



Safeguarding Adults Policy

Date updated:
September
2023

Version: 2

Compliance
Lead:
Designated
Safeguarding
Lead

Date for
Review:
September
2024

Policies & Procedures





1. Introduction
2. Scope
3. Policy Statement
4. Peer-on-Peer (Child-on-Child) Abuse
5. Other Safeguarding Concerns
6. Roles and Responsibilities of Staff
7. Reporting Procedures
8. Safeguarding Team
9. Staff Recruitment
10. Staff Training
11. Teaching Approaches
12. Procedures for Supporting Students who make a Disclosure/Allegation
13. Reporting and Dealing with Allegations Against a Member of Staff
14. Whistleblowing

Appendix 1 – Examples and Indicators of Abuse

Appendix 2 – Reference Documents

Appendix 3 – Flowchart for Reporting a Concern





1. Introduction

This policy should be read in conjunction with Rotherham Opportunities College Safeguarding Policy Statement. The purpose of this policy is to set out the college's responses to concerns regarding the safeguarding and protection of adults at risk of neglect or abuse. Examples and indicators of abuse are detailed in Appendix 1. The policy and the associated procedures provide guidance to all staff who may have concerns of this nature within the context of their work.

Rotherham Opportunities College supports students from 16 -25 years who have a range of disabilities including students with mild, moderate and complex learning disabilities, communication difficulties, autism and physical disabilities. The college uses satellite sites as well as the main site at My Place, St Ann's Road, Rotherham S65 1PH. Due to our students' additional needs and their level of understanding they are often more vulnerable to being victims of abuse and are at increased risk of harm. Students suffering from poor mental health may also be at increased vulnerability.

Safeguarding adults is defined as:

Protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time, making sure that the adult's wellbeing is promoted including where appropriate having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.





2. Scope

This policy applies to all staff, volunteers and students. Staff from other organisations working with students on our premises or externally with college students or trainees will also be expected to follow this policy.





3. Policy Statement

Rotherham Opportunities College regards the protection of adults at risk as a priority and is committed to safeguarding them. The principles of this policy are as follows:

- Rotherham Opportunities College will follow statutory and specialist guidelines in working with adults at risk.
- Through admission and regular observations the college will identify students who may be considered more vulnerable due to their needs and levels of understanding of potential risks.
- The college will seek to support all those affected by abuse and neglect.
- The college will seek to prevent vulnerable people from radicalisation or unwarranted influence that may cause harm to them or others.
- Rotherham Opportunities College will review its Safeguarding Policy annually.
- The college will ensure that all students know who they can approach if they are worried or in difficulty.





4. Peer-on-Peer (Child-on-Child) Abuse

We acknowledge that Keeping Children Safe in Education (2022) changed the term Peer on Peer Abuse to Child-on-Child Abuse, however, Rotherham Opportunities College will continue to use the term Peer on Peer Abuse as we are working students who are 16 - 25. Through training we will ensure all staff are informed of this change to broaden their thinking around this term and that this relates to children 0 – 18 as well as our students. Rotherham Opportunities College has a duty to protect students against peer-on-peer abuse. There are many forms of abuse that can occur between peers such as physical abuse, sexual abuse, sexually harmful behaviour, sexual harassment, sexual violence, bullying, cyber bullying, sexting, upskirting, hazing and prejudiced behaviour.

Rotherham Opportunities College has a zero-tolerance approach to peer-on-peer abuse. It is recognised that even if there are no reported cases of peer-on-peer abuse it does not mean that it is not taking place within the college.

All concerns regarding peer-on-peer abuse must be reported to the college safeguarding team. Where appropriate the Local Authority Safeguarding Team and the funding authority will be notified.





5. Other Safeguarding Concerns

Female Genital Mutilation

Female genital mutilation (FGM) is a procedure where the female genitals are deliberately cut, injured or changed, but where there is no medical reason for this to be done. It is also known as 'female circumcision' or 'cutting' and by other terms such as sunna, gudnlin, halalays, ahur, megrez and khitan, among others.

FGM is usually carried out on young girls between infancy and the age of 15, most commonly before puberty starts. It is illegal in the UK and is child abuse. It is very painful and can seriously harm the health of girls and women. It can also cause long-term problems with sex, childbirth and mental health.

All suspected cases of FGM must be reported to the police.

Honour Based Violence

Honour based violence (HBV) is the term used to refer to a collection of practices used predominantly to control the behaviour of women and girls within families or other social groups in order to protect supposed cultural and religious beliefs, values and social norms in the name of 'honour'.

Forced Marriage

Forced marriage is not to be confused with arranged marriage. A forced marriage is where one or both people do not, or in cases of people with learning difficulties or who are under-age, cannot consent, to the marriage and where duress is used to enforce the marriage. 'Duress' includes psychological, sexual, financial or emotional pressure and violence.

Upskirting

Typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. This can be directed at females or males.

LGBTQ+ abuse

The fact that a child or a young person may be LGBTQ+ is not in itself an inherent risk factor for harm. However, individuals who are LGBTQ+ can be targeted by others. In some cases, a child/young person who is perceived by others to be LGBTQ+ (whether they are or not) can be just as vulnerable as those who identify as LGBTQ+. Risks can be compounded where children/young people who are LGBTQ+ lack a trusted adult with whom they

can be open. It is therefore vital that at Rotherham Opportunities College we endeavour to reduce the additional barriers faced and provide a safe space for them to speak out or share their concerns with members of staff.



LGBTQ+ inclusion is part of the statutory Relationships Education, Relationship and Sex Education and Health Education curriculum and there is a range of support available to help educational provisions counter homophobic, bi-phobic and transphobic bullying and abuse.





7. 6. Roles and Responsibilities of Staff

The protection of adults at risk is everyone's responsibility. Staff should not assume someone else will take action. In order to fulfil this responsibility effectively all staff should make sure that their approach is considering the best interest of the adult with support needs.

Where there is a safeguarding concern the wishes and feelings of students will be taken into account. The college will provide a person-led and outcomes focused approach by engaging the student in conversation about how best to respond to their safeguarding situation and to engage and involve them throughout the process as much as they are able and willing to be involved. Staff will support student involvement in a number of different ways and this will include the use of Makaton signs and communication aids.

All concerns including concerns of a low level that do not meet the threshold for harm, will be treated seriously and investigated appropriately.

Should a referral be made for carrying out an assessment under section 36 of the Counter-Terrorism and Security Act (2015), vulnerable to being drawn into the principal will ensure the ESFA are notified that a referral has been made.

The Police will be contacted where a safeguarding concern could lead to potential wilful neglect or ill treatment of someone who lacks capacity. This includes all concerns around care and support needs.

Any student that raises, or is involved, in a safeguarding concern who has capacity, will be offered appropriate support to decide who they wish to be informed e.g. parents/carers.

In the event of a safeguarding concern, parents/carers of students who lack capacity will be contacted at the earliest and most appropriate time unless the parent/carer is directly implicated in the concern. Communication with parents/carers will be regular, open and transparent.

Where a parent/carer holds Deputyship for a student, relevant information in accordance with the appropriate authorisation and terms of the order will only be provided at the prior request of the Deputy.

The Governor with responsibility for Safeguarding will liaise with the local authority on safeguarding issues in the event of an allegation being made against the principal.



8. Reporting Procedures

Every member of staff is responsible for reporting to one of the safeguarding team any suspected abuse or disclosure by any student. The following reporting procedure must be followed:

- In the case of a disclosure report to a member of the safeguarding team **within 2 hours**
- If you believe action may be needed and a member of the safeguarding team is not available, contact **any** other senior manager
- Record the event on CPOMs under Safeguarding within **24 hours**

The college has a dedicated safeguarding email address and mobile phone number for use by students, visitors and parents/carers, to report safeguarding concerns.

The email address is: safeguarding@theroc.co.uk

The mobile number is: 07470 581359

Emails are reviewed regularly throughout the college day (08:15 – 17:00) to ensure that concerns raised are dealt with on the same day. The mobile phone is held by a member of the safeguarding team, any calls to this number will be received during the college day as well as during out-of-hours college activities or out-of-term college activities.

Alternatively referrals to adult safeguarding can be made direct to Rotherham using the online form at: <https://www.rotherham.gov.uk/xfp/form/261> or by telephoning: 01709 822330.

Please note that all information supplied using this form is held in a sensitive nature and is highly confidential.

By ensuring that all concerns or disclosures of abuse are recorded and reported in line with policies we can make sure that we are able to implement any early help that can reduce risks to all involved. Early help means providing prompt support to the victim of any issues that are raised and reviewed.



9. Safeguarding Team

The college has a safeguarding team made up of the Designated Safeguarding Lead (DSL) and Designated Safeguarding Deputies (DSD). The DSL has overall responsibility for safeguarding within the college. All members of the safeguarding team have received training in safeguarding issues and will receive refresher training at least every two years.

The DSL is responsible for:

- Raising awareness across all staff of issues relating to the welfare of students and trainees and the promotion of a safe environment for the students across all college sites and work placements.
- Informing senior leaders and the governing body of significant safeguarding concerns or issues.
- Overseeing the referral of cases of suspected abuse or allegations to the relevant investigating agencies.
- Reviewing and updating policies and procedures around safeguarding ensuring they are in line with legislation and Government guidance.
- Making a proper record of any referrals, complaints or concerns.
- Ensuring that parents and carers are aware of the college's safeguarding policy and policy statement.
- Liaising with Local Authorities and other appropriate agencies.
- Ensuring that staff receive basic training in safeguarding issues appropriate to their roles and are aware of the college safeguarding procedures.

Staff members who have concerns about a student should raise these with the DSL or DSDs who will decide whether to make an alert to the Local Authority Safeguarding Team. However, any staff member can refer their concerns about a student to the adult's social care team directly. Where an allegation or suspicion of abuse has been reported to the relevant Local Authority Safeguarding Team, the college will work in partnership with them to determine the next steps.



10. Staff Recruitment

Rotherham Opportunities College will exercise care in the appointment of all those working with adults at risk working to 'Keeping Children Safe in Education' by ensuring that everyone working with students has:

- Undergone pre-employment checks in line with current legislation;
- Undergone appropriate vetting and barring checks;
- Undergo online searches as part of due diligence once short listed; Candidates will be made aware of this and will be asked for any 'handles' they may use;
- Is adequately trained and supervised;
- Understands and follows the college's safeguarding policy and procedures;
- Understands the Prevent procedures;
- Is registered with their relevant professional body (if appropriate).



11. Staff Training

As part of their induction staff receive guidance on key systems, protocols and procedures around safeguarding. Staff receive a copy of the most up to date Part One of Keeping Children Safe in Education, they are required to read and understand their safeguarding responsibilities and complete KCSIE health check to ensure they understand the document.

All staff undertake accredited safeguarding training on a regular basis and demonstrate their knowledge in their practice. Staff also receive weekly in-house training based on a different monthly theme, on an annual rolling programme.

All staff working at Rotherham Opportunities College will attend Prevent training and embed the strategy into their everyday work. The college ensures that all staff are equipped to recognise extremism and are skilled and confident enough to challenge it.

All governors receive safeguarding and child protection (including online) training at point of induction. The training is delivered on a regular basis and they follow a 2 year rolling programme. This training ensures that they are equipped to challenge and assure themselves that safeguarding policies and procedures are effective and support a whole college approach.





12. Teaching Approaches

Rotherham Opportunities College will promote safeguarding through improving students knowledge of their own safety and by ensuring students are safe and feel safe.

We will ensure that all our teaching approaches help our students build resilience and give them a positive sense of identity through the development of critical thinking skills.

Students follow a PSD curriculum which includes safeguarding topics, online safety, Prevent and radicalisation, British values and the protected characteristics. The sessions address local concerns and key issues relevant to the students and their local environment. Sessions are delivered in a variety of learning styles, through drama, art, music as well as workshops from the Police and other organisations.

We are flexible enough to adapt our teaching approaches to address specific issues relevant to current concerns of safeguarding e.g. hate crime, extremism, and radicalisation.

Staff apply methodologies to engage students such as making a connection through good teaching and a person-centred approach, facilitating a 'safe space' for dialogue and equipping students with the appropriate skills, knowledge and awareness to build resilience.





13. Procedures for Supporting Students who make a Disclosure/Allegation

If a student tells a member of staff that he/she has been abused in any way the staff should:

- Stay calm, do not interrupt the student;
- Listen carefully to the student without any prompting or leading questions;
- Think about communication and if the student needs any additional support in order to be able to communicate;
- Reassure the student that they are being taken very seriously and staff are there to help them keep safe;
- Only ask questions to identify or clarify what is being told, not to ask for details;
- Do not interview the student;
- Only ask open questions – questions where the student cannot answer 'yes' or 'no';
- Explain that in order to help them this will need to be discussed with a member of the safeguarding team;
- Take the student seriously and reassure them they have done the right thing in telling someone, thank the student for this, **do not promise the student that what they disclose will be kept totally confidential**;
- Do not try to establish whether or not the student is telling the truth;
- Record clearly what the student has said, include date and time when you spoke to the student and details of what the student said, this should be in the students own words or communication method and should not contain any opinions of staff.
- Report your concern immediately to a member of the safeguarding team, passing on a copy of the written record made;
- Only pass information to those who need to know.

Information relating to actual, suspected or alleged abuse should be treated with the utmost care. Information should only be shared with staff who need to be aware of it. No one should be given more information than is necessary to support the student.

The legislation for safeguarding adults requires agencies to work co-operatively to protect the welfare of adults. Local Authorities and the Police have the responsibility for carrying out enquiries (or requesting others to carry them out) however all those who come into contact with our students have a duty to safeguard them.



14. Reporting and Dealing with Allegations Against a Member of Staff

A low-level concern is any concern which is inconsistent with the staff code of conduct and does not meet the harm threshold to consider a referral to LADO (Local Authority Designated Officer).

All low-level concerns should be added to CPOMS under the heading 'Low-Level' concerns as these are only seen by the principal. The principal will deal with all low-level concerns. Low level concerns can include humiliating the student, being over friendly, taking photographs on the staff member's personal phone, staff sharing personal contact details with a student.

If suspected or alleged abuse involves a staff member, staff should not inform that staff member but they should report it the principal and business manager as soon as possible, but no later than **2 hours**. The principal will work with the business manager to address the situation in an appropriate and proportionate manner.

The situation may also require external professionals including reporting to the Local Authority Designated Officer (LADO) and to DBS to ensure they are informed of the allegation and actions taken to reduce risks and safeguard all involved. Referrals to the Disclosure and Barring Service, (DBS) is in addition to local safeguarding processes. Rotherham Opportunities College takes its duty to refer individuals to the DBS for a barring decision seriously as part of its wider safeguarding role and duty.

As a result of any disciplinary investigation or enquiry, the business manager and the safeguarding team will identify whether there are any actions that could lead to the improvement of the college's procedures including the training needs of staff.





15. Whistle Blowing

Whistle blowing is the act of speaking out about wrongdoing in the workplace in order to enable the issue to be addressed. In some instances it may be necessary for staff to report the practice of a colleague including criminal activity or abuse of students. All staff should be familiar with the Whistle Blowing Policy.



Appendix 1 – Examples and Indicators of Abuse

Examples	Indicators
Physical Abuse	
Assault, hitting, slapping, pushing, biting, poisoning, burning or scalding, drowning, suffocating, punching, kicking, spitting, being locked in a room (including DoLS), force feeding, misuse of medication, unnecessary use of invasive procedures, inappropriate physical sanctions, restraint, removal of mobility aids, use of tables to keep people seated.	Bruises in various stages of healing, bruises inconsistent with falls, burns or scars, unexplained cuts or scratches to mouth, lips, gums, eyes or external genitalia, changes in patterns of self-harm, reluctance to undress, history of injury, sudden and unexplained urinary and/or faecal incontinence, evidence of over/under medication, adult flinches at physical contact, adult asks not to be hurt, individual appears frightened or subdued in the presence of particular people, death.
Psychological Abuse	
Includes emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse and isolation. Unreasonable or unjustified withdrawal of the adult from services or their support networks. Gas lighting behaviours when someone manipulates you into questioned and second-guessing your reality.	Untypical lack of interest, passivity or resignation, anxious or withdrawn (possibly in the presence of the potential source of risk), untypical changes in behaviour including loss of appetite or overeating, the individual is not allowed visitors or phone calls, or is locked in a room or their home. The adult may have depression or anxiety, low self-esteem, changes to sleep patterns or untypical behaviour including aggression. The adult could attempt or complete suicide.
Sexual Abuse	
Rape, indecent exposure, being made to perform a sexual act, sexual teasing or innuendo, assault by penetration (penetration with an object), persuasion or coercion into sexual activity, un/wanted touching, exposed to pornographic material or witnessing sexual acts, any sexual relationship which	Urinary tract infections, sexually transmitted diseases, pain, itching, bleeding, unexplained problems with catheters, subdued and withdrawn, poor concentration, physical marks, cuts or bruises particularly in genital or rectal areas, self-harm, disclosure, sexualised behaviour, significant

the adult has not consented or one that develops between adults where one is in a position of trust, power or authority, denial of a sexual life.	changes in behaviour, clothing is torn, stained or bloody, a woman who lack capacity to consent becomes pregnant, untypical use of sexual language.
Neglect and Acts of Omission	
Ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services. Withholding of the necessities of life such as medication, adequate nutrition and heating, social contact.	Exposed to unacceptable risk, callers and visitors are refused access to the person. Pressure ulcers develop or do not heal, weight loss, no access to appropriate medication or medical care, no privacy or dignity, change in appearance, poor skin and hair, smell of urine, missed appointments, dried faeces in pubic hair or under fingernails. The adult's death could result from severe cases of neglect.
Financial or Material Abuse	
Including theft, fraud, internet scamming, exploitation, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions or the misuse of misappropriation of property, possessions or benefits.	Lack of money, especially after benefits have been paid, inadequately explained withdrawals, lots of mail. Lasting Power of Attorney being misused or obtained when the person lacks the capacity to make this decision. Recent acquaintances expressing a sudden or disproportionate interest in the person and their money. Change in appearance (becoming dishevelled), change in the individual's circumstances, behaviour or habits e.g. Shopping, access to hairdressers, purchasing items.
Domestic Abuse	
Threatens/frightens an individual, shoves or pushes an individual, makes an individual fear for their physical safety, puts an individual down, or attempts to undermine their self-esteem, controls an individual for example by stopping them seeing friends and family, is jealous and	Low self-esteem, depression, anxiety, post traumatic stress disorder, sleep disorders, suicidal tendencies or self-harming, alcohol or other substance misuses, unexplained chronic gastrointestinal symptoms, feeling that the abuse is their fault when it is

possessive, such as being suspicious of friendships and conversations. It also includes so called 'honour' based violence, female genital mutilation and forced marriage. Domestic abuse affects the onlooker as well as the person it is being done to. Students in domestic abuse homes are victims too.	not. Physical evidence of violence such as bruising, cuts, broken bones. Verbal abuse and humiliation in front of others. Fear of outside intervention. Damage to home or property. Isolation, not seeing friends and family. Limited access to money.
Modern Slavery	
Encompasses slavery, human trafficking, forced labour and domestic servitude. Trafficking 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.	Look malnourished or unkempt, withdrawn, anxious and unwilling to interact, under the control and influence of others, live in cramped, dirty, overcrowded accommodation, no access or control of their passport or identity documents or use false or forged documents. Appear scared, avoid eye contact and be untrusting. Show signs of abuse and/or have health issues, show old/untreated injuries.
Self-Neglect	
Neglecting to care for personal hygiene, health or surroundings. Living in very unclean or verminous circumstances, poor self-care such as long toenails impeding mobility, poor nutrition, poor healing/sores, poorly maintained clothing which may be unsuitable for the weather or conditions, isolation from family, friends and services. Failure to take medication. Hoarding.	Poor self-care leading to a decline in personal hygiene, poor nutrition, poor healing/sores, poorly maintained clothing, long toenails resulting in mobility issues, isolation. Health issues related to the adult's failure to take medication or engage with health interventions that would improve their situation. Fire risks due to hoarded items.
Discriminatory	
Forms of harassment including jokes, slurs, name-calling or similar treatment because of race, gender and gender identity/reassignment, disability, age, sexual orientation, religion and beliefs, marriage or civil partnership, pregnancy and maternity, sex and sexual orientation. Not providing care or	Observation of oppressive practice, the individual is isolated from others, person stops 'practising' their beliefs, stops asking for needs to be met, changes behaviour to fit in with group. Physical health deteriorates, withdrawal from services or refusal to access services or usual activities.

treatment because of a protected characteristic.	Potential for self-harm, possible disclosure of abuse or suicide attempts.
Organisational Abuse	
Neglect or poor care practice within an organisation or specific setting e.g. hospital or care home but can also be in relation to care provided in your own home. This may range from one-off incidents to on-going ill treatment. Abuse can be the result of poor professional practice including discouraging visits or the involvement of relatives or friends, abusive and disrespectful attitudes towards people using the service, inappropriate use of restraints, lack of respect for dignity and privacy, failure to manage individuals with abusive behaviour, not providing adequate food and drink or assistance with eating, not offering choice or promoting independence, misuse of medication, failure to provide care with health needs, not taking account of individuals' cultural, religious or ethnic needs, failure to respond to abuse appropriately, interference with personal correspondence or communication, failure to respond to complaints.	Lack of flexibility and choice for people using the service. Inadequate staffing levels. People being hungry or dehydrated. Poor standard of care. Lack of personal clothing and possessions and communal use of personal items. Lack of adequate procedures. Poor record-keeping and missing documents. Absence of visitors. Few social, recreational and educational activities. Public discussion of personal matters. Unnecessary exposure during bathing or using the toilet. Absence of individual care plan. Lack of management overview and support.



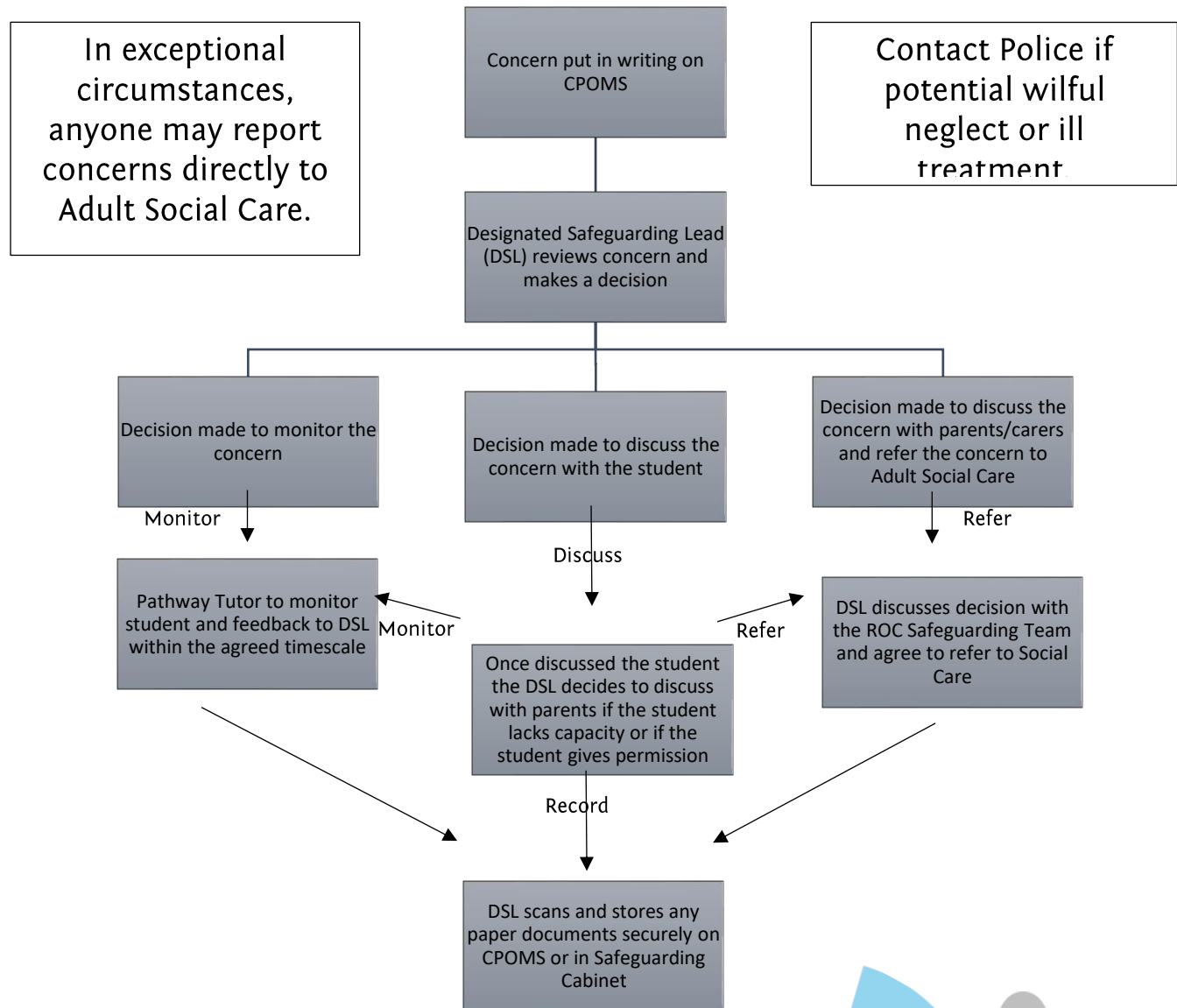
Appendix 2 – Reference Documents



Reference Documents	<p>Keeping Children Safe in Education (2023) Ofsted Further Education and Skills Handbook (2023) Safeguarding Children and Safer Recruitment in England DfE (2012) Working Together to Safeguard Children (2018, updated July 2022) Care Act (2014) Disability Discrimination Act (1995) Mental Health Act (1983, 2007) Human Rights Act (1998) Prevent Duty Guidance https://www.gov.uk/government/publications/prevent-duty-guidance Prevent for FE https://preventforfeandtraining.org.uk/ Rotherham Safeguarding Adults Board https://www.rotherham.gov.uk/adult-social-care/worried-adult/1 FGM https://www.gov.uk/government/publications/female-genital-mutilation-resource-pack/female-genital-mutilation-resource-pack</p>
----------------------------	--



Appendix 3 – Reporting a Concern



RMBC Adult Services
01709 822330

Safeguarding Adults
Policy
September 2023