person
- a carer asks financial questions about a person, unrelated to their care
- lack of amenities, such as TV, personal grooming items, appropriate clothing that the vulnerable person should be able to afford
- unexplained disappearance of money or valuable possessions e.g. silverware or jewellery

You should be alert to the deliberate isolation of a vulnerable person from friends and family resulting in the carer alone having total control.

**(vi) Discriminatory Abuse**

Discriminatory abuse is maltreatment or harassment that is based on any characteristic of a person's identify, such as their race, sex, or disability. Many of the signs of discriminatory abuse will be the same as for psychological abuse. The impact of discriminatory abuse can lead to significant self-harming and must never be underestimated.

The emotional and psychological impact of discriminatory abuse can cause untold damage to the individual, both physically and mentally and in many cases leads to self-harm and tragically in some cases, suicide. Recent cases and inquiry have borne out the fatal impact of discrimination on the grounds of disability.

**(vii) Neglect**

Neglectful behaviour is any pattern of activity or omission which seriously impairs an individual. This includes: ignoring a need for medical or physical care, failing to provide access to appropriate health, social care, religious or educational services, or the deliberate withholding of necessities of life such as medication, adequate nutrition and heating. Also, denying contact with family, failing to intervene in situations where there is danger to the vulnerable person or to others, particularly when a person lacks the mental capacity to assess risk.

<b>NEGLECT</b>
Possible indicators of abuse
<ul style="list-style-type: none"> <li>• poor physical condition, e.g. rashes, sores, weight loss/gain</li> <li>• inadequate heating/lighting</li> <li>• inadequate clothing in poor condition</li> <li>• malnutrition</li> <li>• failure to access medical care or give prescribed medication when required</li> <li>• lack of assistance with eating and drinking</li> <li>• failure to ensure privacy and dignity</li> <li>• inconsistent/reluctant contact with health or social agencies</li> <li>• inappropriate clothing</li> <li>• sensory deprivation</li> <li>• poor personal hygiene</li> </ul>

**(viii) Institutional Abuse**

Institutional abuse is when a culture of poor practice or maltreatment within a setting becomes routine at the end expense of good professional practice. It may be exercised through defamatory attitudes, negative stereotyping and abusive behaviours which are not corrected. Local authorities and churches should promote good practice in adult care.

<b>INSTITUTIONAL ABUSE</b>
Possible indicators of abuse
<ul style="list-style-type: none"> <li>• lack of respect and dignity</li> <li>• name calling - inappropriate ways of addressing people; inappropriate use of power or control</li> <li>• inability to make choices and decisions</li> <li>• agitation when routine is broken</li> <li>• patterns of challenging behaviour</li> <li>• inappropriate use of power or control</li> <li>• inadequate staffing levels</li> <li>• people being hungry or dehydrated</li> <li>• poor standards of care</li> </ul>

**(ix) Spiritual Abuse**

Within faith communities harm can be caused by the inappropriate use of religious belief or practices. This can include the misuse of the authority of leadership, penitential discipline, oppressive teaching, or intrusive healing and deliverance ministries, which may result in both vulnerable adults and children experiencing physical, emotional, or sexual harm.

Churches need to avoid any practice which could be seen as an attempt to 'force' religious values or behaviours onto vulnerable people. Additionally, spiritual abuse may include attempts to direct what people believe and do and to deny choices.

## Contact Names and Details

### St. Martin's Church and Day Centre and St. Thomas's Hall Safeguarding Team

Vicar

Rev. Johannes Roth

vicar@stm.org.uk

Parish Safeguarding Officer

Catherine Roth

safeguarding@stm.org.uk

Parish Safeguarding Officer

Rachel Hunt

safeguarding@stm.org.uk

Day Centre Manager and Safeguarding Officer

Andrew Drury

centre@stm.org.uk

Churchwarden (Safeguarding link)

Cordelia Myers

cordelia@cordelia.org.uk

Churchwarden

Geraldine Millar

gamillar@btinternet.com

## **Diocesan Contacts**

Diocesan Safeguarding Adviser

Rebecca Boswell

Rebecca.boswell@elydiocese.org

Tel: 01353 652731                      Out of hours: 07904 487912

Archdeacon of Cambridge

The Ven Dr. Alex Huges

archdeacon.cambridge@elydiocese.org

Tel: 01353 652719

Ely Diocesan Office

Bishop Woodford House

Barton Road

Ely CB7 4DX

Tel: 01353 652701

## **National Contacts**

**Domestic Violence Helpline (for females)** 0808 2000 247

**Mankind (for males)** 01823 334244

**National Domestic Violence Helpline** 0808 2000 247

[www.nationaldomesticviolencehelpline.org.uk](http://www.nationaldomesticviolencehelpline.org.uk)

**Parentline Plus** 0808 800 2222

**Stop It Now** 0808 1000 900

[www.stopitnow.org.uk](http://www.stopitnow.org.uk) (Helpline for abusers, potential abusers and others concerned with sexual abuse)

**Age UK** [ageuk.org.uk](http://ageuk.org.uk)

**Alzheimer's Society** 0845 300 0336    [www.alzheimers.org.uk](http://www.alzheimers.org.uk)

## **Resources for adult survivors of abuse**

**MACSAS** 0808 801 0340 ([www.macsas.org.uk](http://www.macsas.org.uk))

**NAPAC** 0800 085 3330 ([www.napac.org.uk](http://www.napac.org.uk))

**RESPOND** 0808 808 0700 ([www.respond.org.uk](http://www.respond.org.uk)) (survivors of abusers with learning difficulties)

**Survivors UK** 0845 122 1201 ([www.survivorsuk.org](http://www.survivorsuk.org))