



Bridging the Gap (Manchester)

Safeguarding Policy & Procedure

Registered Charity Number: 1170952

This policy and guidance will be reviewed annually or if there are any changes in the related legislation or when an incident dictates. This will ensure that this document is current and fit for purpose.

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Reviewed by: Michelle McHale & Lynda Mason

Next review date: 21/06/2025

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1. Policy Statement

Bridging the Gap (BTG) believes that everyone it comes into contact with, regardless of age, gender identity, disability, sexual orientation or ethnic origin has the right to be protected from all forms of harm, abuse, neglect and exploitation.

BTG will not tolerate abuse and exploitation by staff, volunteers or the wider community.

BTG is committed to addressing safeguarding throughout its work, through the three pillars of: -

- prevention
- reporting
- response

Furthermore, BTG follows the six principles of safeguarding as defined by the Care Act 2014,

1. **Empowerment** - people being supported and encouraged to make their own decisions and informed consent
2. **Prevention** - it is better to take action before harm occurs.
3. **Proportionality** - the least intrusive response appropriate to the risk presented.
4. **Protection** - support and representation for those in greatest need.
5. **Partnership** - local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
6. **Accountability** - accountability and transparency in safeguarding practice.

2. Purpose

The purpose of this policy is to protect people, particularly children and vulnerable adults in need of care and support from any harm that may be caused due to incidents in the wider community or due to their coming into contact with BTG. This includes harm arising from: -

- the conduct of BTG staff or volunteers
- the design and implementation of BTG's programmes and activities

This policy lays out the commitments made by BTG and informs staff, volunteers and associated personnel of their responsibilities in relation to safeguarding.

3. Scope

This policy applies to: -

- children and young people - legally defined as any person under the age of 18. From this point the terms child or children will be used to refer to this age group
- an 'adult at risk of abuse or neglect with care and support needs', however, for the purpose of this policy the term vulnerable adult will be used to refer to this group
- all staff contracted by BTG
- associated personnel whilst engaged with work or visits related to BTG, including, but not limited to, the following: consultants, volunteers, contractors, programme visitors including journalists, celebrities and politicians.

This policy outlines: -

- the practice and procedure for representatives within BTG to contribute to the prevention of the abuse and neglect, **and**
- a clear framework for action including information sharing when abuse is suspected.

4. Whose business is Safeguarding?

Legislation establishes that safeguarding is everybody's business. BTG recognises that we all play a key role in preventing, detecting, reporting and responding to abuse, neglect or exploitation.

4.1 What is Safeguarding?

In the UK, safeguarding means protecting peoples' health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect.¹

Safeguarding means taking all reasonable steps to prevent harm, particularly sexual exploitation, abuse and harassment from occurring; to protect people, especially vulnerable adults and children, from that harm; and to respond appropriately when harm does occur.

While at the same time making sure that the adult or child's well-being is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs on any action.

4.2 Definitions

¹ NHS 'What is Safeguarding? Easy Read' 2011

Child Protection is defined as: -

- protecting individual children identified as either suffering, or likely to suffer, significant harm as a result of abuse or neglect or other identified risk factors such as parental Domestic Violence, substance misuse.

Safeguarding & promoting the welfare of children & young people is defined as: -

- protecting children from maltreatment
- preventing impairment of children's' health or development
- ensuring that children are growing up and living in circumstances consistent with the provision of safe and effective care
- enable children to have optimum life chances through the provision of safe and effective care.

Adult Safeguarding is defined as: -

- protecting an adult's right to live in safety, free from abuse and neglect aiming to ensure that each adult is supported to maintain: -
 - Wellbeing
 - Choice and control
 - Safety
 - Good health
 - Dignity and respect

4.3 Types of Abuse

Eleven types of abuse are currently identified through legislation and UK guidance frameworks: -

- **Physical abuse** – Involves any manner of causing physical harm to a child or vulnerable adult or fabricating symptoms of, or inducing illness in, a child or vulnerable adult, including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions, administering or allowing access to drugs or alcohol.
- **Domestic abuse** – including psychological, physical, sexual, financial, emotional abuse, so called 'honour' based violence.
- **Sexual abuse** – Sexual abuse involves forcing or enticing any child or vulnerable adult of whatever age to take part in any form of sexual activity, whether or not s/he is aware of what is happening; or behaving, or inducing a child/ vulnerable adult to behave in sexually inappropriate ways, including rape, indecent exposure, sexual harassment, inappropriate looking and 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. This includes inappropriate sexual relationships with people in positions of power or influence. The victim may have been sexually exploited even if the sexual activity appears consensual. Sexual

exploitation does not always involve physical contact; it can also occur through the use of technology.

- **Psychological abuse** – the persistent emotional ill treatment of a child or vulnerable adult such as to cause severe and enduring effects on a child's emotional development including threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks. It is important to note that within faith communities a further aspect of psychological abuse is spiritual abuse. This is where the abuse does damage to a vulnerable adult or child's emerging faith and spirituality. The fact that the damage includes damage to the spiritual self is what makes it spiritual abuse and usually occurs within the context of wider abuse.
- **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, possessions or benefits.
- **Modern slavery** – encompasses slavery, human trafficking, and forced labour and domestic servitude, where traffickers and slavers coerce, deceive and force individuals into a life of abuse, servitudes and inhumane treatment.
- **Discriminatory abuse** - including forms of harassment, slurs, exclusion, or similar treatment. This includes discrimination on the grounds of a person's protected characteristics including; race, age, disability, gender, sexual orientation, political views, faith or religion (including where someone is discriminated against because they have no religion), as well as racist, sexist, homophobic or ageist comments.
- **Organisational abuse** - Including neglect and poor care practice within an institution or special care setting such as a hospital or care home, or where care is provided within their own home.
- **Neglect and acts of omission** - Neglect involves the persistent failure to meet a child's or vulnerable adult's basic physical and/or psychological needs, likely to result in the serious impairment of the person's health and development – 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, access to family and friends.
- **Self-neglect** - Self-neglect covers a wide range of behaviour, neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

- **Hate crime** – a hate crime is any criminal offence that is motivated by hostility or prejudice based upon the victim’s disability, race, religion or belief, sexual orientation, or transgender identity.

Further information on recognising the signs and symptoms of abuse can be found in **Appendix 3**.

NOTE: Abuse can be carried out by children and BTG recognises that if a child or children is/are causing harm to an adult with care and support needs, this should be dealt with under the Local Authority adult safeguarding policy and procedures, but it will also need to involve the Local Authority Children’s Services.

5. Prevention

Trustee Responsibilities:

- to ensure all staff have access to, are familiar with, and know their responsibilities within this policy
- to design and undertake all its programmes and activities in a way that protects people from any risk of harm that may arise from their coming into contact with BTG. This includes the way in which information about individuals is gathered and communicated
- to implement stringent safeguarding procedures when recruiting, managing and deploying staff and associated personnel
- to ensure staff receive training on safeguarding at a level commensurate with their role in the organisation
- to follow up on reports of safeguarding concerns promptly and according to due process.

Staff and Associated Personnel Responsibilities:

Child safeguarding

Staff and associated personnel must not: -

- engage in sexual activity with anyone under the age of 18
- sexually abuse or exploit children
- subject a child to physical, emotional or psychological abuse, or neglect
- engage in any commercially exploitative activities with children including child labour or trafficking

Adult safeguarding

Staff and associated personnel must not: -

- sexually abuse or exploit at risk adults
- subject an 'at risk' adult to physical, emotional or psychological abuse, or neglect

Protection from sexual exploitation and abuse

Staff and associated personnel must not: -

- exchange money, employment, goods or services for sexual activity. This includes any exchange of assistance that is due to beneficiaries of assistance
- engage in any sexual relationships with beneficiaries of assistance, since they are based on inherently unequal power dynamics

Additionally, staff and associated personnel are obliged to: -

- contribute to creating and maintaining an environment that prevents safeguarding violations and promotes the implementation of BTG's Safeguarding Policy
- report any concerns or suspicions regarding safeguarding violations by a staff member or associated personnel to the appropriate safeguarding lead.

6. Enabling Reports

BTG will ensure that safe, appropriate, accessible means of reporting safeguarding concerns are made available to staff and the communities it works with.

Staff and volunteers are encouraged to take action when suspicious that abuse is occurring at work – no matter what the setting, who the perpetrator is or who the victim is. BTG will respect and not penalise those who stand up for anyone who is suspected of being abused. For further details please **see BTG's Whistle-Blowing Policy**. Staff who report abuse are protected by the Public Interest Disclosure Act 1998.

BTG will also accept complaints from external sources such as members of the public, partners and official bodies.

6.1 How to Report a Concern

Staff members and associated personnel who have a complaint or concern relating to safeguarding should report it immediately to the designated Safeguarding Officer [as appropriate] or, if they are not available, to the Project Manager (see section 13 below). If the subject of concern is a member of staff, volunteer, trustee or, indeed, the Safeguarding Officer, **see BTG's 'Whistleblowing Policy'**. This policy should be used when a member of staff or volunteer has concerns about the conduct of a

colleague in a position of trust within the organisation, which could be detrimental to the safety or wellbeing of adults and children.

Things to remember: -

- All allegations/disclosures will be treated seriously - the safety of the vulnerable adult or child is paramount
- Staff and volunteers should stay calm, listen and reassure the person they are concerned about that they are being listened to
- Staff and volunteers should always demonstrate a sensitive approach
- Staff and volunteers should be aware of the possibility of a police investigation, and are **not to investigate** any allegation themselves
- Staff and volunteers will explain that they are required to share information with those people who need to know but not with other staff or volunteers. **Absolute confidentiality cannot be promised.**
- If there is immediate danger, or someone requires urgent medical attention, then the police or ambulance should be called immediately, and the Safeguarding Officer informed as soon as possible.

6.2 Reporting Procedure

1. Any concerns should be reported immediately to the designated Safeguarding Officer, their deputy or, in their absence, the Session Lead who will decide the correct action to take. This may include seeking advice and guidance from the Thirtyone:eight safeguarding helpline (see Appendix 1) who can advise on the appropriate next steps including whether to refer to any statutory services.
2. A 'Safeguarding Concern Report' form must be completed by the Safeguarding Officer in charge using information given by the person reporting the concern.

Information recorded on the form must: -

- a) Be accurate
- b) Wherever possible include the actual words said by the child or vulnerable adult rather than an interpretation of what was said
- c) Specific facts relating to the named people, dates, places etc. should be recorded accurately along with any details of the injuries or consequences i.e. where they are and what they looked like

- d) Information may also need to be reported under BTG's 'Health and Safety Policy and Procedures'.
3. Where necessary the Safeguarding Officer will report the concern to Statutory Childrens'/Adults' Social Care Services, providing a copy of BTG's 'Safeguarding Concern' form, and, where appropriate, a chronology of events.
 4. If a criminal offence has been committed the Project Manager or BTG's Safeguarding Officer will call the police and any other linked agencies as necessary.
 5. The Local Authority Children's or Adults' Services may then take the lead on any investigation and inform other agencies, where appropriate.
 6. The Safeguarding Officer will provide any further information to Statutory Services, as required.
 7. Completed 'Safeguarding Concern' forms will be stored within BTG's Google drive with restricted access.in line with this policy and Data Protection Policy.
 8. Where incidents that have resulted in (or risks) significant harm to clients that access BTG's services, the Board of Trustees may be required to report the incident to the Charity Commission as a 'Serious Incident Report' (cf. Sec 11).

BTG will follow-up all safeguarding reports and concerns according to policy and procedure, legal and statutory obligations, including contact with Greater Manchester Police.

BTG will apply appropriate disciplinary measures to staff found in breach of this. policy.

In addition, BTG will offer signposting support to survivors of harm caused by staff or associated personnel. Decisions regarding support will be led by the survivor.

7. Information Sharing and Consent

Sharing the right information, at the right time, with the right people, is fundamental to good practice in safeguarding.

BTG will share safeguarding information with the right people at the right time to: -

- prevent death or serious harm
- co-ordinate effective and efficient responses
- enable early interventions to prevent the escalation of risk
- maintain and improve good practice in safeguarding
- reveal patterns of abuse that were previously undetected and that could identify others at risk of abuse

- identify low-level concerns that may reveal children or vulnerable adults at risk of abuse
- help families, children and vulnerable adults access the right kind of support to reduce risk and promote wellbeing
- help identify people who may pose a risk to others and, where possible, work to reduce offending behaviour
- reduce organisational risk and protect reputation.

All information and concerns should be raised with the Safeguarding Officer, their deputy, or if they are not available the session lead who will then make the decision as to whether to share information with another agency including thirtyone:eight, social care or the police.

In the case of severe concerns where delay in contacting the Safeguarding Officer could result in further harm the worker/volunteer should contact the relevant statutory authorities immediately and inform the Safeguarding Officer as soon as possible afterwards.

Ideally information should only be shared with other agencies including the police and social care if the consent of the person concerned (or their parents/carer where appropriate) has been granted. Obtaining informed consent to share information is best practice and is often key to ensuring any further support or action is successfully maintained, based on trust and transparency. There are however exceptions to this.

Exceptions to not obtaining consent include: -

- where obtaining consent would put the child, vulnerable adult, or BTG's volunteers/staff at further risk of significant harm.
- where a vulnerable adult is assessed as not having the 'mental capacity' to make this decision, in this case appropriate representatives/advocates should be consulted, however the final decision will be made by the BTG Safeguarding Officer.
- where a crime has taken place and there is an overriding public duty for the police to investigate.
- where other adults at risk and/or children may be at risk of harm from the person/group/agency suspected of causing abuse.

To share information without consent or not?

In making the decision whether to share information without consent consideration will therefore be given to: -

- the seriousness and pervasiveness of the abuse
- the ability of the individual to make decisions

- the effect of the abuse on the individual in question and on others
- whether a criminal offense has occurred
- whether there is a need for others to know (e.g. to protect others who may not be involved in the immediate situation).

If the decision is made not to share information because consent has been withheld and the exceptions given above do not apply then the person will be advised of any actions they can take or other support they can access. They will also be made aware of the fact that they can change their minds at any point.

Decisions about sharing information (or not) will be clearly recorded on the 'Safeguarding Incident' form, with reasons stated.

8. Confidentiality and Recording

Every effort should be made to ensure that confidentiality is maintained for all concerned both when an allegation is made and whilst it is being investigated. Confidentiality can only be broken and a concern shared when it is in the best interest of the child, vulnerable adult or in the public interest to do so. The circumstances for this are outlined in section 7 above.

All records will be written, stored and destroyed with due regard for confidentiality and in line with **BTG's Data Retention and Destruction Policy** and in adherence with Data Protection legislation. Staff and volunteers will be trained and supported to maintain and store accurate records.

9. Monitoring

Information about safeguarding cases and how they were dealt will be reviewed and reported on regularly to the Board of Trustees.

Areas to focus on include: -

- how quickly the concern was reported to the Safeguarding Lead
- whether a concern was reported to statutory agencies
- how quickly a concern was made to the police/Childrens'/Adults' Services (where relevant)
- accuracy of information recorded
- the quality of the input into the safeguarding process (feedback from police/Childrens'/Adults' Services)
- outcomes of safeguarding process
- whether any incidents highlighted training issues or a need to amend in-house procedures
- whether the incident should be notified to the Charity Commission under Serious Incident Reporting procedures

Reports to Trustees should focus on the issues and BTG's response to an incident **not** the specific details of an individual case. Reports made to the Trustees should be

captured in a 'Safeguarding Incident Register'. This is to enable the organisation to reflect on and improve its practice in developing an effective safeguarding culture.

10. Good Practice

10.1 Recruitment of staff and volunteers

1. all staff and volunteers responsible for supervising vulnerable adults or children will undergo an enhanced criminal records check if their role falls within the eligibility guidelines.
2. all references will be taken up before the start of volunteering or employment, and should be provided in writing or transcribed where received verbally. BTG) will make all reasonable efforts to ensure that references are bona-fide and will seek alternatives where in doubt.
3. all staff and volunteers have a duty to disclose any unspent convictions. Failing to do so may be regarded as gross misconduct or a breach of the volunteering agreement.
4. staff and volunteers without a criminal records check will not be permitted unsupervised access to vulnerable adults or children.
5. criminal records checks (DBS) will be renewed every three years.

10.2 Training

1. all staff and volunteers will familiarise themselves with all BTG's policies and procedures, including safeguarding, during induction.
2. all staff and volunteers will complete basic safeguarding training and other relevant training, as required.

All Trustees, volunteers and staff will be made aware of: -

- the possibilities of abuse and neglect of children and vulnerable adults
- local procedures and know the names and contact details of relevant local and national professionals and organisations.

In addition, all staff and volunteers, including Trustees will be required to undertake refresher safeguarding training at least bi-annually (every two years).

11. Management and Supervision

Unless expressly delegated to Project Managers or the Safeguarding Officer, Trustees are responsible for clarifying with staff and volunteers their roles and responsibilities

regarding the safeguarding of children and vulnerable adults. Supervision of staff and volunteers will monitor working practices and offer the opportunity to raise any concerns.

12. Safeguarding Personnel

NAME	ROLE	CONTACT DETAILS
Michelle McHale	Charity Safeguarding Lead (Chair of Trustees')	Mobile: 07598 634476 michellemchale@manchestersouthcentral.foodbank.org.uk
Heidi Exell	Deputy Safeguarding Officer (Project Manager - Foodbank)	0161 226 3413 / 07561 680009 projectmanager@manchestersouthcentral.foodbank.org.uk
Helena Canavan	Deputy Safeguarding Officer (Project Manager - More Than)	0161 226 3413 / 07933 611062 helena@manchestersouthcentral.foodbank.org.uk
Emily Jeremy	Safeguarding Session Lead	0161 226 3413 / 07591 512590 volunteers@manchestersouthcentral.foodbank.org.uk

NOTE: Designated Safeguarding Leads must never be related to each other.
Designated Safeguarding Leads must hold a personal copy of this policy.

For completion each time the policy is reviewed / edited:

Charity Safeguarding Lead	Michelle McHale
Monitoring of the procedures	Designated Safeguarding Officer & Chair of Board of Trustees
Reporting To	Trustee Board
Next Review Date	20 June 2025

This policy was approved by the Trustees:

Name: Michelle McHale	Signed: 
Position: Chair of Trustees	Date: 20 June 2024

Appendix 1

Key Contacts

If someone is injured or in imminent danger, call 999.

Bridging The Gap (Manchester)

- Safeguarding Officer – Michelle McHale - 07598634476 /07842093922
- Project Manager – 0161 226 3413

Manchester Local Authority

- Manchester Contact Centre (children/Adults) (24hrs) – 0161 234 5001

Trafford Local Authority

- Trafford Children's First response - 0161 612 5125 (office hrs) 0161 912 2020 (Duty)
- Trafford Initial Assessment Team (Adults) - 0161 912 2820 (office hrs) 0161 912 2020 (Duty)

Thirtyone:eight Advice line – [Thirtyone:eight web page](#) Tel. 0303 003 11 11

Other National Advice Providers

- The Action Elder Abuse Confidential free-phone helpline - 0808 808 8141 - 9am-5pm
- NSPCC Child Protection Helpline - 0808 800 5000
- ChildLine - 0800 1111
- NSPCC 24/7 Helpline - 0808 800 500 or help@nspcc.org

If you think a crime has taken place contact:

- Greater Manchester Police - 0161 872 5050
- Anti-Terrorist Hotline - 0800 789 321

Care Quality Commission

Helpline Tel: 03000 616161

The Regulation and Quality Improvement Authority

Helpline Tel: 028 9536 1990

England and Wales - Disclosure and Barring Service

PO Box 181, Darlington, DL1 9FA

03000 200 190

customerservices@dbs.gov.uk

<https://www.gov.uk/find-out-dbs-check>

Appendix 2

Key legislation in England

Legal Framework Children and Young People:

- Children Acts 1989 and 2004
- Children and Young Persons Act 2008
- Safeguarding Vulnerable Groups Act 2006
- Protection of Freedoms Act 2012
- Children and Families Act 2014
- Education Act 2002 and 2011
- Female Genital Mutilation Act 2003
- Children and Adoption Act 2008
- Apprenticeships, Skills, Children and Learning Act 2009
- The Children and Social Work Act 2017
- Working together to safeguard children 2006, 2015, 2018 and 2023

Legal Framework Vulnerable Adults

- Trustee Act 2000
- Care Act 2014
- Mental Capacity Act (including DoLS) 2005

- Human Rights Act of 1998
- Care and Support Statutory Guidance 2014

Appendix 3

Signs and symptoms of abuse (Children)

The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life: -

Physical

- Injuries not consistent with the explanation given for them
- Injuries that occur in places not normally exposed to falls, rough games, etc
- Injuries that have not received medical attention
- Reluctance to change for, or participate in, games or swimming
- Repeated urinary infections or unexplained tummy pains
- Bruises on babies, bites, burns, fractures etc which do not have an accidental explanation*
- Cuts/scratches/substance abuse*

Sexual

- Any allegations made concerning sexual abuse
- Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour
- Age-inappropriate sexual activity through words, play or drawing
Child who is sexually provocative or seductive with adults

- Inappropriate bed-sharing arrangements at home
- Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
- Eating disorders - anorexia, bulimia*

Emotional

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging.
- Depression, aggression, extreme anxiety.
- Nervousness, frozen watchfulness
- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Attention-seeking behaviour
- Persistent tiredness
- Running away/stealing/lying

Neglect

- Under nourishment, failure to grow, constant hunger, stealing or gorging food, Untreated illnesses, inadequate care, etc

*These indicate the possibility that a child or young person is self-harming.

Approximately 20,000 are treated in accident and emergency departments in the UK each year.

Signs and symptoms of abuse (Adults)

The following signs could be indicators that abuse has taken place but should be considered in context of the person's whole life: -

Physical abuse

- History of unexplained falls, fractures, bruises, burns, minor injuries
- Signs of under or overuse of medication and/or medical problems left unattended
- Any injuries not consistent with the explanation given for them
- Bruising and discolouration - particularly if there is a lot of bruising of different ages and in places not normally exposed to falls, rough games etc
- Recurring injuries without plausible explanation
- Loss of hair, loss of weight and change of appetite
- Person flinches at physical contact &/or keeps fully covered, even in hot weather
- Person appears frightened or subdued in the presence of a particular person or people

Domestic violence

- Unexplained injuries or 'excuses' for marks or scars
- Coercive, controlling and/or threatening relationship including psychological, physical, sexual, financial, emotional abuse; so-called 'honour' based violence and Female Genital Mutilation

Sexual abuse

- Pregnancy in a woman who lacks mental capacity or is unable to consent to sexual intercourse
- Unexplained change in behaviour or sexually explicit behaviour
- Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting
- Infections or sexually transmitted diseases
- Full or partial disclosures or hints of sexual abuse (that may be accompanied by some of the following additional symptoms):
 - Self-harming
 - Emotional distress
 - Mood changes
 - Disturbed sleep patterns
 - Psychological abuse
 - Alteration in psychological state e.g. withdrawn, agitated, anxious, tearful
 - Intimidated or subdued in the presence of a particular person
 - Fearful, flinching or frightened of making choices or expressing wishes
 - Unexplained paranoia
 - Changes in mood, attitude and behaviour, excessive fear or anxiety
 - Changes in sleep pattern or persistent tiredness
 - Loss of appetite
 - Helplessness or passivity
 - Confusion or disorientation
 - Implausible stories and attention seeking behaviour
 - Low self-esteem

Financial or material abuse

- Disparity between assets and living conditions
- Unexplained withdrawals from accounts or disappearance of financial documents or loss of money
- Sudden inability to pay bills, getting into debt
- Carers or professionals fail to account for expenses incurred on a person's behalf
- Recent changes of deeds or title to property
- Missing personal belongings
- Inappropriate granting and / or use of Power of Attorney

Modern slavery

- Physical appearance; unkempt, inappropriate clothing, malnourished
- Movement monitored, rarely alone, travel early or late at night to facilitate working hours.
- Few personal possessions or ID documents.
- Fear of seeking help or trusting people.

Discriminatory abuse

- Inappropriate remarks, comments or lack of respect
- Poor quality or avoidance care
- Low self-esteem
- Withdrawn
- Anger
- Person puts themselves down in terms of their gender identity or sexuality

Institutional Abuse

- Low self-esteem
- Withdrawn
- Anger
- Person puts themselves down in terms of their gender identity or sexuality
- No confidence in complaints procedures for staff or service users.
- Neglectful or poor professional practice.

Neglect and acts of omission

- Deteriorating despite apparent care
- Poor home conditions, clothing or care and support.
- Lack of medication or medical intervention

Self-neglect

- Hoarding inside or outside a property
- Neglecting personal hygiene or medical needs
- Person looking unkempt or dirty and has poor personal hygiene
- Person is malnourished, has sudden or continuous weight loss and is dehydrated – constant hunger, stealing or gorging on food
- Person is dressed inappropriately for the weather conditions
- Dirt, urine or faecal smells in a person's environment
- Home environment does not meet basic needs (for example not heating or lighting)
- Depression