



SAFEGUARDING POLICY AND REPORTING PROCEDURES

1. The purpose and scope of this statement

Migrateful works with refugees, asylum seekers and other migrants struggling to integration (our chefs). Many of them suffer from physical or mental health issues as a result of their previous experiences.

Migrateful provides training, employment opportunities and associated mentoring and support.

The purpose of this policy statement is to provide staff and volunteers with the overarching principles that guide our approach to safeguarding and procedures for reporting any alleged or suspected cases of abuse. It applies to anyone working on behalf of Migrateful, including managers and the board of trustees, paid staff and volunteers.

2. Legal framework

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect vulnerable adults in England.

3. Actions taken

We believe that the wellbeing of our migrant chefs we support is paramount. We have a responsibility to promote their welfare and keep them safe and to establish systems that help to protect them.

- We will seek to keep our chefs safe by:

- valuing, listening to and respecting them;
- recruiting staff and volunteers safely, ensuring all necessary checks, including DBS checks, are made for those roles that involve training, instruction or teaching;
- making sure all our staff and volunteers are fully aware of our safeguarding policies and procedures;
- providing effective management and supervision of all staff and volunteers;
- providing specialist training in how to work with adults who have experienced trauma for those staff and volunteers whose roles merit it;
- ensuring that we provide a safe physical environment for chefs, as well as our staff and volunteers, applying health and safety measures in accordance with the law and regulatory guidance;
- using our safeguarding procedures to share concerns and relevant information with agencies who need to know;
 - recording and storing information professionally and securely;
 - appointing a nominated safeguarding lead and a lead trustee for safeguarding;
- ensuring we have effective complaints procedures in place and use these to manage any allegations against staff and volunteers appropriately.

4. Related policies and procedures

- This policy statement should be read alongside other Migrateful policies and procedures, including:
 - Confidentiality
 - Health and safety

5. Contact details

Nominated safeguarding lead:

Name: Jess Thompson, Chief Executive

Email: jess@migrateful.org

Trustee responsible for safeguarding matters:

Name: Emily Miller

Email: emily@migrationmuseum.org

PROCEDURES

1. Procedures for reporting alleged or suspected cases of abuse

These procedures deal with the process required when there has been an alleged or suspected disclosure of abuse of a vulnerable person whether by a member of staff, a volunteer or any other person.

Migrateful recognises that some people with whom we come into contact may be subject to abuse. We are committed to preventing, identifying, investigating, and responding to cases of abuse or suspected abuse of such people. We are also committed to ensuring that all our staff, volunteers and trustees understand what abuse is and how to prevent it and deal with it if they suspect that it is occurring.

The existence of any one factor from the following lists should not be taken on its own as being an indicator that abuse is occurring. Rather it should be viewed as an alert to the need to make a further assessment and to consider other factors associated with the person's situation. In many cases, an assessment will be necessary to exclude the possibility that the physical/mental signs or behavioural changes that are causing concern are indicative of a physical or mental illness or substance misuse rather than of mistreatment or abuse.

Some vulnerable adults may reveal abuse by talking about or drawing attention to physical signs or, where verbal communication is limited or confused, displaying certain actions or gestures. Workers need to be alert to these signs and consider what they might mean.

1.1 Physical Abuse

The use of force which results in pain or injury or a change in the person's natural physical state or the non-accidental infliction of physical force that results in bodily injury, pain or impairment.

Indicators might be:

- Injuries inconsistent with the account of how they happened;
- Lack of explanation as to how injuries happened;
- Bruising, burns or other marks;
- Unexplained falls/minor injuries;
- Particularly subdued behaviour in presence of carer, relative, worker.

1.2 Sexual Abuse

The involvement of a vulnerable adult in sexual activity or relationships which:

- They do not want or have not consented to;
- They cannot understand and lack the capacity to consent to;
- They have been coerced into because the other person is in a position of power, trust or authority;
- Are against the law.

Indicators might be:

- Bruising, infection, tearing in genital area;
- Pregnancy in a woman who is unable to consent to sexual intercourse;
- Bruising to thighs and upper arms;
- Unusual difficulty in walking or sitting;
- Unusual wetting or “soiling”;
- Significant change in sexual behaviour or attitude;
- Unusually overt sexual behaviour/language;
- Reluctance to be alone with an individual known to them;
- Self harming;
- Withdrawal, sleep disturbance and/or poor concentration;
- Fear of assistance with bathing, dressing, etc;
- Excessive fear/apprehension of, or withdrawal from, relationships.

Non-contact sexual abuse might also be an issue (e.g.: forcing a vulnerable adult to look at sexual media, indecent exposure, photography, etc.).

1.3 Psychological or Emotional Abuse

Behaviour that has a harmful effect on the vulnerable adult’s emotional health and development or any other form of mental cruelty that results in:

- Mental distress;
- The denial of basic human and civil rights, such as privacy and dignity;
- The negation of choices, wishes and self-esteem;
- Isolation or over-dependence.

This has a harmful effect on a vulnerable adult’s emotional health, development or well-being.

- Examples of such abuse include:
- Preventing a vulnerable adult from using services;
- Denial of access to friends;
- Ignoring;
- Harassment;

- Use of threats, bullying, swearing;
- Intimidation.

Indicators might be:

- Visible discomfort or silence from the vulnerable adult when perpetrator is present;
- Vulnerable adult not allowed to express an opinion;
- Vulnerable adult denied freedom of movement or access to others;
- Alteration in psychological state (e.g.: withdrawal or signs of fear);
- Insomnia, tearfulness, change of appetite.

1.4 Financial or Material Abuse

The use of a vulnerable adult's property, assets, income or any other resources without their informed consent and authorisation. Financial or material abuse occurs where an individual's funds or resources are being used inappropriately by a third person. It can include:

- The withholding of money;
- The unsanctioned use of a person's money or property
- The entry of a person into contracts or transactions where are not understood and which are to their disadvantage and which have been as a result of duress or pressure of some kind (e.g.: loans, gifts)

Indicators might be:

- Unexplained lack of money to maintain lifestyle;
- Unexplained and unusual bank withdrawals;
- Lack of accountability shown by person handling vulnerable adult's affairs;
- Unusual interest shown by others in vulnerable adult's assets;
- Unjustified obtaining of Appointeeship or Power of Attorney without vulnerable adult's understanding or consent.

1.5 Neglect and Acts of Omission

The repeated deprivation of assistance that the vulnerable adult needs for important activities of daily living, including the failure to intervene in behaviour which is dangerous to the vulnerable adult or to others.

Examples of such abuse might include:

- Failure to provide food, shelter, clothing or heating;

- Failure to provide agreed personal or medical care;
- Inappropriate use of medication or over-medication;
- Denial of needs;
- Ignoring.

Indicators might be:

- Physical condition of living space is poor;
- Physical condition of vulnerable adult is poor;
- Untreated injuries or other medical problems;
- Inconsistent or reluctant contact with medical or social care agencies;
- Poor personal hygiene.

1.6 Discriminatory Abuse

Occurs when values, beliefs or culture result in a misuse of power that denies opportunity to some groups or individuals. It is the exploitation of a person's vulnerability, resulting in repeated or pervasive treatment of an individual, which excludes them from opportunities available to others. Incitement to discriminate is also treated as equivalent to actual discrimination.

Indicators might be:

- Verbal abuse, derogatory comments or inappropriate use of language;
- Signs of a sub-standard service being offered;
- Repeated exclusion from rights afforded to ordinary citizens (e.g.: health, employment, criminal justice);
- Expressions of anger or anxiety;
- Denial of a person's communication needs (e.g.: access to a signer).

1.7 Institutional Abuse

The mistreatment or abuse of a vulnerable adult by a regime or individuals within an institution. It can be through repeated acts of poor or inadequate care and neglect or poor professional practice. Institutional abuse occurs when the routines, systems and norms of an institution compel individuals to sacrifice their own preferred lifestyle and cultural diversity to the needs of the institution. Research has shown that the culture of an institution is a powerful indicator of the practice and attitudes of those working within it. Institutions, which have a "closed" culture, where there can be a lack of accountability, have been shown as more likely to foster poor practice.

Indicators might be:

- Inadequate staffing levels;
- Inappropriate or poor care;
- Lack of adequate procedures (e.g.: for medication, management of finances);
- Failure to ensure privacy or personal dignity;
- Public discussion of personal matters;
- Denial of visitors, phone calls;
- Absence of individual care plans;
- Inadequate or delayed response to reasonable requests;
- Interference with mail.

2. Alerting

Alerting refers to the responsibility of any worker to be aware of the possibility that abuse of a vulnerable adult may have taken place - or is likely to take place - and to take action. A concern that a vulnerable adult is, or could be, being abused may have arisen either from:

- A direct disclosure by the client/vulnerable adult;
- A complaint or expression of concern by a worker, client, member of the public, carer or other professional;
- An observation of the behaviour of the vulnerable adult by a worker.
- If a worker suspects or receives a report of actual or potential abuse, it is expected that they will:
 - Deal with immediate needs;
 - Take reasonable steps to ensure that the vulnerable adult is in no immediate danger;
 - Seek medical intervention as appropriate;
 - Contact the Police if it is believed that a crime has (or is alleged to have been) been committed.
 - Assure the person making the allegation that they will be taken seriously. Not be judgmental, express disgust or jump to conclusions;
 - Explain that you have a duty to report the matter to Migrateful's CEO and that the concerns raised will have to be shared with them and external agencies (including the police);
 - Not give any promises of complete confidentiality;
 - Ask open questions.

If a client/vulnerable adult is making a disclosure, listen carefully to what is being said, stay calm, clarify the facts of the abuse but avoid a detailed investigation and lots of questions. This is particularly important where a crime might have been committed in order to avoid contamination of evidence and witnesses.

Explain to the vulnerable adult making a disclosure that you will take steps to protect them from further abuse. Do NOT discuss the allegation of abuse with the alleged perpetrator or anyone other than the relevant trustee.

Do NOT disturb or destroy articles that could be used in evidence. Tell a member of the board of trustees of the concerns/complaint immediately. If a trustee is implicated in the abuse, tell a trustee other than the trustee who is implicated.

An accurate record should be made at the time of the disclosure or discovery giving details of the incident and/or the grounds for suspecting abuse including:

- The date and time of the incident;
- What the client/vulnerable adult said about the abuse and how it occurred or what has been reported to you;
- The appearance and behaviour of the victim, including any injuries;
- The use of speech marks to indicate speech recorded verbatim;
- A record of the questions asked. This is important in the context of possible claims that victims have been led and evidence contaminated.

The record of the report of suspected abuse should be passed to the CEO, Jess Thompson, or the nominated trustee, with the minimum of delay and ideally within 4 hours of the disclosure of abuse being made.

They will then consider whether any outside body should be informed (i.e.: the police or the relevant local authority Social Services department).

All allegations or incidents of client abuse should be taken seriously, investigated and responded to. The extent of the investigation and formality of the response will be dictated by the seriousness of the abuse, the vulnerability and mental capacity of the victim and perpetrator, and whether workers or volunteers are implicated in the alleged abuse.

When making a recommendation the following factors should be taken into account:

- Vulnerability of the individual;
- Their mental capacity;
- Nature and extent of the abuse (please be aware that vulnerable adults might at first report seemingly minor issues to 'test' your reaction/response);
- The intent of the person alleged to be responsible for the abuse;
- The reliability of the reporting process (e.g.: whether anonymous);
- Length of time abuse may have been occurring;
- Whether it was a one-off event or part of a long-standing relationship or pattern;
- Impact of the abuse on the individual and/or on others;
- The illegality of the alleged perpetrator(s) actions;

- Risk of repeated or increasingly serious acts involving this or other vulnerable adults;
- Whether the vulnerable adult gives permission for further action.

The matter should always be referred to the police if a crime may have taken place. The matter should always be referred to Social Services if:

- The person disclosing alleged abuse is a vulnerable adult and does not have the mental capacity to make an informed choice about what actions they want to take;
- The client accused of the alleged abuse is a vulnerable adult and/or might be judged not have the mental capacity to take responsibility for their actions;
- The alleged perpetrator is a trustee or paid worker;
- Other people (who may be vulnerable adults) are at risk from the perpetrator;
- The vulnerability of the alleged victim or perpetrator is at all in doubt.

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