

Safeguarding: Policy and Procedures 2017-18

A guide to safeguarding
children and adults in Spelthorne



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Emergencies

Please go to page **25-29** if you need to check the procedure for reporting a concern.

In an emergency call 999 to speak to the relevant emergency service. Follow normal procedures after you have reported the incident to the emergency services.

Introduction

A life that is free from harm, abuse, and neglect is a basic right of every person. The objective of safeguarding is to prevent and reduce the risk of harm to adults and children from abuse or other types of exploitation and impairment of development, whilst supporting individuals to maintain control over their lives and enabling them to make informed decisions without coercion. While safeguarding is recognised as a key responsibility of local authorities, safeguarding is still everybody's business, and as neighbours, citizens, and community members we need to be alert to neglect and abuse, and be committed to reporting our concerns.

This policy sets out how the Council will meet its obligations to safeguard vulnerable adults and children. It applies to staff, agency workers, volunteers and contractors employed by the Council, it is also applicable to Councillors undertaking official duties on behalf of the Council. The policy compliments and supports the Surrey Safeguarding Children Board and Surrey Safeguarding Adults Board agreed multi-agency procedures^{1 2}. The policy is governed by a set of key principles and themes, designed to ensure that people who are at risk experience the process in such a way that it is sensitive to individual circumstances, is person-centred and is outcome-focused. It is vital for successful safeguarding that the procedures in this section are understood and applied consistently at an individual, managerial, and organisation level.

The aims of safeguarding are to:

- Prevent harm and reduce the risk of abuse or neglect.
- Stop abuse or neglect wherever possible.
- Prevent impairment of development and enable individuals to have the best outcomes.
- Safeguard individuals in such a way that supports them in making choices and having control over how they want to live.
- Promote an approach that concentrates on improving life for the individual.
- Raising public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect.

¹ In the event of any potential conflict between procedures; the multi-agency procedures and/or government guidance take precedence.

² <https://www.surreycc.gov.uk/social-care-and-health/safeguarding-boards/surrey-safeguarding-adults-board/surrey-safeguarding-adults-board-information-for-professionals/surrey-safeguarding-adults-multi-agency-procedures-information-and-guidance>

- Provide accessible information and support to help people understand what constitutes abuse and neglect, and how to respond.
- Address what has caused the abuse or neglect.

Safeguarding and promoting the welfare of children specifically aims to:

1. Protect children from maltreatment;
2. Prevent impairment of children's health or development;
3. Ensure that children grow up in circumstances consistent with the provision of safe and effective care; and
4. Take action to enable all children to have the best outcomes.

PART 1

Policy

Legal background, principles and values, definitions, and roles and responsibilities

a. Legal Framework

- 1.1 This Safeguarding policy is underpinned by a range of legislation including, but not limited to

The Children Acts 1989 and 2004

- 1.2 The Children Act 1989 and Children Act 2004 along with the statutory guidance, 'Working Together to Safeguard Children 2015'³, provide the current framework for safeguarding children.
- 1.3 This legislation places an overarching responsibility on Surrey County Council, as the lead authority for children, for safeguarding and promoting the welfare of all children in their area, but makes clear that other agencies also have a role to play.
- 1.4 Section 11 of the Children Act 2004 places a statutory duty on various agencies, including districts and borough councils, to make arrangements to ensure that their functions are discharged taking account of the need to safeguard and promote the welfare of children. This includes any services or function they contract out.
- 1.5 This Act lead to the establishment of the Surrey Safeguarding Children's Board⁴ and required Surrey County Council to secure the co-operation of partners in setting up arrangements to improve the well-being of children in Surrey.
- 1.6 *Working Together to Safeguard Children 2015*⁵ sets out how organisations and individuals should work together to achieve this using the key principles:
- Safeguarding is everyone's responsibility: for services to be effective each professional and organisation should play their full part.
 - The approach must be child-centred: in order to be effective, there needs to be a clear understanding of the needs of the child.

The Care Act 2014

- 1.7 *The Care Act 2014* sets out the legal framework for how local authorities and other statutory agencies, including district and borough councils, should protect adults with care and support needs who are at risk of abuse or neglect. It consolidates existing law and puts similar arrangements in place to those safeguarding children.
- 1.8 The Act required Surrey County Council, as the lead authority for vulnerable adults, to establish a Safeguarding Adults Board to bring together the key local partners to focus on safeguarding strategy and practice. The Act also places a duty on Surrey County Council to carry out safeguarding enquiries where it is suspected that someone is suffering or at risk of abuse or neglect conducting Safeguarding Adults Reviews (SARs) where there is a cause for concern about a particular case, to learn

³https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

⁴ This replaced the Area Child Protection Committee

⁵ This guidance is updated from time to time; therefore the most up to date guidance will apply in relation to the operation of this policy.

lessons for the future.

- 1.9 All these initiatives are designed to ensure greater multi-agency collaboration as a means of transforming adult social care.

The responsibilities of local authorities as identified in the Care Act 2014

What must be done by all Borough and District Councils	Paragraph in Care Act 2014
To ensure effective safeguarding arrangements all organisations must have arrangements in place which set out clearly the processes and the principles for sharing information between each other, with other professionals and the Safeguarding Adults Board; this could be via an Information Sharing Agreement to formalise the arrangements.	Paragraph 14.43
In order to respond appropriately where abuse or neglect may be taking place, anyone in contact with the adult, whether in a volunteer or paid role, must understand their own role and responsibility and have access to practical and legal guidance, advice and support. This will include understanding local inter-agency policies and procedures.	Paragraph 14.51
Local authorities must cooperate with each of their relevant partners, as described in section 6(7) of the Care Act, and those partners must also cooperate with the local authority, in the exercise of their functions.	Paragraph 14.63
When an employer is aware of abuse or neglect in their organisation, then they are under a duty to correct this and protect the adult from harm as soon as possible and inform the local authority, Care Quality Commission and Clinical Commissioning Group where the latter is the commissioner.	Paragraph 14.69
Everyone involved in a safeguarding adult's enquiry must focus on improving the adult's well-being and work together to that shared aim.	Paragraph 14.93
It is the responsibility of all staff and members of the public to act on any suspicion or evidence of abuse or neglect and to pass on their concerns to a responsible person or agency.	Paragraph 14.95
Employers must ensure that all staff, including volunteers, are trained in recognising the symptoms of abuse or neglect, how to respond and where to go for advice and assistance.	Paragraph 14.102
Employers must also ensure all staff keep accurate records, stating what the facts are and what are the known opinions of professionals and others and differentiating between fact and opinion. It is vital that the views of the adult are sought and recorded.	Paragraph 14.103
Employers who are also providers or commissioners of care and support not only have a duty to the adult, but also a responsibility to take action in relation to the employee when allegations of abuse are made against them.	Paragraph 14.116
When a person's conduct towards an adult may impact on their suitability to work with or continue to work with children, this must be referred to the local authority's designated officer (LADO)	Paragraph 14.124
Employers, student bodies and voluntary organisations should have clear procedures in place setting out the process, including timescales, for investigation and what support and advice will be available to individuals against whom allegations have been made.	Paragraph 14.126

What must be done by all Borough and District Councils	Paragraph in Care Act 2014
If an organisation removes an individual (paid worker or unpaid volunteer) from work with an adult with care and support needs (or would have, had the person not left first) because the person poses a risk of harm to adults, the organisation must make a referral to the Disclosure and Barring Service.	Paragraph 14.127
Where an adult has refused to consent to information being disclosed for these purposes, then practitioners must consider whether there is an overriding public interest that would justify information sharing ... and wherever possible, the appropriate Caldicott Guardian ⁶ should be involved.	Paragraph 14.188
Operational front line staff are responsible for identifying and responding to allegations of abuse and substandard practice.	Paragraph 14.198
Concerns about abuse or neglect must be reported whatever the source of harm is. It is imperative that poor or neglectful care is brought to the immediate attention of managers and responded to swiftly, including ensuring immediate safety and well-being of the adult.	Paragraph 14.200
The Safeguarding Adults Board (SAB) should ensure that relevant partners provide training for staff and volunteers on the policy, procedures and professional practices that are in place locally, which reflects their roles and responsibilities in safeguarding adult arrangements. Employers, student bodies and voluntary organisations should also undertake this, recognising their critical role in preventing and detecting abuse.	Paragraph 14.225
The Care Act 2014 requires that Safeguarding Adults Boards should establish and agree a framework and process for any organisation to respond to allegation against anyone who works (in either a paid or unpaid capacity) with adults with care and support needs. These people are known as People in a Position of Trust. Surrey Safeguarding Adults Board (SSAB) also requires partner agencies and the service providers they commission to identify a designated PiPoT lead or contact to oversee the delivery of responsibilities in their organisation.	Paragraph 14.120

The Mental Capacity Act 2005

- 1.10 *The Mental Capacity Act 2005* provides a statutory framework for people who lack the capacity to make decisions themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. The Act sets out who can make decisions, in which situations, and how they should go about doing so. The act assumes that a person has full legal capacity to make decisions themselves unless it can be shown that they lack capacity.
- 1.11 Additional safeguards have been introduced in law in *Deprivation of Liberty Safeguards*, to protect the rights of individuals at risk who lack the capacity to consent to treatment/care in hospitals and care homes and to ensure the treatment or care is in their best interests.

⁶ The contact details for the Caldicott Guardian for Adult Social Care can be found in Appendix 1.

b. Principles and Values

- 1.12 Safeguarding is underpinned by key principles and values that guide how we respond when alerts are raised.

Adult safeguarding: principles and values

The key principles of adult safeguarding

- 1.13 The Care Act 2014 introduced six principles of safeguarding which are listed below.

Empowerment	Presumption of person led decision making and informed consent.
Prevention	Take action before harm occurs.
Proportionality	Take the least intrusive response appropriate to the risk presented.
Protection	Provide support and representation for those in the greatest need.
Partnership	Local solutions through services working with their communities.
Accountability	Ensure there is accountability and transparency in safeguarding practices.

Making Safeguarding Personal

- 1.14 Making Safeguarding Personal (MSP) is a shift in culture and practice in response to what we now know about what makes safeguarding more or less effective from the perspective of the person being safeguarded.
- 1.15 It is about having conversations with people about how we might respond in safeguarding situations in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety. It is about seeing people as experts in their own lives and working alongside them. It is a shift from a process supported by conversations to a series of conversations supported by a process.
- 1.16 The key focus is on developing a real understanding of what people wish to achieve, agreeing, negotiating and recording their desired outcomes, working out with them (and their representatives or advocates if they lack capacity) how best those outcomes might be realised and then seeing, at the end, the extent to which desired outcomes have been realised.

Wellbeing Principle

- 1.17 The Care Act 2014 introduces a duty to promote wellbeing when carrying out any care and support functions in respect of a person. This is sometimes referred to as “the wellbeing principle” because it is a guiding principle that puts wellbeing at the heart of care and support.
- 1.18 The wellbeing principle applies in all cases where carrying out any care and support function, or making a decision, or safeguarding. When safeguarding adults it applies equally to adults with care and support needs and their carers.
- 1.19 Promoting “wellbeing” means actively seeking improvements, at every stage in

relation to the individual, and where applicable their carer. It is a shift from providing services to the concept of “meeting needs”. To promote “wellbeing” it should be assumed that individuals are best placed to judge their own wellbeing, their individual views, beliefs, feelings, wishes are paramount and individuals should be empowered to participate as fully as possible.

Safeguarding Children

Every Child Matters

1.20 The purpose of all safeguarding should be to achieve the best possible outcomes for each individual child. The government has set out five key outcomes for all children in the publication ‘Every Child Matters’. Effective safeguarding of children will contribute to the attainment of these outcomes:

- Stay safe
- Be healthy
- Enjoy and achieve
- Make a positive contribution
- Achieve economic wellbeing

1.21 ‘*Working together to safeguard children 2015*’ suggests that the focus when safeguarding children should be to promote children’s wellbeing and welfare through supporting families. It recommends that safeguarding must focus on the needs of a child as much as the risk to a child in order to give children and families positive outcomes. When safeguarding children, the response needs to be in line with the following key principles:

Safeguarding Is Everyone’s Responsibility

1.22 ‘Safeguarding is everyone’s responsibility’ is the founding principle of safeguarding children. It asserts that everybody has role to play in protecting children from harm and keeping them safe. If a person comes into contact with a child whom they consequently have concerns about, they must take action to safeguard the child. It is unlikely that a single individual’s insight into a child’s situation will form a complete picture and by raising your concerns, however small, and sharing information, it will allow for more informed decision making and decisive action to be taken.

A Child Centred Approach

1.23 In all cases, safeguarding should be child-centred. This means prioritising the needs of the children, and their views. In order to do this, children’s views must be sought, heard and respected, and they must have consistent support that meets their needs. Children have clearly expressed what they want from the safeguarding process (see box below).

Vigilance	To have adults notice when things are troubling them.
Understanding and action	To understand what is happening; to be heard and understood; and to have that understanding acted upon.
Stability	To be able to develop an on-going stable relationship of trust with those helping them.
Respect	To be treated with the expectation that they are competent rather than not
Information and engagement	To be informed about and involved in procedures, decisions, concerns and plans.
Explanation	To be informed of the outcome of assessments and decisions and reasons when their views have not met with a positive response.
Support	To be provided with support in their own right as well as a member of their family.
Advocacy	To be provided with advocacy to assist them in putting forward their views.

c. Definitions

Who is an adult at risk of abuse and neglect who may require safeguarding?

- 1.24 The safeguarding duties apply to an adult (someone aged 18 or over) who:
- has needs 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 is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

What is the definition of 'child' in this policy?

- 1.25 The term 'child' is used to encapsulate all children and young people up to the age of 18 years of age, including unborn babies.

What is the definition of abuse/neglect?

- 1.26 Defining abuse or neglect is complex and rests on many factors. The term "abuse" can be subject to wide interpretation. It may be physical, verbal or psychological, it may be an act of neglect, or occur where a person is persuaded to enter into a financial or sexual transaction to which they have not, or cannot consent.
- 1.27 Incidents of abuse may be one-off or multiple, and affect one person or more. Professionals and others should look beyond single incidents or individuals to identify patterns of harm. Repeated instances of poor care may be an indication of serious problems and of what we now describe as organisational abuse. In order to see these patterns it is important that information is recorded and appropriately shared.
- 1.28 Abuse or neglect may be the result of deliberate intent, negligence or ignorance. Exploitation can be a common theme in the experience of abuse or neglect. Abuse or neglect can take many different forms and there are common types of abuse that affect adults and children, as set out in the tables below respectively.
- 1.29 The Care Act guidance identifies a wider range of common types of abuse or neglect, see table below.

The types of abuse / neglect as set out in the Care Act	
Physical abuse	Including assault, hitting, slapping, pushing, misuse of medication, restraint, inappropriate physical sanctions.
Domestic violence	Including psychological, physical, sexual, financial, emotional abuse; 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, indecent exposure and sexual assault or sexual acts to which the person has not consented or was pressured into consenting.
Psychological abuse	Including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, 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	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 of abuse, servitude and inhumane treatment.
Discriminatory abuse	Including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.
Organisational abuse	Including 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 within 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 or educational services, 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.

The categories of abuse used in relation to children include

Physical Abuse	is to cause physical harm to a child
Emotional Abuse (including Domestic Abuse)	Persistent emotional maltreatment of a child such as to cause effects on the child's emotional development. Bullying (including cyber bullying) does not have its own category but may be considered to be emotional abuse by causing children to feel frightened or in danger'
Sexual Abuse	involves forcing or enticing a child or young person to take part in sexual activities
Neglect	Persistent failure to meet a child's basic physical &/or psychological needs

1.30 For further details about abuse and possible indicators of abuse, see Appendix 4.

d. Roles and responsibilities

Spelthorne Borough Council

The Council as an Organisation

The Council is committed at senior and committee level to safeguarding children and adults at risk. The Council recognises its responsibilities under the Care Act 2014, The Children Act 2004, and Working Together to Safeguard Children 2015. Safeguarding is a Council priority

- Representation at the Surrey Safeguarding Adults Board and the completion of standard returns for this board;
- Representation at the Surrey Safeguarding Children Board and the completion of Section 11 returns for this board;
- Appointment of a Lead Member for Children's Safeguarding;
- Appointment of Safeguarding Officers across the Council;
- Sign up to protocols and policies;

The Council as an Employer

In its role as an employer the Council incorporates safeguarding measures in its recruitment procedure and provides mandatory safeguarding training for all employees.

Recruitment Procedures

Spelthorne is committed to safer recruitment. New employees who are taking up a position which involves working closely with children or adults at risk (in a voluntary or paid capacity) will be required to acquire an Enhanced DBS Disclosure. Enhanced DBS Disclosures verify identity and will provide information regarding any unspent and spent convictions, under the Rehabilitation of Offenders Act 1974, cautions, reprimands, final warnings plus any additional information held locally by police. Some employees will have access to the secure public services network and will therefore be subject to the Government Baseline Personnel Security Standard check. A Basic Disclosure Certificate via Disclosure Scotland will be undertaken and any unspent convictions will be listed.

Training

All employees will be required to undertake safeguarding training and become familiar with the Safeguarding Policy as part of their induction. Training will be provided at three levels:

- *Citizen level:* This training is designed for all members of staff to educate them on what safeguarding is, forms of abuse, and how to report any concerns they may have.
- *Advanced level:* This training is aimed at those employees who have a role that involves direct contact with families. These employees will take part in a half-day Safeguarding Children or Adults session (sometimes both), to develop a greater knowledge of signs to be aware of where children and adults may be at risk.
- *Safeguarding Officer level:* Housing Officers, Leisure Officers, Supporting Families Team and Independent Living Officers will undertake additional training as organised and recommended by the Surrey Safeguarding Adults Board and Surrey Safeguarding Children Board to ensure that their knowledge is up to date and is reflected in Spelthorne policies and procedures.

Council Employees

All Council employees are required to participate in safeguarding training to a level appropriate to their role and adhere to the Safeguarding Policy and Procedure. It is expected that employees will maintain professional standards at all times and in their dealings with the public will never:

- Engage in rough, physical or sexually provocative games including horseplay;
- Allow or engage in inappropriate touching of any form;
- Allow children to use inappropriate language unchallenged;
- Make sexually suggestive comments, even in fun;
- Let allegations a child or adult at risk makes go unchallenged, unrecorded or not acted upon;
- Do things of a personal nature for a person that they can do for themselves.

The Council as a Licensing Authority

The Council is a licensing authority for services such as taxi drivers, public events, alcohol and entertainment, charity collections, gambling, animal licensing, boot fairs, Sunday and street trading and other licences such as fireworks. A complete list can be found on the Council's website.

The Council needs to ensure that all relevant checks are carried out prior to issuing licences and if a safeguarding concern is raised at any time during the process, the Council's safeguarding policy and procedure must be followed, including the notification of other government or national bodies.

Contracts:

Safeguarding is referenced in all applicable contractual arrangements. If a supplier breaches the contract, legal will follow their processes in addition to following the Council's Safeguarding Policy and Procedure.

e. Surrey Safeguarding Boards

- 1.31 In Surrey, the statutory Safeguarding Child Board and Safeguarding Adults boards are responsible for providing local agencies with guidance and holding agencies to account for their actions.

Representation on Safeguarding Boards

- 1.32 The Children Act 2004 and Care Act 2014 together with associated statutory guidance sets out which organisations are required to sit on both boards and comprises all relevant statutory and key voluntary agencies.
- 1.33 The agencies representation for both boards can be found in Appendix 5.
- 1.34 The 11 Borough and District Councils have a single representative nominated by the Surrey Chief Executives Group to represent them on each board. Other borough and district council officers may attend the boards or the various sub groups that deal with the operational arrangements and ensure effective practice throughout the County.

Performance and Quality Assurance

- 1.35 Organisations on the boards are responsible for ensuring that they provide any data that is required by the boards for their respective Performance and Quality Assurance Frameworks. Likewise, they are expected to complete any returns and comply with any audit requirements.

Representation on the Safeguarding boards:-

Surrey County Council Safeguarding Meetings:

Rachel O'Reilly (Mole Valley District Council) represents all Surrey district and boroughs at Adult Safeguarding Meetings.

Louise Round (Chief Executive Tandridge Council) represents all Surrey district and boroughs at Children Safeguarding Meetings.

North West Safeguarding Adults Meetings

Janice Lowin and Niky Rentall represent Spelthorne Borough Council at the North West Safeguarding Adults Group.

Surrey Safeguarding Children's Board North East Area Meeting

Lisa Stonehouse represents Spelthorne Borough Council at the Surrey Safeguarding Children's Board NE Area Meeting.

Surrey Safeguarding Adults Board (SSAB)

- 1.36 The Surrey Safeguarding Adults Board helps and protects adults in Surrey who have care and support needs and who are experiencing, or are at risk of, abuse or neglect.
- 1.37 Representatives from carers' groups, disability groups and older people's groups are members of the board.
- 1.38 The board ensures the voices of adults at risk, their families and their carers are heard, ensures there are effective processes in place to prevent and respond to abuse and neglect and raises awareness of the importance of safeguarding through publicity campaigns. The board has a multi-agency training programme in place to give staff the right skills to safeguard adults.

Surrey Safeguarding Adult Priorities

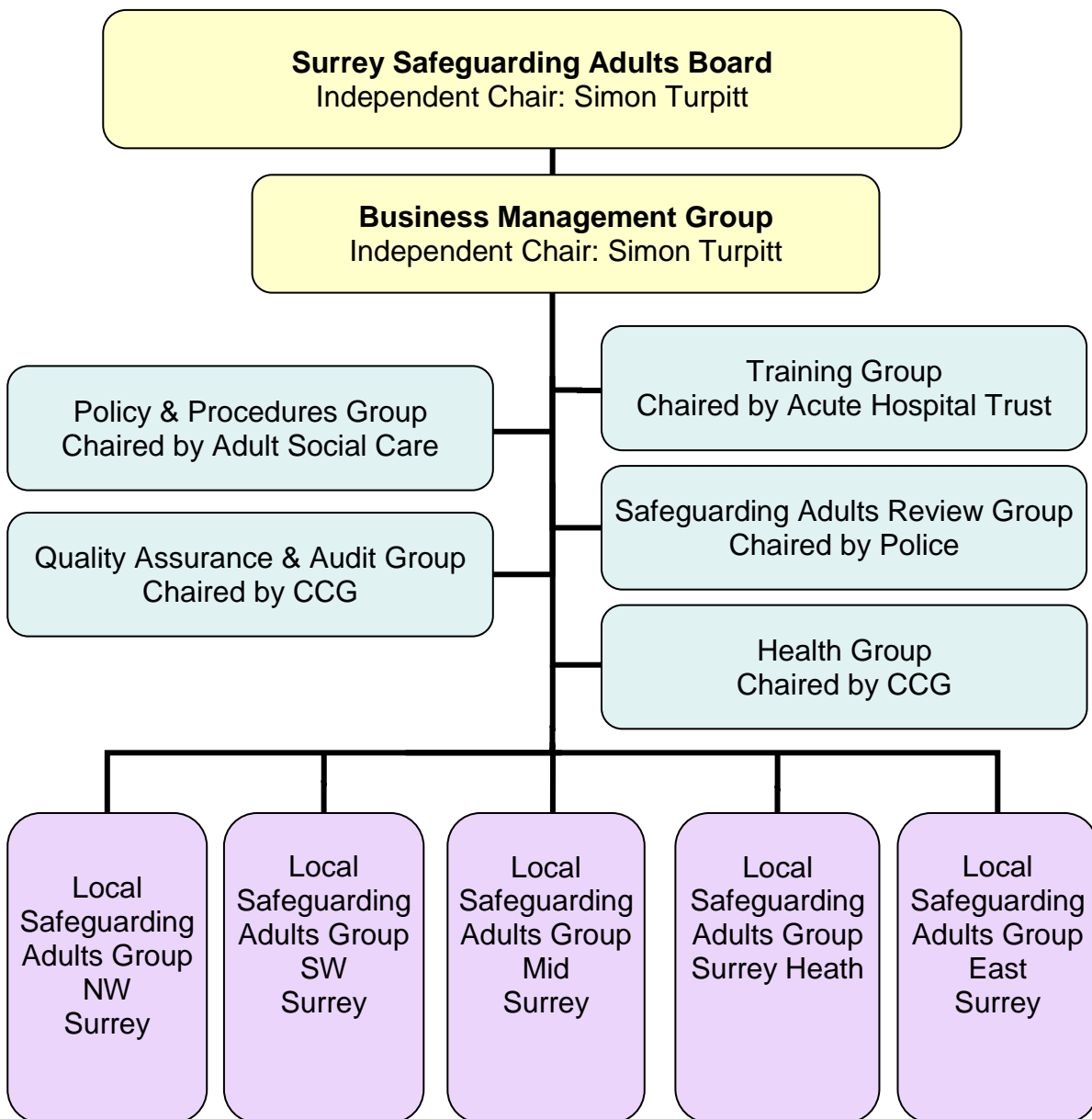
1.39 The SSAB has 3 core duties:

- It must publish a strategic plan that sets how it will meet its main objective and what the members will do to achieve this
- It must publish an annual report detailing what the SSAB has done during the year to achieve its main objective and implement its strategic plan
- It must conduct any safeguarding adults reviews in accordance with the Care Act 2014.

1.40 The functions that support its objectives and duties are:

- Developing a framework of multi-agency policies , protocols and procedures
- Requiring member agencies to provide assurance on their safeguarding activities
- Quality assuring the safeguarding of member agencies
- Implementing a multi-agency Competency Framework and training programme
- Undertaking Safeguarding Adults Reviews and learning lessons from them
- Learning lessons from other reviews including Domestic Homicide Reviews and children's Serious Case Reviews
- Undertaking activities to raise awareness of safeguarding and to support the prevention of abuse and neglect.

1.41 The structure of the board can be viewed in the figure below:



Surrey Safeguarding Children Board (SSCB)

1.42 To ensure the SSCB is able to deliver its responsibilities set out in Working Together 2015 it has five core business objectives:

- Optimise the effectiveness of arrangements to safeguard and protect children and young people
- Ensure clear governance arrangements are in place for safeguarding children and young people
- Oversee Serious Case Reviews (SCR's), Partnership Reviews and Child Death (CDOP) processes and ensure learning and actions are implemented as a result
- To ensure a safe workforce and that single-agency and multi-agency training is effective and disseminate good practice
- To raise awareness of the roles and responsibilities of the LSCB (Local Safeguarding Children's Board) and promote agency and community roles and responsibilities in relation to safeguarding children and young people.

Surrey Safeguarding Children Priorities

1.43 The SSCB has 2 main objectives:

- To coordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area
- To ensure the effectiveness of what is done by each such person or body for those purposes

1.44 The functions that support these objectives are:

- Developing policies and procedures
- Communicating and raising awareness
- Monitoring and evaluating the effectiveness of partners individually and collectively
- Participating in the planning of services
- Undertaking reviews of all child deaths and serious case reviews and disseminating the learning
- Commissioning and delivery of multi-agency training
- Evaluation of single agency and multi-agency training

Additional Priorities

1.45 In addition to the delivery of core business the SSCB has identified four targeted priorities on which to focus:

Targeted priority 1 – To monitor and challenge the effectiveness of **Early Help** and to ensure that the voice of children and young people is heard

Targeted priority 2 – To ensure professionals and the current **child protection processes effectively protect** those children identified as in need of protection and who are looked after (LAC)

Targeted priority 3 – To ensure children and young people at risk of **Child Sexual Exploitation** (CSE) are protected

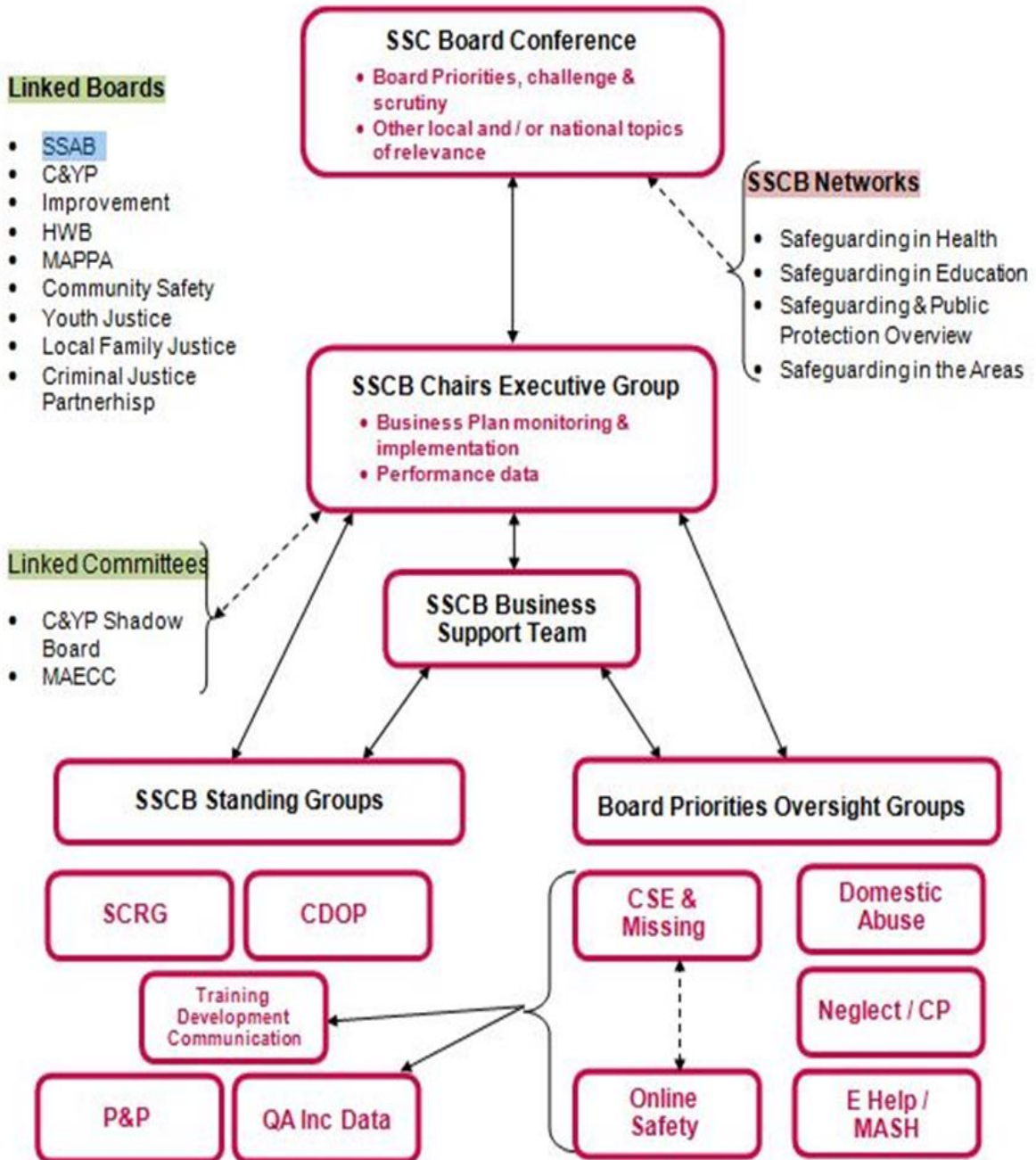
Targeted priority 4 – To monitor and challenge the effectiveness and impact of the Domestic Abuse Services in reducing the incidences of **Domestic Abuse** and protecting children and young people from harm.

1.46 Each Borough and District completes Section 11 forms to be returned to the SSCB.

1.47 The structure of Surrey Safeguarding Children Board can be viewed in the figure below:

SSCB Review of Structure 2016

Role of the SSCB: to coordinate and ensure the effectiveness of what is done by each person or body represented on the Board, for the purpose of safeguarding and promoting the welfare of children within Surrey.



Surrey Multi Agency Safeguarding Hub (MASH)

What is the MASH?

- 1.48 The Surrey Multi-Agency Safeguarding Hub (MASH) is the single point of contact for reporting concerns about the safety of a child, young person or adult. It aims to improve the safeguarding response for children and adults at risk of abuse or neglect through better information sharing and high-quality and timely responses.
- 1.49 The Surrey MASH achieves this by co-locating agencies. It brings together Surrey County Council social care workers for children and adults, early help services, health workers and police as well as a vast array of virtual partners across Surrey. Its aim is to identify need, risk and harm accurately to allow timely and the most appropriate intervention.

The MASH partners

- 1.50 The Surrey MASH is made up of staff from Adult Social Care, Children's Social Care, Health and Surrey Police. We also have a virtual team of partners who support the MASH via information sharing.
- 1.51 This includes WISE Workers, Education Workers, Independent Domestic Violence Advisers, Youth Support Services, Probation Service, Ambulance, Hospitals, Surrey Fire and Rescue Service, Trading Standards, schools and colleges, a Data Analysis team as well as four Early Help Co-Ordination hubs.
- 1.52 Because of closer partnership working, there is clearer accountability and less duplication.

How does the MASH work?

- 1.53 The MASH will consider all matters that come to its attention and decide what the best level of support, or most appropriate service, is. If there is not enough information to make this decision, the MASH will request other agencies such as police, health and schools, for information to be able to make that decision and get it right the first time. By offering advice from social workers from both adults and children services, it can take a whole family approach—adults look after children/ young people and vice versa—concerns/ risks often affect both adults and children. For example, an adult at risk who is experiencing abuse could also be a parent and the abuse they are experiencing could impact on their child. A MASH which covers both can look at the risks for both adult and child and come up with a holistic plan that supports the family.

When should the MASH be contacted?

- 1.54 The Surrey MASH should be contacted if you would like to report a concern about the safety of a child, young person or an adult. The MASH is for new contacts not existing open cases. If it is an existing case, contact their social worker or the relevant locality team, details can be found in Appendix 1.

Situations where you would call a different number instead of the MASH

- 1.55 If you have already been in touch with adult social care or children's social care services, please contact your allocated social worker or family support worker directly.

Data Sharing in the MASH

- 1.56 Any data or information in the MASH is shared using a secure IT system. **Only information that is 'lawfully' relevant** to each case will be shared. The data will be used to inform our decision on the most appropriate service by gaining a better understanding of risk and need. All other information that is not relevant, necessary or proportionate to the need or risk of that individual case will not be shared and will not be accessible to any third parties.

PART 2

Procedure

A guide on how to respond if you have a concern

The safeguarding procedures outlined below form a framework for raising an alert and taking action, however, it must be remembered that safeguarding is a dynamic process that must be undertaken with people, and is not something that happens to people.

Contact details

The contact details for the Spelthorne Safeguarding Officers and the Multi Agency Safeguarding Hub (**MASH**), can be found on page 26. These details, plus contacts for Surrey County Council Children's Social Care, Adult Social Care and other relevant numbers are also listed in Appendix 1.

To report a Prevent concern/make a referral phone Surrey Police on 101, **or in an emergency, call 999**. Prevent concerns can also be discussed with Aisling Brophy (Resilience Advisor) 07940 482 445 or 020 8251 7866. aisling@appliedresilience.org

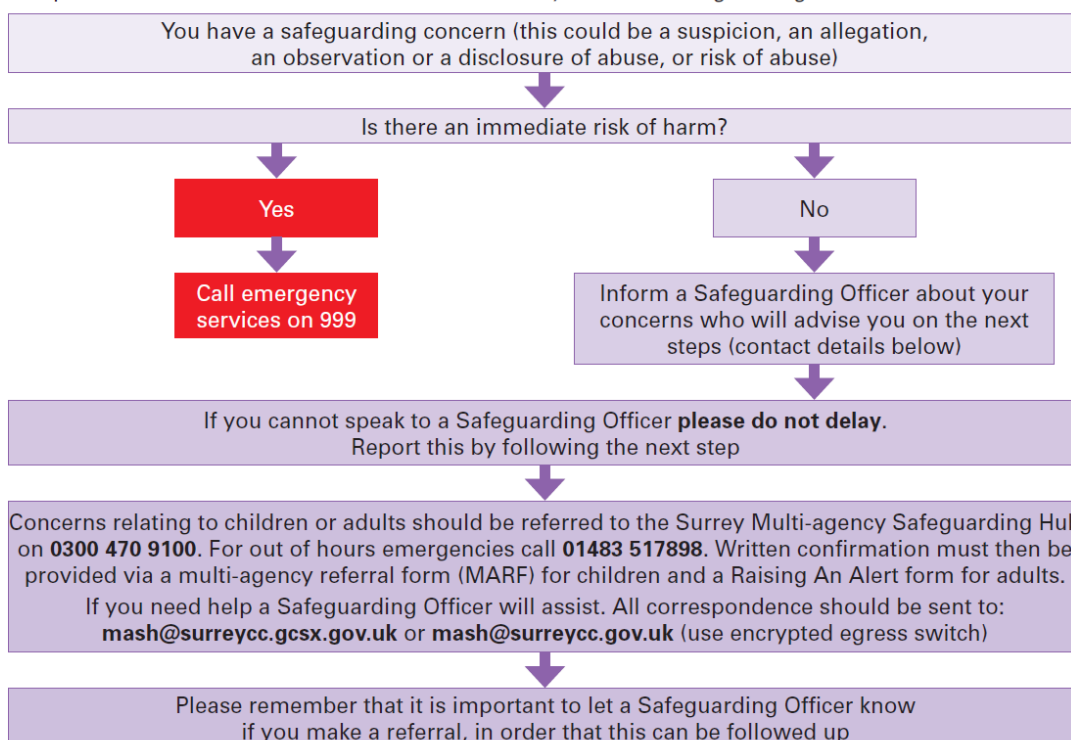
Procedure

2.1 The procedure outlined below should be followed in response to any concerns.



Safeguarding Children and Adults

The procedure outlined below should be followed if you have a safeguarding concern:



The Safeguarding Children and Adults Officers are:

Name	Job title	Contact Details
Karen Sinclair and Deborah Ashman	Joint Group Head Community Wellbeing	01784 446206 / 446208
Lisa Stonehouse	Leisure Services Manager	01784 446431
Lewis Brown	Housing Options Manager	01784 446382
Herbie Mann	Senior Housing Projects Officer	01784 448553
Paul Smith	Community Safety Officer	01784 446322
Claire Moore	Sports and Facility Manager	01784 446452
Pauline Wilkie	Housing Options Officer	01784 444280
Katy Frame	Administrative Assistant, Streetscene	01784 446312
Martin Cole	Law Enforcement Officer	01784 448635
Charlene Edwards	Family Support Manager (Family Support Cases only)	01372 474375

The Safeguarding Adults Officers are:

Name	Team	Contact Details
Niky Rentall and Janice Lowin	Joint Independent Living Managers	01784 446343 / 446396
Victoria Mason	Independent Living Supervisor	01784 446290
Jan Kinsella	Manager at Fordbridge Community Centre	01784 243880
Pat White	Manager at Greeno Community Centre	01932 246173

The Management Team Lead Officer for Spelthorne is Terry Collier (Deputy Chief Executive), he can be contacted on 01784 446296.

10 November 2016

What you should do if you have a Safeguarding Concern about a child or an adult

Employees

- Please follow the procedure on page 26 of this policy. The procedure is also displayed on all staff notice boards and in every office. Please also take note of the information on pages 28-30. Ensure that you liaise with a Safeguarding Officer as per the procedure. **In an emergency call 999.**
- If a referral is made to the Multi Agency Safeguarding Hub (MASH), they will let you know if further information or action is required from you. A Safeguarding Officer will help you with this. You may not find out the outcome of the alert you raised, as information is only provided on a need to know basis.

Safeguarding officers

- Decide whether a safeguarding referral needs to be made (do not refer to the MASH if the person already has a nominated social worker. (contacts in appendix 1). **In an emergency call 999**
- If a telephone referral is made, please ensure that this is confirmed by completing Multiagency Referral Form for a child referral (see appendix 2) or a Raising an Alert Form for an adult referral. (see appendix 3). Please forward these forms to the MASH. If the MASH would like further information, they will contact you.
- Please log the referral on the confidential safeguarding team site spreadsheet to ensure that other safeguarding officers are aware of the details.

How to respond: Good practice guidelines

Responding to a person who discloses a concern of abuse:

- In an emergency ring 999
- Do ensure the safety of the individual and others if in immediate danger, contact the relevant emergency service.
- Do **not** be judgemental or jump to conclusions.
- Do listen carefully.
- Do provide support and information to meet their specific communication needs.
- Do use open questions.
- Do tell them that they did a good/right thing in telling you.
- Do tell them you are treating the information seriously.
- Do tell them it was not their fault.
- Do ask them what they need to keep themselves safe.
- Do **not** make promises you cannot keep
- Do **not** promise to keep secrets
- Do seek consent to share the information with your lead for safeguarding, however lack of consent should not prevent you from reporting your concerns.
- Do explain that you have a duty to tell your lead for safeguarding.
- Do provide support and information to meet their specific communication needs.
- Do not confront the person alleged to have caused the harm as this could place you at risk, or provide an opportunity to destroy evidence, or intimidate the person alleged to have been harmed or witnesses.
- Do explain that you will try to take steps to protect them from further abuse or neglect.
- Do support and reassure the person.
- Do preserve any forensic or other evidence.

Action after the concern of abuse has been recognised: (to be taken as soon as possible or within 4 hours)

- Report concerns to a lead for safeguarding or other designated person.
- Record your concerns and how they came to light, any information given by the person, information about any witnesses, the individual's wishes, actions taken, who was present at the time, dates and times of incident(s).
- Record details of the person alleged to have caused harm.
- Do record any concerns about the person's capacity to make any decisions and the reasons for the concerns.
- Do record whether the person is aware that the concerns have been reported.
- Do record their perspective.
- Do record any previous concerns about the person.
- Do **not** breach confidentiality for example by telling friends, other work colleagues.
- Do use Whistleblowing Procedures if you feel that you will not be believed, taken seriously or believe that your manager or lead for safeguarding may be causing the risks of abuse to the adult or child.

How to respond: Information sharing and record keeping

2.2 Safeguarding relies on good practice in order to be effective. In order to gain an accurate view of a situation, it may require putting pieces of information together. It is therefore essential that high standards of record keeping and information sharing are employed.

Information sharing

2.3 Information sharing is crucial to delivering better, more efficient services that are coordinated around the needs of the individual. It is essential to enable early intervention and preventative work, for safeguarding, promoting welfare and for wider

public protection. Information sharing is a vital element in improving outcomes for all. Nevertheless, it is important to understand that most people want to be confident their personal information is kept safe and secure and that practitioners maintain their privacy, while sharing appropriate information to deliver better services. All information sharing should be in line with the agreed set of principles about sharing personal or confidential information in the Surrey Multi-Agency Information Sharing Protocol (MAISP). Further information can be found at <http://www.surreycc.gov.uk/social-care-and-health/safeguarding-boards/surrey-safeguarding-adults-board/surrey-safeguarding-adults-board-information-for-professionals/protocols-forms-and-guidance>

Record keeping

- 2.4 Good record-keeping is an essential part of the accountability of organisations to those who use their services. Maintaining proper records is vital to individuals' care and safety. If records are inaccurate, future decisions may be wrong and harm may be caused to the individual. Where an allegation of abuse is made, all agencies have a responsibility to keep clear and accurate records. It is fundamental to ensure that evidence is protected and to show what action has been taken, what decisions have been made and why.

A guide to making a record

- 2.5 As soon as possible on the same day, make a written record of what you have seen, been told or have concerns about. Try to make sure anyone else who saw or heard anything relating to the concern also makes a written report. The written report will need to include:
- the date and time when the disclosure was made, or when you were told about / witnessed the incident/s,
 - who was involved, any other witnesses including service-users and other staff,
 - exactly what happened or what you were told, in the person's own words, keeping it factual and not interpreting what you saw or were told,
 - the views and wishes of the adult
 - the appearance and behaviour of any persons involved
 - any injuries observed,
 - any actions and decisions taken at this point,
 - any other relevant information, e.g. previous incidents that have caused you concern.
- 2.6 Remember to:
- include as much detail as possible,
 - make sure the written report is legible, written or printed in black ink, and is of a quality that can be photocopied,

- make sure you have printed your name on the report and that it is signed and dated,
- keep the report factual as far as possible. However, if it contains your opinion or an assessment, it should be clearly stated as such and be backed up by factual evidence. Information from another person should be clearly attributed to them.
- keep the report/s confidential, storing them in a safe & place until needed.

2.7 More information about recording keeping can be found at:

<http://www.surreycc.gov.uk/social-care-and-health/safeguarding-boards/surrey-safeguarding-adults-board/surrey-safeguarding-adults-board-information-for-professionals/protocols-forms-and-guidance>

PART 3

Other related policies and strategies

County level

Prevent Strategy

- 3.1 The purpose of the Prevent Strategy is to stop people becoming terrorists or supporting terrorism. It aims to identify individuals at risk of radicalisation and being drawn into extremist activity. The Community Safety Board has overall governance of the Prevent Strategy with the Multi-Agency Prevent Partnership Group established to review trends and developments as well as provide a 'quality assurance' overview around Prevent delivery across Surrey.
- 3.2 The Surrey Community Safety Partnerships have identified Prevent as a priority and each District and Borough has developed a local Prevent Action Plan. Workshops have been held to raise awareness.
- 3.3 Contact details for the Prevent Officer can be found in Appendix 1

Domestic Abuse

- 3.4 Domestic abuse (DA) can be any incident of threatening behaviour, violence or abuse between adults who are, or have been, intimate partners, family members or members of the same household regardless of gender or sexuality. Domestic abuse is not limited to violent abuse; it can be physical, psychological, sexual, emotional or financial. Children's health and wellbeing can be seriously affected by living in households where there is any form of domestic abuse. The county-wide DA Management Board has overall responsibility for the development and implementation of the DA Strategy. Spelthorne Borough Council is represented on this Board by a Community Safety Manager from the north of the county. A housing representative attends the Multi Agency Risk Assessment Conference (MARAC). This is a risk management meeting where professionals share information on high risk cases of domestic abuse and put in place a risk management plan. The meeting's aim is to address the safety of the victim, children and agency staff and to review and co-ordinate service provision in high risk domestic abuse cases. In addition, the MARAC meeting will also seek to focus appropriate resources on the needs of the perpetrator with the aim of reducing offending behaviour and supporting the associated criminal justice process as required. More information including contacts for agencies that can offer support and practical advice can be found on www.surreyagainstda.info

Child Sexual Exploitation

- 3.5 CSE is the sexual abuse of a child or young person aged under 18 by an adult who involves them in inappropriate sexual activities either with themselves or another person. The activity often takes place in exchange for money, alcohol, drugs, food, accommodation or presents. Online grooming is a type of CSE that impacts both boys and girls across Surrey. This area of work is led by specialist police officers working closely with partners such as local Councils, social services, youth services, housing providers and the voluntary sector.
- 3.6 A local MAECC (Missing and Exploited Children Conference) chaired by Children's Services meets monthly to discuss and agree actions to safeguard those young people identified as being at high/medium risk of CSE. District/Borough officers also

attend and participate in these meetings.

- 3.7 More information can be found on Surrey Police's website.

Early Help

- 3.8 Early Help co-ordination supports all Surrey agencies, preventing and reducing the repetition of youth and parental crime, schools' pupil absence and exclusion, domestic abuse and or violence, child abuse and neglect, poor family physical and emotional health, substance misuse, homelessness and financial exclusion. Improved compliance by the safeguarding partnership with provision of help earlier with an audit trail showing outcomes to agencies involved.

Missing Persons Protocol

- 3.9 This is in place to ensure that there is a coordinated response from agencies when a vulnerable adult goes missing. This includes Surrey Police, Surrey & Borders Partnership Trust, and Surrey Care Association, Surrey County Council Adult social Care Services and Surrey Care providers and associated agencies. It provides guidelines to all parties as to what actions should be taken when a person receiving care goes missing. More information can be found on the Surrey Safeguarding Adults Board website.

Surrey Multi-Agency Information Sharing Protocol

- 3.10 The MAISP is an agreed set of principles about sharing personal or confidential information. It enables each organisation signed up to the protocol to understand the circumstances in which it should share information and what its responsibilities are. The MAISP has been developed in partnership with Surrey County Council, all the borough and districts as well as the health services and Surrey Police.

<http://www.surreycc.gov.uk/social-care-and-health/safeguarding-boards/surrey-safeguarding-adults-board/surrey-safeguarding-adults-board-information-for-professionals/protocols-forms-and-guidance>

Information Sharing within MASH

- 3.11 Any data or information in the MASH is shared using a secure IT system. **Only information that is 'lawfully' relevant** to each case will be shared. The data will be used to inform our decision on the most appropriate service by gaining a better understanding of risk and need. All other information that is not relevant, necessary or proportionate to the need or risk of that individual case will not be shared and will not be accessible to any third parties.
- 3.12 Surrey Safeguarding Partnership: An Information Sharing Agreement and Individual Working Agreement has been developed between this Council, Surrey Adult Social Care/Surrey & Border Partnership NHS Foundation Trust (SABP) & Children's Services in relation to the Surrey Multi Agency Safeguarding Hub (MASH).
- 3.13 For more information about MASH: <https://www.surreycc.gov.uk/social-care-and-health/contacting-social-care/contact-childrens-services/about-the-multi-agency-safeguarding-hub>

People in a Position of Trust Protocol

3.14 The Care Act 2014 requires that Safeguarding Adults Boards should establish and agree a framework and process for any organisation to respond to allegation against anyone who works (in either a paid or unpaid capacity) with adults with care and support needs. The framework and process in the context is referred to as the "Protocol" The Protocol applies to all partner agencies of Surrey Safeguarding Adults Board (SSAB) and organisations commissioned to provide services by them, so they respond appropriately to allegations against people who, whether an employee, volunteer or student, paid or unpaid, works with or cares for adults with care and support needs. These individuals are known as People in a Position of Trust (PiPoT). SSAB also requires partner agencies and the service providers they commission to identify a designated PiPoT lead or contact to oversee the delivery of responsibilities in their organisation.

Spelthorne Borough Council

The PiPoT Leads for Spelthorne Borough Council are:
Janice Lowin and Niky Rental (Independent Living)
Their contact details can be found in Appendix 1.

Information, policies and procedures associated with Safeguarding

The Spelthorne Community Safety Partnership (CSP)

The Spelthorne CSP is a statutory body responsible for the development and delivery of a strategic response to National, Countywide and local crime and disorder and community safety issues. Domestic abuse, Prevent and Child Sexual Exploitation are among its priorities and associated working groups and action plans have been implemented to support these work areas.

Prevent Strategy

The Prevent Strategy 2016-2018 and accompanying action plan has the following objectives:-

- Respond to the ideological challenge of terrorism and the threat we face from those who promote it;
- Prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support; and
- Work with sectors and institutions where there are risks of radicalisation which we need to address. The Prevent duty is intended to challenge all forms of terrorism, including the influence of far right extremists.

Radicalisation could be comparable to other forms of harm and abuse, and therefore considered to be a safeguarding issue and considered alongside the Council's wider safeguarding agenda. The Prevent lead reports to the quarterly CSP board meeting.

Child Sexual Exploitation (CSE)

The Community Safety Officer is the council's lead officer for CSE and attends the monthly Missing and Exploited Children's Conference meetings (MAECC) and the CSP.

Whistle-blowing policy:

If safeguarding concerns are highlighted as a result of or during a whistle-blowing concern, the safeguarding procedure must be followed.

The Council as a Licensing Authority

The Council is the licensing authority for the regulation of activities such as the taxi and private hire trade and the sale of alcohol. A complete list of licencing functions can be found on the website.

The Council ensures that all relevant checks are carried out prior to issuing licences and if a safeguarding concern is raised at any time during the process, the safeguarding policy and procedure must be followed, including notification requirements in relation to other government or national bodies.

Contracts:

Safeguarding is referenced in all applicable contractual arrangements. If a supplier breaches the contract, legal will follow their processes in addition to following the Council's Safeguarding policy and procedure.

Appendix 1: Spelthorne Safeguarding Leads and Other Useful Contacts

Spelthorne Borough Council			
Safeguarding Children Officers			
Name	Role	Team	Contact Details
Karen Sinclair & Deborah Ashman	Joint Group Head	Community Wellbeing	01784 446206/446208
Lisa Stonehouse	Leisure Services Manager	Leisure Services	01784 446431
Lewis Brown	Housing Options Manager	Housing Options	01784 446382
Herbie Mann	Senior Housing Projects Officer	Housing Options	01784 448553
Paul Smith	Community Safety Officer	Community Safety	01784 446322
Claire Moore	Sports and Facility Manager	Leisure Services	01784 446452
Pauline Wilkie	Housing Options Team Leader	Housing Options	01784 446280
Katy Frame	Administrative Assistant	Streetscene	01784 446312
Martin Cole	Law Enforcement Officer	Streetscene	01784 446312
Charlene Edwards	Family Support Manager (Family Support Cases Only)	Family Support	01372 474375
Safeguarding Adult Officers			
Niky Rentall & Janice Lowin	Joint Independent Living Managers	Independent Living	01784 446343/446396
Victoria Mason	Independent Living Supervisor	Independent Living	01784 446290
Jan Kinsella	Manager	Fordbridge Community Centre	01784 243880
Pat White	Manager	Greeno Community Centre	01932 246173
Child Sexual Exploitation Officer			
Paul Smith	Community Safety Officer	Community Safety	01784 446322
Prevent Lead			
Aisling Brophy	Resilience Advisor	Applied Resilience	07490 482 445 or 020 8251 7866

Raising Alerts		
To ensure timely response to Safeguarding concerns, alerts should be made by telephone to Surrey Multi Agency Safeguarding Hub (MASH) :		
Surrey Multi Agency Safeguarding Hub (MASH)		
The team of multi-agency staff will be based at Guildford Police Station, working hours 9am to 5pm Monday to Friday.		
Monday to Friday 9am to 5pm	MASH Phone number: 0300 470 9100	MASH team Surrey Police
	MASH Email: mash@surreycc.gov.uk	PO Box 101 Guildford
	MASH Secure email: mash@surreycc.gcsx.gov.uk	GU1 9PE
Out of hours – emergency duty team	01483 517898	

The Caldicott Guardian for Surrey Adult Social Care

Toni Carney – Email: toni.carney@surreycc.gov.uk

Child Sexual Exploitation, Modern Slavery and Prevent referrals should be made to Surrey Police on 101 unless it is an emergency in which case call 999.

Crimestoppers anonymously 0800 555 111

Childline 0800 1111

General, non-safeguarding queries or existing open cases for Adults

If the adult you are concerned about already has an allocated social worker please call:-

Spelthorne Locality Team

Adult Social Care

Spelthorne Borough Council
Knowle Green, Staines TW18 1XB

Tel: 01932 795292

Email: spelthornelocalityteam@surreycc.gov.uk

General, non-safeguarding queries or existing open cases for Children

If the child you are concerned about already has an allocated social worker please call:-

The North East Team

Tel 0300 123 1610

Appendix 2: Multi-Agency Referral Form

SCS700/Jan 017



Multi-agency referral form to Surrey Children's Services

This form is to be used when **making a referral** which requires a response from Surrey Children's Service. If you are unclear whether to make a referral, please discuss this with your Safeguarding lead and or the MASH before completing this form. MASH email address: mash@surreycc.gcsx.gov.uk

Referral Completed by: <i>(details of person taking the referral)</i>		
Name of Referrer:	Job title:	Agency:
Address:	Email:	Telephone:
Date of Referral:	Time of referral:	Date and time MARF form completed:

1. CHILD/YOUNG PERSON DETAILS/SIBLING DETAILS						
Last Name	First Name	Age/DOB/ /EDD	M/F	Ethnicity/ Language	5 Religion	6 Address and telephone number

2. HOUSEHOLD DETAILS (including extended family)						
Last Name	First Name	Age/DOB/ EDD	7 M/F	Ethnicity/ Language	Relationship to child	8 Address and telephone number

Give details of principal carers and those with Parental Responsibility (if their address is different from the child):						
Last Name	First Name	Age/DOB/ EDD	9 M/F	Ethnicity/ Language	Relationship to child	0 Address and telephone number

Are there any communication/interpreting needs for the child and/or family?	Does the child and/or family have a disability or special needs?
--	---

3. Other professionals involved (to include GP, school and details of any voluntary agencies involved)			
Name	Job Title	Address	Telephone/email

4. Reason for Referral	
What was the date and time of presentation?	Was the child/young person present? <input type="checkbox"/> YES <input type="checkbox"/> NO
If NO, please give details of where the child was at the time of referral and who they were with:	
What are you worried about?	
What does the history tell us?	
What is working well?	
What is not working well?	
What do you consider to be the appropriate level of need for this case? Please refer to Surrey Levels of Need document for guidance.	

5 . Previous involvement	
Has an Early Help Assessment been completed?	If No, please say why not:
<input type="checkbox"/> No <input type="checkbox"/> Yes , please attach	
What early help support has already been offered by your agency and/or other agencies and what were the outcomes?	
Are you aware of any previous social work involvement with this family? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If YES, please give details, including approximate dates:	

6. Consent (Please note that parents/carers have to consent to this referral unless obtaining this consent will place the child at further risk of harm)	
Is the child/young person aware of the referral? <input type="checkbox"/> YES <input type="checkbox"/> NO	If no then why?
Has the child's views been sought? <input type="checkbox"/> YES <input type="checkbox"/> NO	If no then why?
Please record the child's view	
Is the parent/carer aware of the referral? <input type="checkbox"/> YES <input type="checkbox"/> NO	If no then why?
Does the parent give consent for this referral? <input type="checkbox"/> YES <input type="checkbox"/> NO	If no then why?
Does the parent give consent to information being shared with partner agencies? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Who has given consent?	

Has the parent/carer specified that information should NOT be shared with a particular person/agency? YES NO If yes, please specify

7 . Are there any issues we should be aware of when contacting parents/carers?

Appendix 3: Raising an Alert



SAFEGUARDING ADULTS ALERT / CONCERN FORM - CONFIDENTIAL (when completed) -

If you have a concern that an adult who has care and support needs is experiencing abuse or neglect, please phone the Multi Agency Safeguarding Hub (MASH) for advice and support. Some people may also want to complete a form, setting out in writing their concern. If so, please use this form to notify ASC that you have a concern an adult is at risk of abuse or neglect (including self-neglect). Anyone can fill in this form, including members of the public.

In an emergency, always dial 999 for the police.

Multi Agency Safeguarding Hub (MASH)

- Contact the Multi Agency Safeguarding Hub (MASH): 0300 470 9100
- Email: mash@surreycc.gov.uk
- Secure email mash@surreycc.gcsx.gov.uk

Out of hours

- Call Adult Social Care emergency duty team on: 01483 517898

1. Your details	
Date form completed:	
Time form completed:	
Name of Person completing this form	
How do you know the adult at risk / your involvement with them	
Your Telephone	
Your Mobile	
Your email	

2. Adult at risk's details	
Name:	
Address	
Date of Birth	
Gender	
Does the adult have any language or communication difficulties	
Does the adult have any known Mental Capacity issues	
Their telephone:	
Their mobile:	
Their email:	

3. Details of concern				
Date of alleged abuse or neglect (if known):				
Type of suspected abuse or neglect (tick all that apply)				
Physical	<input type="checkbox"/>	<input type="checkbox"/>	Modern slavery	<input type="checkbox"/>
Domestic abuse	<input type="checkbox"/>		Discriminatory	<input type="checkbox"/>
Sexual	<input type="checkbox"/>		Organisational	<input type="checkbox"/>
Psychological	<input type="checkbox"/>		Neglect and acts of omission	<input type="checkbox"/>
Financial and material	<input type="checkbox"/>		Self neglect	<input type="checkbox"/>
<p>Please give details about your concerns (such as what has happened to make you concerned that the person may be being abused / neglected, who was involved, were there any witnesses, whether you have any immediate concerns about the persons safety, whether any action has already been taken to keep the person safe such as have the police been called, medical assistance requested etc, is there anyone else who could be at risk due to your current concerns such as a child or another adult at risk/ vulnerable person):</p>				

4. Please tell us if you know whether other people are involved with the adult at risk.
This may include people such as their GP, family, neighbours, professionals, other agencies. If possible, please include Name, Job Title (if any), Address and Telephone number. 1. 2. etc.

5. Does the adult at risk know you are contacting us?			
Yes			No
If yes , what are their views. Please include whether they agree with the referral being made.		If no , were there any reasons why you did not feel it appropriate to advise them that you were making contact with us	

If you are sending the referral from a professional secure email address– this will be an email address containing: .gcsx.gov.uk (Local Government/Social Services), .gse.gov.uk (Central Government), .gsi.gov.uk (Central Government including Department of Health), .gsx.gov.uk (Central Government), .mod.uk (Military), .nhs.net (NHSmial), .pnn.police.uk (Police), .scn.gov.uk (Criminal and Justice), .cjsm.net (Criminal and Justice) – **then please send your completed Safeguarding Adults Concern Form to the secure email address of the MASH**

If you do not have one of the above secure email addresses please send the completed form, marked ‘CONFIDENTIAL’ by post: MASH team, Surrey Police, PO Box 101, Guildford. GU1 9PE.

Alternatively, you can register with the Egress system at www.egress.com. You can then send the form via their system, securely to the MASH.

Appendix 4: Forms of abuse and indicators of abuse

Physical abuse

Physical abuse includes assault, hitting, slapping, pushing, kicking, misuse of medication, being locked in a room, inappropriate sanctions or force-feeding, inappropriate methods of restraint, and unlawfully depriving a person of their liberty.

Possible indicators

1. Unexplained or inappropriately explained injuries;
2. Exhibiting untypical self-harm;
3. Unexplained cuts or scratches to mouth, lips, gums, eyes or external genitalia;
4. Unexplained bruising to the face, torso, arms, back, buttocks, thighs, in various stages of healing. Collections of bruises that form regular patterns which correspond to the shape of an object or which appear on several areas of the body;
5. Unexplained burns on unlikely areas of the body (e.g. soles of the feet, palms of the hands, back), immersion burns (from scalding in hot water/liquid), rope burns, burns from an electrical appliance;
6. Unexplained or inappropriately explained fractures at various stages of healing to any part of the body;
7. Medical problems that go unattended;
8. Sudden and unexplained urinary and/or faecal incontinence. Evidence of over/under-medication;
9. Flinches at physical contact;
10. Appears frightened or subdued in the presence of particular people;
11. Asks not to be hurt;
12. May repeat what the person causing harm has said (e.g. 'Shut up or I'll hit you');
13. Reluctance to undress or uncover parts of the body;
14. Wears clothes that cover all parts of their body or specific parts of their body;
15. An adult with capacity⁷ not being allowed to go out of a care home when they ask to;
16. An adult without capacity not being allowed to be discharged at the request of an unpaid carer/family member.

⁷ The NHS defines capacity as "the ability to use and understand information to make a decision, and communicate any decision made. A person lacks capacity if their mind is impaired or disturbed in some way and this means the person is unable to make a decision at that time. <http://www.nhs.uk/Conditions/Consent-to-treatment/Pages/Capacity.aspx>

Domestic abuse

Domestic abuse includes psychological, physical, sexual, financial, emotional abuse, and so called 'honour' based violence.

In 2013, the Home Office announced changes to the definition of domestic abuse:

- Incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality
- Includes: psychological, physical, sexual, financial, emotional abuse, so called 'honour' based violence, Female Genital Mutilation, forced marriage.
- Age range extended down to 16.

Many people think that domestic abuse is about intimate partners, but it is clear that other family members are included and that much safeguarding work that occurs at home is, in fact is concerned with domestic abuse. This confirms that domestic abuse approaches and legislation can be considered safeguarding responses in appropriate cases.

Family members are defined as: mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.

Forced marriage is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of their parents or a third party in identifying a spouse.

In a situation where there is concern that an adult with care and support needs is being forced into a marriage they do not or cannot consent to, there will be an overlap between action taken under the forced marriage provisions and the adult safeguarding process. In this case action will be co-ordinated with the police and other relevant organisations. The police must always be contacted in such cases as urgent action may need to be taken.

The Anti-social Behaviour, Crime and Policing Act 2014 means it is now a criminal offence to force someone to marry. In addition, the Forced Marriage (Civil Protection) Act 2007 may be used to obtain a Forced Marriage Protection Order as a civil remedy.

Honour-based violence is a crime, and referring to the police must always be considered. It has or may have been committed when families feel that dishonour has been brought to them. Women are predominantly (but not exclusively) the victims and the violence is often committed with a degree of collusion from family members and/or the community. Many of these victims will contact the police or other organisations. However, many others are so isolated and controlled that they are unable to seek help.

Safeguarding concerns that may indicate honour-based violence include domestic violence, concerns about forced marriage, enforced house arrest and missing person's reports. If a safeguarding concern is raised, and there is a suspicion that the adult is the victim of honour-based violence, referring to the police must always be considered as they have the necessary expertise to manage the risk.

Female genital mutilation (FGM) involves procedures that intentionally alter or injure female genital organs for non-medical reasons. The procedure has no health benefits for girls and women. The Female Genital Mutilation Act (FGMA) was introduced in 2003 and came into effect in March 2004. The Act makes it illegal to practise FGM in the UK or to take girls who are British nationals or permanent residents of the UK abroad for FGM whether or not it is lawful in another country. It also makes it illegal to aid, abet, counsel or procure the carrying out of FGM abroad.

Sexual abuse

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 consented or was pressured into consenting.

It includes penetration of any sort, incest and situations where the person causing harm touches the abused person's body (e.g. breasts, buttocks, genital area), exposes his or her genitals (possibly encouraging the abused person to touch them) or coerces the abused person into participating in or looking at pornographic videos or photographs. Denial of a sexual life to consenting adults is also considered abusive practice.

Any sexual relationship that develops where one person is in a position of trust, power or authority in relation to the other (e.g. day centre worker/social worker/residential worker/health worker etc.) may also constitute sexual abuse (see section on position of trust).

Possible indicators

- Urinary tract infections, vaginal infections or sexually transmitted diseases that are not otherwise explained;
- Appears unusually subdued, withdrawn or has poor concentration;
- Exhibits significant changes in sexual behaviour or outlook;
- Experiences pain, itching or bleeding in the genital/anal area;
- Underclothing is torn, stained or bloody;
- A child or a woman who lacks the mental capacity to consent to sexual intercourse becomes pregnant;
- Sexual exploitation.

The sexual exploitation of adults with care and support needs involves exploitative situations, contexts and relationships where adults with care and support needs (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing sexual activities, and/or others performing sexual activities on them.

Sexual exploitation can occur through the use of technology without the person's immediate recognition. This can include being persuaded to post sexual images or videos on the internet or a mobile phone with no immediate payment or gain, or being sent such an image by the person alleged to be causing harm. In all cases those exploiting the

individual have power over them by virtue of their age, gender, intellect, physical strength, and/or economic or other resources.

Psychological abuse

Psychological abuse includes 'emotional abuse' and takes the form of threats of harm or abandonment, deprivation of contact, humiliation, rejection, blaming, controlling, intimidation, coercion, indifference, harassment, verbal abuse (including shouting or swearing), cyber bullying, isolation or withdrawal from services or support networks.

Psychological abuse is the denial of a person's human and civil rights including choice and opinion, privacy and dignity and being able to follow one's own spiritual and cultural beliefs or sexual orientation.

It includes preventing a person from using services that would otherwise support them and enhance their lives. It also includes the intentional and/or unintentional withholding of information (e.g. information not being available in different formats/languages etc.).

Possible indicators

- Untypical ambivalence, deference, passivity, resignation;
- Appears anxious or withdrawn, especially in the presence of the alleged abuser;
- Exhibits low self-esteem;
- Untypical changes in behaviour (e.g. continence problems, sleep disturbance);
- Not allowed visitors/phone calls;
- Locked in a room/in their home;
- Denied access to aids or equipment, (e.g. glasses, dentures, hearing aid, crutches, etc.);
- Access to personal hygiene and toilet is restricted;
- Movement is restricted by use of furniture or other equipment;
- Bullying via social networking internet sites and persistent texting.

Financial or material abuse

This includes 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.

Possible indicators

- Lack of heating, clothing or food;
- Inability to pay bills/unexplained shortage of money;
- Lack of money, especially after benefit day;

- Inadequately explained withdrawals from accounts;
- Unexplained loss/misplacement of financial documents;
- The recent addition of authorised signatories on accounts or cards
- Disparity between assets/income and living conditions;
- Power of attorney obtained when the adult lacks the capacity to make this decision;
- Recent changes of deeds/title of house or will;
- Recent acquaintances expressing sudden or disproportionate interest in the person and their money;
- Service user not in control of their direct payment or individualised budget;
- Miss-selling/selling by door-to-door traders/cold calling;
- Illegal money-lending.

Modern slavery

Modern Slavery encompasses slavery, human trafficking, forced and compulsory 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 of abuse, servitude and inhumane treatment.

A large number of active organised crime groups are involved in modern slavery; but it is also committed by individual opportunistic perpetrators.

There are many different characteristics that distinguish slavery from other human rights violations, however only one needs to be present for slavery to exist.

Someone is in slavery if they are:

- forced to work - through mental or physical threat;
- owned or controlled by an 'employer', usually through mental or physical abuse or the threat of abuse;
- dehumanised, treated as a commodity or bought and sold as 'property';
- Physically constrained or has restrictions placed on his/her freedom of movement.

Contemporary slavery takes various forms and affects people of all ages, gender and races.

Human trafficking involves an act of recruiting, transporting, transferring, harbouring or receiving a person through a use of force, coercion or other means, for the purpose of exploiting them.

If an identified victim of human trafficking is also an adult with care and support needs, the response will be co-ordinated under the adult safeguarding process. The police are the lead agency in managing responses to the victims of human trafficking. There is a national framework to assist in the formal identification and help to coordinate the referral of victims to appropriate services, known as the National Referral Mechanism.

Possible Indicators:

Signs of various types of slavery and exploitation are often hidden, making it hard to recognise potential victims. Victims can be any age, gender or ethnicity or nationality. Whilst by no means exhaustive, this is a list of some common signs:

- Not in possession of their legal documents (passport, identification and bank account details) and they are being held by someone else;
- Has old or serious untreated injuries and they are vague, reluctant or inconsistent in explaining how the injury occurred.
- Looks malnourished, unkempt, or appears withdrawn
- Have few personal possessions and often wear the same clothes
- What clothes they do wear may not be suitable for their work.
- Withdrawn or appears frightened, unable to answer questions directed at them or speak for themselves and/or an accompanying third party speaks for them. If they do speak, they are inconsistent in the information they provide, including basic facts such as the address where they live
- They appear under the control/influence of others, rarely interact or appear unfamiliar with their neighbourhood or where they work. Many victims will not be able to speak English
- Fear of authorities
- Perceives themselves to be in debt to someone else or in a situation of dependence.

Environmental indicators

- Outside the property- there are bars covering the windows of the property or they are permanently covered on the inside. Curtains are always drawn. Windows have reflective film or coatings applied to them. The entrance to the property has CCTV cameras installed. The letterbox is sealed to prevent use. There are signs the electricity may have been tacked on from neighbouring properties or directly from power lines?
- Inside the property- access to the back rooms of the property is restricted or doors are locked. The property is overcrowded and in poor repair.

Discriminatory abuse

This includes discrimination on the grounds of race, faith or religion, age, disability, gender, sexual orientation and political views, along with racist, sexist, homophobic or

ageist comments or jokes, or comments and jokes based on a person's disability or any other form of harassment, slur or similar treatment. Hate crime can be viewed as a form of discriminatory abuse, although will often involve other types of abuse as well. It also includes not responding to dietary needs and not providing appropriate spiritual support. Excluding a person from activities on the basis they are 'not liked' is also discriminatory abuse.

The government has recently published a four year plan for tackling hate crime – “Action Against Hate”. The plan is available via: www.gov.uk/government/publications

Possible Indicators

- Indicators for discriminatory abuse may not always be obvious and may also be linked to acts of physical abuse and assault, sexual abuse and assault, financial abuse, neglect, psychological abuse and harassment, so all the indicators listed above may apply to discriminatory abuse.
- May reject their own cultural background and/or racial origin or other personal beliefs, sexual practices or lifestyle choices
- Making complaints about the service not meeting their needs.

Organisational abuse

Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, or where care is provided within their 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 within an organisation.

Organisational abuse is the mistreatment, abuse or neglect of person by a regime or individuals in a setting or service where the person lives or that they use. Such abuse violates the person's dignity and represents a lack of respect for their human rights.

Organisational abuse occurs when the routines, systems and regimes of an institution result in poor or inadequate standards of care and poor practice which affect the whole setting and deny, restrict or curtail the dignity, privacy, choice, independence or fulfilment of the individuals.

Organisational abuse can occur in any setting providing health or social care. A number of inquiries into care in residential settings have highlighted that organisational abuse is most likely to occur when staff:

- receive little support from management;
- are inadequately trained;
- are poorly supervised and poorly supported in their work;
- receive inadequate guidance;

or where there is:

- Unnecessary or inappropriate rules and regulations;

- Lack of stimulation or the development of individual interests;
- Inappropriate staff behaviour, such as the development of factions, misuse of drugs or alcohol, failure to respond to leadership;
- Restriction of external contacts or opportunities to socialise.

Neglect and acts of omission

These include ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, social care or educational services, and the withholding of the necessities of life such as medication, adequate nutrition and heating. Neglect also includes a failure to intervene in situations that are dangerous to the person concerned or to others, particularly when the person lacks the mental capacity to assess risk for themselves.

Neglect and poor professional practice may take the form of isolated incidents or pervasive ill treatment and gross misconduct. Neglect of this type may happen within a person's own home or in an institution. Repeated instances of poor care may be an indication of more serious problems. Neglect can be intentional or unintentional.

Possible indicators

- Inadequate heating and/or lighting;
- Physical condition/appearance is poor (e.g. ulcers, pressure sores, soiled or wet clothing);
- Malnourished, has sudden or continuous weight loss and/or is dehydrated;
- Cannot access appropriate medication or medical care;
- Not afforded appropriate privacy or dignity;
- Has inconsistent or reluctant contact with health and social services;
- Callers/visitors are refused access to the person;
- Person is exposed to unacceptable risk.

Self-neglect

Self-neglect covers a wide range of behaviour, neglecting to care for one's personal hygiene, health or surroundings including behaviour such as hoarding. Self-neglect it is also defined as the inability (intentional or non-intentional) to maintain a socially and culturally accepted standard of self-care with the potential for serious consequences to the health and well-being of the individual and sometimes to their community.

Possible indicators

- living in very unclean, sometimes verminous, circumstances;
- poor self-care leading to a decline in personal hygiene;

- poor nutrition;
- poor healing/sores;
- poorly maintained clothing;
- long toenails;
- isolation;
- failure to take medication;
- hoarding large numbers of pets;
- neglecting household maintenance;
- portraying eccentric behaviour/lifestyles;

NOTE: Poor environments and personal hygiene may be a matter of personal or lifestyle choice or other issues such as insufficient income.

Where does abuse take place?

Abuse can take place anywhere. For example:

- the person's own home, whether living alone, with relatives or others;
- day or residential centres;
- supported housing;
- work settings;
- educational establishments;
- care homes;
- clinics hospitals;
- prisons;
- other places in the community.

Who might abuse?

Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the child or adult with care and support needs. A wide range of people may harm others. These include:

- a spouse/partner;
- an adult with care and support needs;

- other family members;
- neighbours;
- friends;
- local residents;
- people who deliberately exploit adults they perceive as vulnerable to abuse;
- paid staff or professionals: and
- volunteers and strangers.

Appendix 5: Surrey Adults and Children’s Board Representation.

Surrey Safeguarding Adult’s Board	
SSAB Membership Voluntary sector / User led organisations	Action for Carers (Surrey) Age UK, Surrey Surrey Coalition of Disabled People Surrey 50+
Emergency Services	Ambulance Services Surrey Police Surrey Fire and Rescue Service
Housing	Anchor Trust - Housing
Hospital / Acute Trusts	Ashford & St Peters NHS Foundation Trust Frimley Park Hospital NHS Foundation Trust Royal Surrey County Hospital NHS Foundation Trust St Helier & Epsom University Hospitals NHS Trust Surrey & Sussex Healthcare NHS Trust
Community Health providers	Central Surrey Health First Community Health & Care FirstPointCIC Virgin Care Surrey and Borders Partnership NHS Foundation Trust
Regulators, regional and representative organisations	Care Quality Commission NHS England Surrey Care Association
District and Borough Councils	Guildford Spelthorne Tandridge Mole Valley
Surrey County Council	Director of Adult Social Services, Interim Assistant Director for Service Delivery, ASC Business Intelligence Manager, ASC Area Directors, Interim Head of Safeguarding and Quality Assurance, legal services, Trading Standards, Domestic Abuse service.
Clinical Commissioning Groups	Surrey Downs CCG – hosting adult safeguarding in Surrey East Surrey, North West and Surrey Heath CCGs attend in their capacity as chairs of Local Safeguarding Adults Groups
Probation Service	Kent Surrey & Sussex Community Rehabilitation Company Ltd (formerly Probation) National Probation Service
Chairs of Local Safeguarding Adults Groups	
Associate Cabinet Member with lead for adult safeguarding at Surrey County Council	
Surrey Safeguarding Children’s Board Partnership Support Manager	

Surrey Safeguarding Children's Board
Surrey County Council: <ul style="list-style-type: none"> • Children's Services • Schools and Learning • Youth Support Services (YSS) • Early Years and Childcare Service • Public Health
Health: <ul style="list-style-type: none"> • Acute Hospitals • Clinical Commissioning Groups (CCGs) • Community Providers • Mental Health and Learning Disabilities
Districts and Boroughs <ul style="list-style-type: none"> • Chief Executive Tandridge District Council
Surrey Police
Early Years Independent Sector
Voluntary Sector
Faith Sector
National Probation Service (NPS)
Rehabilitation Company (KSSCRC)
Children and Family Court Advisory Support Service (CAFCASS)
HM Forces
Independent Schools
Private Organisations
Lay Members

Appendix 6: MS1 – Notification of Potential Victim of Modern Slavery Form⁸

MS1 - Notification of Potential Victim of Modern Slavery Form

**THIS IS NOT A REFERRAL TO THE NATIONAL REFERRAL MECHANISM (NRM)
– PLEASE VISIT <https://www.gov.uk/government/publications/human-trafficking-victims-referral-and-assessment-forms> FOR THE CORRECT FORMS TO REFER
AN INDIVIDUAL FOR ASSESSMENT AND SUPPORT.**

This form should be completed to notify the Home Office if you have encountered a potential victim of modern slavery but they do not want to be referred into the NRM (to receive support and a decision about their case). This form allows the potential victim to remain anonymous (unless they consent to being identified in Part C).

The police, local authorities, the National Crime Agency and the Gangmasters Licensing Authority have a duty to notify the Home Office under the Modern Slavery Act 2015. Information marked with an asterisk (*) must be provided. Other organisations can complete this form on a voluntary basis.

This form should not be relied upon to safeguard an individual at risk. Existing safeguarding processes should still be followed in tandem with a notification.

For more information please see the accompanying guidance on gov.uk. If a referral to the NRM has already been made, this form does not need to be completed.

Completed forms should be sent to dutytonotify@homeoffice.gsi.gov.uk.

A. Contact Details for the Person Making the Referral

Name

*Organisation

Unit / Area

Telephone

Email

B. Anonymous Information about the Potential Victim

***What is the victim's gender?**

Male

Female

Undefined / other

***What is the victim's nationality?**

MS1 form published 18 March 2016 version 2.0

⁸ The referral form and guidance can be found at <https://www.gov.uk/government/publications/duty-to-notify-the-home-office-of-potential-victims-of-modern-slavery>

MS1 - Notification of Potential Victim of Modern Slavery Form

***Was the victim under 18 when the slavery or human trafficking first occurred?**

- 18 or over Under 18 Don't know

***Do you think the person is a victim of slavery or human trafficking? (*tick all that apply*)**

- Slavery, Servitude and Forced or Compulsory Labour
 Human Trafficking

***In which country or territory do you think the slavery or human trafficking occurred?**

If in the UK, which police force area do you think the offence occurred in?

Please select

***Which police force area was the victim identified in?**

Please select

***Have you referred this case to the police? (*If you represent the police tick yes*)**

- Yes No

***If yes, which police force did you refer it to? (*this should be the same as the force area where the offence occurred, if known*)**

Please select

***If not referred to the police, why not?**

Do you think that the slavery or human trafficking (*tick all that apply*):

- *occurred wholly or partly within residential premises (i.e. involved domestic servitude)
 *involved slavery, servitude and forced or compulsory labour
 *involved sexual exploitation
 *involved the removal of organs or human tissue
 *involved the commission of an offence by the victim
 unknown
 other (*please state*)

MS1 form published 18 March 2016 version 2.0

MS1 - Notification of Potential Victim of Modern Slavery Form

C. Additional Information about the Potential Victim

You should only complete this part if you have the consent of the potential victim to do so. If they are under 18 you do not need their consent. **Where the potential victim is an adult and does not consent, ALL of Part C should be left blank.**

Is the potential victim a minor?

Yes

No

I have explained the Duty to Notify to the potential victim and explained that all of the information on this form will be submitted to the Home Office, the National Crime Agency and the police to assist in the detection and prevention of modern slavery offences. I confirm that on this basis, the potential victim has consented to provide the information in Part C and to being identified on this form.

Signature:

Is the potential victim also willing to be contacted by the police?

Yes

No

Potential Victim's First Name

Potential Victim's Surname

Potential Victim's Alias

Potential Victim's Date of Birth

A safe phone number and address for communications should ONLY be provided if the potential victim is willing to engage with the police.

Safe Phone Number

Safe Address for Communications (can be via legal representative)

The names of persons who may have perpetrated the suspected slavery or human trafficking of the victim (if you do not know, leave blank)

The names of persons who may also have been victims of slavery or human trafficking by the same perpetrators (if you do not know, leave blank)

MS1 form published 18 March 2016 version 2.0

MS1 - Notification of Potential Victim of Modern Slavery Form

D. Other Additional Information

Other Relevant Information (free text) – N.B. This should not allow the potential victim to be identified, unless they agreed to be identified in Part C.

MS1 form published 18 March 2016 version 2.0

Appendix 7: National Referral Mechanism Form for Potential Child Victims of Modern Slavery (England and Wales)⁹

To note: this form is for all child cases identified across England and Wales. For Scotland or Northern Ireland cases please use the relevant form.

For referral of potential adult victims please refer to the specific adult guidance and form.

Modern slavery, including child trafficking, is child abuse. When an agency comes into contact with a child who may have been exploited or trafficked, Local Authority Children's Services and the Police should be notified immediately. A referral into the NRM does not replace or supersede established child protection processes, which should continue in tandem.

All children, irrespective of their immigration status, are entitled to safeguarding and protection under the law. Referrals to the NRM should be for all potential victims of trafficking and modern slavery, who can be of any nationality, and may include British national children, such as those trafficked for child sexual exploitation or those trafficked as drug carriers internally into the UK.

Where there is reason to believe a victim could be a child, the individual must be given the benefit of the doubt and treated as a child under an assessment is carried out.

This form should be completed with reference to the linked guidance available on gov.uk

⁹ The referral form and guidance can be found at: <https://www.gov.uk/government/publications/human-trafficking-victims-referral-and-assessment-forms>

How to complete the form

Throughout the form, items marked with an asterisk (*) should be supported by documentary evidence where possible. This form should be completed with reference to the linked guidance available on gov.uk.

Where to send the form

The Home Office is currently piloting changes to the NRM system. Completed forms should therefore be sent to the following teams depending on the location the victim was identified:

- In West Yorkshire police force area and the South West (Avon and Somerset, Devon and Cornwall, Dorset, Gloucestershire and Wiltshire police force areas) a local Slavery and Safeguarding Lead'
- In the rest of England and Wales to NVA Modern Slavery and Human Trafficking Unit via email to nrm@nca.x.gsi.gov.uk or by fax to 0870 496 5534.

If you are unsure which police force area the individual was identified in, please check <https://www.police.uk/>.

Duty to notify

From 1 November 2015, specified public authorities are required to notify the Home Office about any potential victims of modern slavery they encounter in England and Wales. Completing this NRM form is sufficient to satisfy this duty to notify as long as all of the section marked with a † are completed. However, if the potential victim does not want to be referred to the NRM, then an MS1 form should be completed and sent to dutytonotify@homeoffice.gsi.gov.uk. The MS1 form can be anonymous. The MS1 form and associated guidance is available at:

www.gov.uk/government/publications/duty-to-notify-the-home-office-of-potential-victims-of-modern-slavery.

NRM forms should **not** be sent to the dutytonotify@homeoffice.gsi.gov.uk address.

Section A: child's details

†Last name: †First name(s):

†Also known as: Sex:

†Date of birth: known / claimed *(delete as appropriate)*

Age *(approximate if not known)*: known / claimed *(delete as appropriate)*

Place of birth:
.....

†Nationality:
.....

Immigration status *(where known)*:.....

Language(s) spoken:
.....

Any English spoken / interpreter needed *(delete as appropriate)*

Home Office reference *(where known)*:
.....

UK visa reference *(where known)*:
.....

Any other reference numbers:.....

UK home address:
.....
.....

UK Port of entry *(where known)*..... known / claimed *(delete as appropriate)*

Method of entry to UK *(where known)*
.....

Carrier *(where known)*:
.....

..

Section B: contact details of person making referral

Name:

Job title:

†Organisation:

Unit or area:

Tel: Fax:

Mobile: Email:

Signature..... Date:/...../.....

Section C: General details of the encounter

Date encountered (if relevant) or date of first agency contact:

Address encountered or place of first contact with your agency (if different from above):

.....
.....

Date of referral to local authority:/...../.....

Local authority area

Local authority / social worker contact details:

.....

†Responsible police force area for this location:

.....

†Have you reported the case to the police:

- †yes
- †no
- NRM referral is being made by the police

†If yes, was the case reported to the police in England, Wales, Scotland or Northern Ireland?

.....

†If reported to the police in England or Wales, which police force was the case

reported to?

.....

Crime reference numbers relating to this incident of modern slavery (where available):

.....

If you have not referred the case to the police, what was the reason for this?

.....

Section D: General information about the suspected modern slavery

†Suspected victim of (tick any that apply):

- †human trafficking
- †Slavery, servitude, forced or compulsory labour

†The country or territory where the modern slavery is believed to have occurred

.....

†Suspected form of exploitation or forced service:

- †domestic servitude (i.e. occurred wholly or partly within residential premises)
- †forced or compulsory labour
- †provision of sexual services or the commission of sexual offences by the victim
- †criminal services (i.e. involved the commission of an offence by the victim)
- †removal of organs
- unknown
- other (*please state*).....

Section E: potential indicators of children who may have been victim of modern slavery (Y = Yes, S = Suspicion)

Child development			Parenting Capacity			Family/environment		
Exploitation	Y	S	Exploitation	Y	S	Exploitation	Y	S
Claims to have been exploited through sexual exploitation, criminality, labour exploitation or domestic servitude by another person			Required to earn a minimum amount of money every day			Located / recovered from a place of exploitation (for example brothel, cannabis farm, involved in criminality)		
Physical symptoms of exploitative abuse (For example sexual or physical)			Involved in criminality highlighting involvement of adults (for example recovered from cannabis farm / factory, street crime, petty theft, pick pocketing, begging)			Deprived of earnings by another person		
Underage marriage			Performs excessive housework chores and rarely leaves the residence			Claims to be in debt bondage or "owes" money to other persons (for example for travel costs, before having control over own earnings)		
Physical indications of working (For example overly tired in school, indications of manual labour – condition of hands/skin, backaches)			Reports from reliable sources suggest likelihood of sexual exploitation, including being seen in places known to be used for sexual exploitation			Receives unexplained / unidentified phone calls whilst in placement / temporary accommodation		
Sexually transmitted infection or unwanted pregnancy			Unusual hours / regular patterns of child leaving or returning to placement which indicates probable working			No passport or other means of identity		
Story very similar to those given by others, perhaps hinting they have been coached			Accompanied by an adult who may not be the legal guardian and insists on remaining with the child at all times			Unable or reluctant to give accommodation or other personal details		
Significantly older partner			Limited freedom of movement			False documentation or genuine documentation that has been altered or fraudulently obtained; or the child claims that their details (name, date of birth) on the documentation are incorrect		
Harbours excessive fears / anxieties (for instance about an individual, of deportation, disclosing information)			Movement into, within or out of the UK			Movement into, within or out of the UK		
Movement into, within or out of the UK			Gone missing from local authority care			Entered country illegally		
Returning after missing, looking well cared for despite no known base			Unable to confirm name or address of person meeting them on arrival			Journey or visa arranged by someone other than themselves or their family		
Claims to have been in the UK for years but hasn't learnt local language or culture			Accompanying adult previously made multiple visa applications for other children / acted as the guarantor for other children's visa applications			Registered at multiple addresses		
Other risk factors			Accompanying adult known to have acted as guarantor on visa applications for other visitors who have not returned to their countries of origin on visa expiry			Other risk factors		
Withdrawn and refuses to talk / appears afraid to talk to a person in authority			History with missing links or unexplained moves			Possible inappropriate use of the internet and forming online relationships, particularly with adults		

Shows signs of physical neglect – basic care, malnourishment, lack of attention to health needs			Pattern of street homelessness			Accounts of social activities with no plausible explanation of the source of necessary funding		
Shows signs of emotional neglect			Other risk factors			Entering or leaving vehicles driven by unknown adults		
Socially isolated – lack of positive, meaningful relationships in child's life			Unregistered private fostering arrangement			Adults loitering outside the child's usual place of residence		
Behavioural - poor concentration or memory, irritable unsociable / aggressive behaviour			Cared for by adult/s who are not their parents and quality of relationship is not good			Leaving home / care setting in clothing unusual for the individual child (for example inappropriate for age, borrowing clothing from older people)		
Psychological – indications of trauma or numbing			Placement breakdown			Works in various locations		
Exhibits self-assurance, maturity and self-confidence not expected in a child of such age			Persistently missing, staying out overnight or returning late with no plausible explanation			One among a number of unrelated children found at one address		
Evidence of drug, alcohol or substance misuse			Truancy / disengagement with education			Having keys to premises other than those known about		
Low self-image, low self-esteem, self-harming behaviour including cutting, overdosing, eating disorder, promiscuity			Appropriate adult is not an immediate family member (parent / sibling)			Going missing and being found in areas where they have no known links		
Sexually active			Appropriate adult cannot provide photographic identification for the child					
Not registered with or attended a GP practice								
Not enrolled in school								
Has money, expensive clothes, mobile phones or other possessions without plausible explanation								

Section F: evidence to support reasons for referral (2 pages available)

Please use this section to:

1. Expand on the circumstances and details of the encounter or contact
2. provide supporting evidence for the indicators that you have identified in the matrix (please number the indicator you are referring to)
3. Provide details of any other indicators you feel are relevant but are not listed.
4. Provide any other relevant information that you consider may be important and wish to include for example details of behaviour, abuse and neglect
5. Provide details of any movements into, within or out of the UK, including dates (if known)
6. Provide name of any adults, exploiters or traffickers (if known)
7. Provide details of any linked victims (if known)
8. Provide suspected place of exploitation (if known)
9. Provide details of suspected form of exploitation (whether this had taken place or was yet to take place)
10. Detail any action you have taken including referral to other agencies such as police, local authorities.
11. Provide reasons why you think individual is a child
12. Details of any adults or other children the individual was encountered with, or whether the child was unaccompanied.

(if a separate sheet is required, please indicate that section D is continued and provide with referral)

Section D: evidence to support reasons for referral (continued) if required

Appendix 8: National Referral Mechanism Form for Potential Adult Victims of Modern Slavery England and Wales.¹⁰

National Referral Mechanism form for potential adult victims of modern slavery

Adults cannot enter the NRM unless they have signed this form.

To note: this form is for all adult cases in England or Wales. For Scotland or Northern Ireland cases please see separate guidance and form.

For referral of potential child victims please refer to the specific child guidance and form.

How to complete the form:

Throughout the form, items marked with an asterisk (*) should be supported by documentary evidence where possible. This form should be completed with reference to the linked guidance available on gov.uk

Where to send the form:

The Home Office is currently piloting changes to the NRM system. Completed forms should therefore be sent to the following teams depending on the location the victim was identified:

- in West Yorkshire police force area and the South West (Avon and Somerset, Devon and Cornwall, Dorset, Gloucestershire, and Wiltshire police force areas) a local Slavery and Safeguarding Lead;
- In the rest of England and Wales to NCA Modern Slavery and Human Trafficking Unit via email to nrm@nca.x.gsi.gov.uk or by fax to 0870 496 5534.

If you are unsure which police force area the individual was identified in, please check <https://www.police.uk/>.

Duty to notify

From 1 November 2015, specified public authorities are required to notify the Home Office about any potential victims of modern slavery they encounter in England and Wales. Completing this NRM form is sufficient to satisfy this duty to notify as long as all of the sections marked with a † are completed. However, if the potential victim does not want to be referred to the NRM, then an MS1 form should be completed and sent to dutytonotify@homeoffice.gsi.gov.uk. The MS1 form can be anonymous. The MS1 form and associated guidance is available at www.gov.uk/government/publications/duty-to-notify-the-home-office-of-potential-victims-of-modern-slavery. NRM forms should not be sent to the dutytonotify@homeoffice.gsi.gov.uk address.

¹⁰ The referral form and guidance can be found at <https://www.gov.uk/government/publications/human-trafficking-victims-referral-and-assessment-forms>

Section A: Nature of referral *(Indicate the nature of the referral and whether support is required and has been requested, to ensure the case is dealt with efficiently.)*

- Full NRM referral no support (adults must sign the form prior to referral)
- Full NRM referral with support (support is optional; adults must sign both consent sections to receive support).
- Individual has been referred to The Salvation Army by First Responder / Slavery Safeguarding Lead (having signed relevant parts of the form).

Section B: Consent of potential victim

(The potential victim should have the NRM referral clearly explained to them and sign the form to indicate their consent here. If they do not consent, the form cannot be accepted into the NRM and a duty to notify form (MS1) should be completed. You should also highlight that as they are a victim of crime the form will be shared with the police, either by the SSL / First responder or once referred to the Competent Authority. This does not mean the individual is required to cooperate with the police.)

Consent to the referral (mandatory)

I consent to my details including name and date of birth being submitted to the Competent Authorities (UK Visas and Immigration/ Immigration Enforcement/NCA Modern Slavery and Human Trafficking Unit /Multi Disciplinary Panel) and the Home Office, who where appropriate might contact other relevant agencies to assist in the identification and decision making process.

The police will also be provided with a copy of the NRM form – to assist in the detection and prevention of modern slavery offences. The police will record the incident in line with Home Office Counting Rules and consider further action, but may not pursue a case unless the individual engages with them directly.

Signed:.....Date:/...../.....

Request for support (optional)

(Support through the NRM is optional. If a potential victim wishes to receive support they need to sign the following declaration. You should explain that this can include advice, accommodation, protection and independent emotional and practical help delivered by specialist charities.)

I consent that my details, including name, date of birth and contact details, may be passed on to support providers The Salvation Army, and their subcontractors, for the purpose of assessing my support needs.

Signed:Date:/...../.....

Indication of willingness to engage with police (optional) *(Referral to the NRM and access to NRM support is not dependent on engaging with the police. However, if a victim is willing to engage with the police the police will engage with them to keep them informed of any action taken in relation to their modern slavery experience. Information will still be shared with the police where an individual will not engage – see above.)*

I am willing to be contacted by the police in relation to my modern slavery experiences, and would like to be kept up to date on action taken.

Signed:Date:/...../.....

Section C: Potential victim personal details

*†Last name: *†First name(s):

†Also known as:

*†D.O.B:/...../..... Age: Sex:

*†Nationality:.....

Language(s) spoken:

Any English spoken: Y or N Interpreter needed: Y or N

Immigration status (where known):

Other communication aids required (for example sign language): Y or N Details:

.....

Home Office (immigration) reference where known:.....

UK visa or work permit reference:.....

Any other reference numbers (e.g. National insurance number, or your organisation's reference number):

.....

Safe telephone number on which to contact the potential victim, such as a personal mobile number:.....

Other safe means of contacting the potential victim, such as via legal representative.

.....

UK current address.....

.....

Can address be used for correspondence relating to victim identification and support?
Y / N

If not, please provide an alternative safe address for postal communications if available.

.....

.....

Section D: Contact details of person making referral

Name:

Job title:

†Organisation: Unit or area.....

Tel: Mobile:

Email:

Signature: Date:/...../.....

Section E: General details of the encounter

Date of encounter:/...../.....

Location of encounter (provide address if different from above):

.....
.....

†Responsible police force area for this location:

.....

†Have you reported the case to the police:

- yes
- no
- NRM referral is being made by the police

†If yes, was the case reported to the police in England, Wales, Scotland or Northern Ireland?

.....

†If reported to the police in England or Wales, which police force was the case reported to?

.....

Crime reference numbers relating to this incident of modern slavery (where available):

.....

If you have not referred the case to the police, what was the reason for this?

.....

General information about the suspected modern slavery

†Suspected victim of (tick any that apply):

- †human trafficking
- †Slavery, servitude, forced or compulsory labour

†Age at the time the slavery or human trafficking is believed to have first occurred:

- †Under 18
- †18 or over

†The country or territory where the modern slavery is believed to have occurred

.....

†Suspected form of exploitation or forced service:

- †domestic servitude (i.e. occurred wholly or partly within residential premises)
- †forced or compulsory labour
- †provision of sexual services or the commission of sexual offences by the victim
- †criminal services (i.e. involved the commission of an offence by the victim)
- †removal of organs
- unknown
- other (please state).....

Section F: general indicators for modern slavery (mark all that apply and add any not listed under 'other' – this is not an exhaustive list. Record further details of how indicators presented in Section J)

Please tick all relevant boxes

1. Distrustful of authorities
2. Expression of fear or anxiety
3. Signs of psychological trauma (including post-traumatic stress disorder)
4. The person acts as if instructed by another
5. Injuries apparently a result of assault or controlling measures
6. Evidence of control over movement, either as an individual or as a group
7. Found in or connected to a type of location likely to be used for exploitation
8. Restriction of movement and confinement to the workplace or to a limited area
9. Passport or documents held by someone else
10. Lack of access to medical care
11. Limited social contact / isolation
12. Limited contact with family
13. Signs of ritual abuse and witchcraft (juju)
14. Substance misuse
15. Person forced, intimidated or coerced into providing services
16. Doesn't know home or work address
17. Perception of being bonded by debt
18. Money is deducted from salary for food or accommodation
19. Threat of being handed over to authorities
20. Threats against the individual or their family members
21. Being placed in a dependency situation

- 22. No or limited access to bathroom or hygiene facilities
- 23. Self identifies
- 24. Any other, please provide details in section J

Section G: Indicators of forced or compulsory labour (mark all that apply and add any not listed under 'other' – this is not an exhaustive list. Record further details of how indicators presented in Section J)

Are any of these indicators present? (tick as applicable)

Yes **please tick all relevant boxes in section G**

No **continue to section H**

- 1. No or limited access to earnings or labour contract
- 2. Excessive wage reductions, withholding wages, or financial penalties
- 3. Dependence on employer for a number of services for example work, transport and accommodation
- 4. Any evidence workers are required to pay for tools, food or accommodation via deductions from their pay
- 5. Imposed place of accommodation
- 6. Found in poor living conditions
- 7. Evidence of excessive working days or hours
- 8. Deceived about the nature of the job, location, or employer
- 9. Any other, please provide details in section H
- 10. Employer or manager unable to produce documents required when employing migrant labour
- 11. Employer or manager unable to provide record of wages paid to workers
- 12. Poor or non-existent health and safety equipment or no health and safety notices
- 13. Any other evidence of labour laws being breached

Where indicators are identified record full details in section J

Section H: Indicators of domestic servitude (mark all that apply and add any not listed under 'other' – this is not an exhaustive list. Record further details of how indicators presented in Section J)

Are any of these indicators present? (tick as applicable)

Yes **please tick all relevant boxes in section H**

No **continue to section I**

- 1. Living with and working for a family in a private home or place of accommodation
- 2. Not eating with the rest of the family or being given only leftovers, or inadequate food
- 3. No private sleeping place or sleeping in shared space for example the living room
- 4. No private space
- 5. Forced to work in excess of normal working hours or being 'on-call' 24 hours per day
- 6. Employer reports them as a missing person
- 7. Employer accuses person of theft or other crime related to the escape
- 8. Never leaving the house without permission from the employer
- 9. Any other, please provide details in section J

Where indicators are identified record full details in section J

Section I: Indicators of sexual exploitation (mark all that apply and add any not listed under 'other' – this is not an exhaustive list. Record further details of how indicators presented in Section J)

Are any of these indicators present? (tick as applicable)

Yes **please tick all relevant boxes in section I**

No **continue to section J**

1. Advertises for sexual services offering individuals from particular ethnic or national groups
2. Sleeping on work premises
3. Movement of individuals between brothels or working in alternate locations
4. Individuals with very limited amounts of clothing or a large proportion of their clothing is 'sexual'
5. Only being able to speak sexual words in local language or language of client group
6. Having tattoos or other marks indicating 'ownership' by their exploiters
7. Person forced, intimidated or coerced into providing services of a sexual nature
8. Person subjected to crimes such as abduction, assault or rape
9. Someone other than the potential victim receives the money from clients
10. Health symptoms (including sexual health issues)
11. Any other, please provide details in section H

Where indicators are identified record full details in section J

Section J: evidence to support reasons for referral

Please use this section to:

- Expand on the circumstances or details of your encounter or contact with the potential victim, providing background to how the information was provided (for example on first encounter during police operation). Please set out in as much detail as possible exactly what you think has happened to this person that makes them a potential victim of modern slavery, and why you think the story is credible – for example external supporting evidence, or the behaviour and appearance of an individual.
- provide evidence of the indicators that you have identified in sections F to I
- note whether it is likely that further information will be become available at a later date
- provide any other relevant information that you consider may be important and wish to include for example living or working conditions, behaviour, appearance, demeanour
- movements in or to the UK, including dates (if known)
- suspected place of exploitation (if known)
- †name of agent, exploiter or trafficker (if known)
- †name of other victims (if known)
- record any action you have taken including referral to other agencies (for example The Salvation Army, police, UK Visas and Immigration) where appropriate
- note any immediate concerns regarding the potential victim's health, psychological well-being or safety.

(If a further sheet is required, please indicate that section J is continued and provide with referral form)

Section	Indicator