



Safeguarding Children and
Adults at Risk Policy
for (Name of Church)

Revised April 2026

SAMPLE POLICY

Our Safeguarding Commitment

[Name of Church] is committed to creating and maintaining a safe, caring, and welcoming environment for all people, particularly children, young people, and adults at risk, who are involved in the worship, ministry, and activities of the church.

Safeguarding is central to our Christian faith and practice. We believe that every person is created in the image of God and has inherent dignity and worth. We therefore seek to follow the example of Jesus by offering protection, care, and respect, especially to those who may be more vulnerable to harm.

This church is committed to:

- **Promoting the safety and wellbeing** of children, young people, and adults at risk
- **Preventing abuse and neglect wherever possible**
- **Responding promptly, proportionately, and appropriately** to safeguarding concerns
- **Listening to and taking seriously** the voices and experiences of those affected by abuse
- **Working in partnership** with statutory and safeguarding agencies in England.

Safeguarding is **everyone's responsibility** and is a shared obligation of trustees, leaders, staff, volunteers, and members.

Scope of This Policy

This policy applies to:

- All trustees, ministers, leaders, employees, and volunteers
- Anyone acting on behalf of the church or representing the church in any capacity
- All church-related activities, including worship, children's and youth work, pastoral care, outreach, community projects, online activities, and events held on or off church premises.

This policy covers safeguarding arrangements for:

- **Children and young people** (anyone under the age of 18)
- **Adults at risk** (adults aged 18 or over who have care and support needs and who may be unable to protect themselves from abuse or neglect).

Safeguarding responsibilities apply to **formal and informal** settings connected to church life.

Legal and Policy Framework

This safeguarding policy is informed by, and complies with, current safeguarding legislation and statutory guidance in England, including:

- The Children Act 1989
- The Children Act 2004
- The Care Act 2014
- Working Together to Safeguard Children (Department for Education, March 2026)
- Care and Support Statutory Guidance (updated 2025)
- The Safeguarding Vulnerable Groups Act 2006
- Disclosure and Barring Service (DBS) legislation
- The Mental Capacity Act 2005
- Data protection legislation.

This policy reflects the responsibilities placed on voluntary, community, and faith organisations under current statutory safeguarding guidance in England. It will be kept under review to ensure ongoing compliance with changes in law or guidance.

Our Safeguarding Principles

The safeguarding work of the church is guided by the following principles, drawn from statutory guidance:

- **Empowerment** – Supporting people to make their own decisions and give informed consent
- **Prevention** – Taking action to reduce the risk of abuse before it occurs
- **Proportionality** – Responding in the least intrusive way appropriate to the risk presented
- **Protection** – Supporting and representing those at risk
- **Partnership** – Working with families, communities, and statutory agencies
- **Accountability** – Ensuring clear roles, responsibilities, and transparent decision-making.

All safeguarding practice will prioritise the safety and wellbeing of the individual.

Definitions and Understanding of Abuse

For the purposes of this policy:

- A **child** is a person under the age of 18.
- An **adult at risk** is a person aged 18 or over who:
 - has needs for care and support,
 - is experiencing, or at risk of, abuse or neglect, and
 - is unable to protect themselves from harm or exploitation because of those needs.

Abuse may take many forms, including physical, emotional, sexual abuse, neglect, financial or material abuse, discriminatory abuse, domestic abuse, coercive control, exploitation, and institutional abuse. Abuse may be a single incident or a pattern of behaviour, may occur online or offline, and may be perpetrated by adults or other children.

Safer Recruitment and Selection

The church is committed to safer recruitment practices to help protect children and adults at risk.

This includes:

- Clear role descriptions with safeguarding responsibilities
- Application and interview processes
- Verification of identity and relevant experience
- Appropriate references
- Disclosure and Barring Service (DBS) checks where required
- Safeguarding training before taking up a role
- Ongoing supervision, support, and review.

No individual will be appointed to a role involving work with children or adults at risk unless safer recruitment requirements have been satisfactorily completed.

Training and Support

The church recognises that effective safeguarding depends on people being informed, confident, and supported.

The church will ensure that:

- All trustees, leaders, staff, and volunteers receive safeguarding awareness training
- Those with specific safeguarding roles receive role-appropriate training
- Training is refreshed regularly
- Advice and support are available when safeguarding concerns arise.

Responding to Safeguarding Concerns

Anyone who has a concern about the safety or wellbeing of a child or adult at risk must take action.

This includes:

- Listening carefully and respectfully
- Not promising confidentiality
- Recording concerns accurately and promptly
- Reporting concerns immediately to the **Church Safeguarding Officer (CSO)**
- Contacting emergency services if a person is at immediate risk of harm.

Safeguarding concerns will be managed in line with local safeguarding procedures and referred to statutory agencies where required.

Confidentiality and Information Sharing

Information shared for safeguarding purposes will be:

- Handled sensitively
- Recorded accurately
- Shared only on a need-to-know basis
- Stored securely.

Information will always be shared where necessary to protect a child or adult at risk, in line with safeguarding and data protection requirements. Confidentiality must not be used as a reason to withhold information where there are safeguarding concerns.

Support for Those Affected by Abuse

The church is committed to offering a compassionate, pastoral response to anyone affected by abuse.

Support may include:

- Listening and believing the individual
- Respecting their wishes and dignity
- Offering pastoral care where appropriate
- Signposting to specialist support services.

The wellbeing of those affected will remain central to any response.

Managing Allegations Against Church Officers

Where concerns or allegations are made about a trustee, leader, staff member, or volunteer:

- The safety of children and adults at risk will be the **paramount consideration**
- Safeguarding procedures will be followed
- Statutory agencies will be involved as required
- Appropriate pastoral support will be offered to all involved.

The church will not attempt to handle serious allegations internally without appropriate external guidance.

Governance, Roles, and Responsibilities

The church will ensure:

- A Church Safeguarding Officer (CSO) is appointed
- A trustee has lead responsibility for safeguarding
- Clear reporting lines and accountability arrangements are in place.

Safeguarding will be a standing item on Church Council meeting agendas and will be subject to regular review.

Review and Monitoring

This policy will be:

- Reviewed at least annually
- Updated in response to changes in legislation or statutory guidance
- Reviewed following significant safeguarding incidents or learning.

The church is committed to continual improvement in safeguarding practice.

KEY CONTACTS

Church Safeguarding Officer

Name:

Telephone:

Email:

Denominational Safeguarding Adviser (DSA)

The Denominational Safeguarding Adviser provides specialist safeguarding advice and guidance to churches and should be consulted whenever safeguarding concerns arise.

Name: Revd Canon Mark Spiers

Telephone: 07900 912754

Email: Safeguardingadviser@fcofe.org.uk

Thirtyone:eight

Thirtyone:eight is the UK's independent Christian safeguarding charity. This service should be used for **urgent safeguarding advice** only where the Denominational Safeguarding Adviser is unavailable.

24-hour safeguarding helpline: 0303 003 1111

Local Authority Designated Officer (LADO)

The LADO manages allegations and concerns about adults who work with children.

Name:

Telephone:

Email:

Statutory contact – Children

(Children's Social Care for your local authority, including out-of-hours contact)

Service name:

Telephone:

Email:

Statutory contact – Adults

(Adult Social Care for your local authority, including out-of-hours contact)

Service name:

Telephone:

Email:

Emergency Services: 999

Police (non-emergency): 101

STATEMENT OF ADOPTION

This safeguarding policy was adopted by the trustees of [Name of Church] on [date] and takes effect immediately.

Signed:

Role:

Date:

“Suffer the little children to come unto me,
and forbid them not” (Mark 10:14)



WHAT IS ABUSE AND NEGLECT OF CHILDREN?

The following definitions are taken from *Working Together to Safeguard Children* (Department for Education, 2026) and apply to England.

Abuse and neglect are forms of maltreatment of a child. A child may be abused or neglected by inflicting harm, or by failing to act to prevent harm. Harm can include physical, emotional and psychological ill-treatment, sexual abuse, neglect, and the impact of witnessing the ill-treatment of others, including domestic abuse.

Children may be abused in a family, institutional, community, or extra-familial context. Abuse can be perpetrated by adults or by other children. It may happen offline, online, or through a combination of both. Children may be abused by those known to them, or more rarely, by strangers.

Physical Abuse

Physical abuse is a form of abuse which may involve:

- hitting, shaking, throwing
- poisoning
- burning or scalding
- drowning
- suffocating
- or otherwise causing physical harm to a child.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child (previously known as fabricated or induced illness).

Physical abuse can occur within families, institutions, or in the community, and may also be linked to domestic abuse situations.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child such that it causes severe and persistent adverse effects on the child's emotional development.

It may involve:

- conveying to a child that they are worthless, unloved, inadequate, or valued only insofar as they meet the needs of another person
- not giving a child opportunities to express their views, deliberately silencing them, or making fun of what they say or how they communicate
- imposing age- or developmentally-inappropriate expectations
- overprotection, limiting exploration and learning, or preventing normal social interaction
- seeing, hearing, or experiencing the ill-treatment of another (including domestic abuse)

- serious bullying (including online or cyber bullying)
- exploitation or corruption of children.

Some level of emotional abuse is involved in all forms of maltreatment, although it may occur alone.

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening.

This may involve:

- physical contact, including assault by penetration (for example rape or oral sex)
- non-penetrative acts such as masturbation, kissing, rubbing or touching outside of clothing
- non-contact activities, such as involving a child in looking at or producing sexual images
- watching sexual activities
- encouraging children to behave in sexually inappropriate ways
- grooming, including grooming carried out online, to prepare a child for abuse.

Sexual abuse can be committed by men or women, and by other children, not only by adults. Technology may be used to facilitate sexual abuse both online and offline.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development.

Neglect may occur during pregnancy, for example as a result of maternal substance misuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inappropriate carers)
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. Neglect is often cumulative and may be harder to recognise than other forms of abuse, but its impact can be just as significant.

WHAT IS ABUSE OF ADULTS AT RISK?

Abuse is a violation of an individual's human and civil rights by another person or persons. Abuse may consist of a single act or repeated acts and can take many forms. It can be intentional or unintentional, including neglect or a failure to act.

An adult at risk may experience abuse in any setting, including within their own home, a place of worship, a care setting, or in the wider community. Abuse often occurs in the context of a relationship of trust, and may result in significant harm, distress, or exploitation.

An **adult at risk** is someone aged 18 or over who:

- has needs for care and support, and
- is experiencing, or at risk of, abuse or neglect, and
- as a result of those needs, is unable to protect themselves from harm or exploitation.

Physical Abuse

Physical abuse includes the infliction of pain or physical injury, either deliberately or through lack of appropriate care. This may include:

- hitting, slapping, pushing, shaking
- misuse of medication
- restraint or physical sanctions
- force-feeding or inappropriate control of physical movement.

Psychological or Emotional Abuse

Psychological or emotional abuse includes acts or behaviour that cause mental distress, fear, humiliation, or anguish, or that negate a person's wishes or autonomy.

This may include:

- threats, intimidation, coercion, or harassment
- verbal abuse, shouting, or blaming
- humiliation, ridicule, or infantilisation
- controlling behaviour or isolation from family, friends, faith, or community.

Sexual Abuse

Sexual abuse involves a person being forced, coerced, or exploited into sexual activity to which they have not consented, or cannot give valid consent.

This includes:

- rape or sexual assault
- non-consensual sexual touching or exposure
- sexual exploitation
- sexual activity where the perpetrator uses a position of trust, power, or authority to override or manipulate consent.

Neglect or Acts of Omission

Neglect is the failure to meet an adult's basic needs, whether deliberately or through oversight. It may include:

- failing to provide adequate food, drink, warmth, or hygiene
- failing to provide access to health or social care
- ignoring medical, emotional, or physical needs
- failing to intervene in situations that are dangerous to the person or to others.

Neglect can be cumulative and may result in significant harm or deterioration in wellbeing.

Financial or Material Abuse

Financial or material abuse includes the misuse, misappropriation, or theft of a person's money, property, benefits, or possessions. This may include:

- theft, fraud, or scams
- pressure in connection with wills, property, or financial transactions
- misuse of bank cards or accounts
- coercion or undue influence regarding finances.

Discriminatory Abuse

Discriminatory abuse occurs when an adult at risk is treated unfairly or harmed because of:

- age
- disability
- gender or gender identity
- race or ethnicity
- religion or belief
- sexual orientation
- cultural background.

Discriminatory abuse involves the misuse of power and can be linked to, or underpin, all other forms of abuse.

SIGNS OF POSSIBLE ABUSE IN CHILDREN

The following signs do not in themselves prove abuse but may indicate that a child is being harmed or is at risk. Abuse often presents through a combination of indicators, changes in behaviour, or patterns over time. Children may experience more than one type of abuse simultaneously.

Physical Abuse

Physical indicators may include:

- Unexplained injuries or injuries with inconsistent explanations
- Bruising in unusual areas (e.g. trunk, neck, upper arms, shoulders, ears, or thighs)
- Patterned injuries (e.g. marks resembling belts, cords, or household items such as irons)
- Burns or scalds, including cigarette burns
- Bite marks or grip marks
- Fractures, especially spiral fractures or repeated injuries
- Swelling, pain, or lack of normal use of limbs
- Serious injuries where there is delay in seeking medical help
- Untreated or poorly treated injuries.

Behavioural indicators may include:

- Fear of adults or flinching when approached
- Withdrawal from physical contact
- Aggression towards others
- Wearing long sleeves or covering clothing in hot weather
- Reluctance or fear of medical examination
- Being unusually compliant or eager to please.

Fabricated or Induced Illness (FII)

Fabricated or induced illness occurs when a parent or carer exaggerates, fabricates, or deliberately causes illness in a child in order to seek attention or medical intervention.

Possible indicators include:

- Frequent hospital visits with symptoms that are unexplained or inconsistent
- Symptoms that only occur in the presence of a particular caregiver
- Repeated medical tests with normal results
- A history of unexplained illness or failure to improve as expected.

Female Genital Mutilation (FGM)

FGM is a serious form of physical abuse and violence against girls and women and is illegal in the UK.

Possible indicators include:

- A girl talking about a planned "special procedure" or ceremony

- Extended holiday abroad to countries where FGM is practised
- Difficulty walking, sitting, or standing
- Pain or discomfort in the genital area
- Recurrent urinary infections
- Sudden withdrawal from activities or lessons.

FGM is a mandatory reporting duty for professionals where it is known to have been carried out on a girl under 18.

Emotional Abuse

Emotional abuse is often characterised by “low warmth, high criticism” parenting and persistent negative interactions.

Possible indicators include:

- Developmental delay (physical, emotional, or cognitive)
- Excessive fear of making mistakes or overreaction to perceived failure
- Constant self-criticism or low self-esteem
- Sudden speech disorders or regression
- Anxiety, depression, or withdrawal
- Neurotic behaviours (e.g. rocking, hair-twisting, thumb-sucking)
- Self-harm or suicidal thoughts
- Extremes of passivity or aggression
- Sleep problems or nightmares
- Overeating or loss of appetite
- Running away or substance misuse.

Neglect

Physical indicators may include:

- Poor personal hygiene
- Inappropriate or poorly maintained clothing
- Persistent hunger or dehydration
- Tiredness or lethargy
- Poor skin condition or hair quality
- Untreated medical or dental problems
- Failure to thrive without medical explanation.

Behavioural indicators may include:

- Frequent lateness or absence from school
- Constant tiredness or difficulty concentrating
- Low self-esteem
- Destructive or risk-taking behaviour
- Lack of social relationships
- Compulsive stealing or scavenging for food
- Frequent accidents or untreated injuries
- Running away from home.

Sexual Abuse

Physical indicators may include:

- Soreness, pain, or injury to the genital, anal, or oral areas

- Sexually transmitted infections
- Pregnancy (especially in younger children)
- Recurrent unexplained abdominal pain or urinary tract infections
- Sudden changes in weight
- Unexplained gifts, money, or possessions.

Behavioural and emotional indicators may include:

- Sexual knowledge or behaviour inappropriate for the child's age
- Sexualised play or language in younger children
- Withdrawal, anxiety, or depression
- Sudden changes in personality
- Loss of trust in adults
- Difficulties concentrating or changes in school performance
- Regressive behaviours (e.g. bedwetting)
- Self-harm, eating disorders, or suicidal thoughts.

**“You may choose to look
the other way but you can never say
again that you did not know”.**
(William Wilberforce)



SIGNS OF POSSIBLE ABUSE IN ADULTS

The following indicators do not in themselves prove abuse, but may suggest that an adult with care and support needs is being harmed or is at risk. Abuse may be indicated by a pattern of signs, changes in behaviour, or concerns raised by the individual or others. Adults may experience more than one form of abuse at the same time.

Physical Abuse

Possible indicators include:

- A history of unexplained falls, fractures, bruises, burns, or minor injuries
- Injuries at different stages of healing
- Delay in seeking medical treatment
- Signs of under-use or over-use of medication
- Medical needs not being met or conditions left untreated
- Physical restraint marks or signs of rough handling.

Psychological or Emotional Abuse

Possible indicators include:

- Changes in psychological state, such as withdrawal, anxiety, agitation, or tearfulness
- Low mood, depression, or loss of confidence
- Being intimidated, silenced, or subdued in the presence of a carer or another person
- Fear of making choices or expressing wishes
- Increased confusion where this is not related to a medical condition
- Unexplained paranoia or heightened fearfulness.

Sexual Abuse

Possible indicators include:

- Pregnancy in a woman who is unable to give informed consent
- Unexplained changes in behaviour or sexualised behaviour
- Torn, stained, or bloody clothing or underwear
- Unexplained difficulty walking or sitting
- Recurrent genital infections or sexually transmitted infections
- Disclosure, partial disclosure, or hints of sexual abuse
- Self-harm, distress, or marked behavioural changes following contact with a particular person.

Neglect or Acts of Omission

Possible indicators include:

- Malnutrition, dehydration, unexplained weight loss, or persistent hunger
- Poor physical condition, poor personal hygiene, pressure sores, or ulcers
- Being left in soiled clothing or bedding
- Living in unsafe or unhygienic conditions
- Failure to access appropriate health, social care, or support services

- Social isolation, including a lack of visitors or contact with others.

Financial or Material Abuse

Possible indicators include:

- Discrepancy between income, assets, and living conditions
- Unexplained withdrawals from bank accounts or disappearance of financial documents
- Sudden inability to pay bills or meet basic expenses
- Pressure to change wills, deeds, or financial arrangements
- Carers or others failing to account for money spent on the person's behalf
- The person expressing confusion or anxiety about their finances.

Discriminatory Abuse

Possible indicators include:

- Inappropriate remarks, harassment, or dismissive language
- Lack of respect for cultural, religious, or personal needs
- Unequal or poor-quality care linked to age, disability, race, religion, gender, or sexuality
- Exclusion from activities or services without justification.

Institutional or Organisational Abuse

Possible indicators include:

- Rigid routines with little flexibility or choice (e.g. meals, bedtimes, visitors)
- Inadequate medical care or misuse of medication
- Inappropriate or excessive use of restraint
- Sensory deprivation, such as denial of glasses, hearing aids, or communication tools
- Missing records or absence of personalised care plans
- Public discussion of private matters
- Limited opportunities for social, spiritual, educational, or recreational activity.



**ALERT YOUR SAFEGUARDING OFFICER IF YOU THINK
SOMETHING MAY BE WRONG**