



## **SAFEGUARDING POLICY 18+**

**September 2022**  
**(Next update September 2023)**

## Safeguarding Statement

SupaJam is a post-16 specialist provider, specialising in Music, Maths, English and Life Skills. All staff, volunteers and partners are committed to safeguarding the welfare of every person within SupaJam. Our mission is to help young people to engage and achieve within a safe and inclusive environment.

### 1. Key legislation and statutory policy/guidance reading list

- The Care Act 2014
- Care & Support Statutory Guidance (updated October 2018) - <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#safeguarding-1>
- Disability Discrimination Act 1995 / Equality Act 2010
- Human Rights Act 1998

### 2. Purpose and aims of this policy

2.1 - The purpose of this document is to assist all staff, volunteers, and partners to safeguard and protect learners over the age of 18 who are at risk of abuse or neglect and promote their well-being. This policy also reflects the requirements of the government publication 'Care and Support Statutory Guidance (October 2018)'

2.2 - This policy sets out to promote the principles of the Care Act 2014 in safeguarding and providing support to our vulnerable adult learners with and without learning difficulties/disabilities.

2.3- We will aim to safeguard adults by:

- Adopting adult protection guidelines through procedures for staff, volunteers, governors and partners.
- Sharing information about adult protection and good practice with young people/ adults, parents and carers, staff and volunteers.
- Sharing information about concerns with agencies who need to know, and involving adult learners appropriately.

- Carefully following the 'safer recruitment' procedures for recruitment and selection of staff and volunteers.
- Providing effective management for staff and volunteers through support, supervision and training

2.4 We are committed to reviewing our policy and good practice.

### 3. Principles of The Care Act 2014

3.1 – The Care Act 2014 sets out six principles which aim to promote a person-centred approach to vulnerable adults' support and wellbeing. These six principles are;

1. Empowerment - supporting vulnerable adults so they can confidently make their own decisions and give informed consent regarding their care, education and future career/choices about the next stage in their life
2. Protection – support adults in recognising when they may be subject of abuse and when to come for help as well as knowing how to refer to the appropriate authorities
3. Prevention – spotting signs and symptoms early but also preventing any long lasting psychological damage following abuse
4. Proportionality – utilising preventative measures or responses to a safeguarding issue in the most unobtrusive way possible and treating someone as an individual. Taking steps which is proportionate to the issue without applying a 'blanket policy'
5. Partnership – working with partner agencies to support and protect vulnerable adults as well as the individual
6. Accountability – being transparent and open with individuals about what we do and keep them up to date with any actions/outcomes. Consent must be given by the individual prior to any information being submitted.

3.2 – Sections 42 through 47 of the Care Act 2014 outline statutory responsibilities for reporting safeguarding concerns.

### 4. Commitment to safeguarding in SupaJam Education in Music & Media

4.1. SupaJam Education in Music & Media (SupaJam) is committed to providing all of its staff and students with a safe and enjoyable experience and the welfare of everyone is paramount. The Senior Leadership Team (SLT) will lead the example in creating a culture of vigilance in safeguarding.

4.2. The role of the Designated Safeguarding Leads is to be responsible for leading and championing good safeguarding practices and being the first point of contact for staff who have concerns about our learners. The DSL will usually be responsible for making referrals for any safeguarding concern – however, this does not mean that staff should not be able to take any action themselves. The Designated Safeguarding Leads (DSLs) will be contactable at all times of the working day either in person or via telephone to be able to provide support or guidance to all members of staff with any safeguarding concerns.

4.3. The DSLs will promote a culture of openness and being approachable so that everyone is able to speak openly about safeguarding concerns with confidence that they are being listened to. Regular safeguarding update meetings will occur to keep key members of staff

up to date with any developments. Only need-to know information will be shared with staff members at regular team meetings.

- 4.4. All students will be involved in learning and understanding safeguarding through appropriate sessions, such as small group discussions, as well as providing reactive support, with our Behaviour Support Manager and guidance following any safeguarding incident.
- 4.5. It is also extremely important to recognise that SupaJam supports students are aged 16- 25 and therefore adults are studying and socialising with children, as defined by law. SupaJam staff must therefore recognise signs where inappropriate friendships or relationships may develop and manage those situations effectively, maintaining high levels of communication with the Director of Safeguarding and DSLs.

## 5. Significant harm and abuse – signs & symptoms

- 5.1. **Significant harm** - There is no absolute criteria on which to rely when judging what constitutes significant harm. Consideration of the severity of ill-treatment may include the degree and the extent of physical harm, the duration and frequency of abuse and neglect, the extent of premeditation, and the presence or degree of threat, coercion, sadism, and bizarre or unusual elements.
- 5.2. In principle, safeguarding adults requires the same vigilance and intervention as safeguarding children and young people. Adults are also subject to physical, emotional and sexual abuse and neglect but are further at risk from other types of abuse.
- 5.3. It is acknowledged that an adult can be abused, harmed or neglected in a family, institution or community setting by someone known to them, or less commonly, by a stranger, this includes someone in a position of trust such as a teacher or other professional.
- 5.4. It is everyone's responsibility to be vigilant and report signs and symptoms of adult abuse. Staff should use the CPOMS system to report any concerns or incidents to the DSL or, if it is thought to be an emergency, staff should find a DSL or senior manager to report the concern directly to them.
- 5.5. **Types of abuse and signs/symptoms** – Please see Appendix A at the end of this document which outlines the different categories as well as some of the signs and symptoms.

## 6. Responding to Disclosures or Allegations

- 6.1 It is important that students trust all staff to be able to communicate with them and be able to make allegations/disclosures with the confidence that they will be listened to. When responding to any allegation or disclosure, all staff will;
  - Stay calm, listen carefully to what is being said
  - Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others - do not promise to keep secrets
  - Allow the student to continue at their own pace
  - Ask questions for clarification only, and at all times avoid asking leading questions.
  - Reassure the student that they have done the right thing in telling you.

- Tell them what you will do next and with whom the information will be shared
  - Record in writing what was said using the young person’s own words as soon as possible, note the date, time, location, any names mentioned, to whom the information was given and ensure that the record is signed and dated .
- 6.2. Some students with special educational needs (SEN) may require a different approach from others e.g. in the way their physical/mental health condition might mask possible abuse. Particular attention may have to be given to adults with SEN who may have speech/language impairments or difficulties as these can make communication difficult. Members of staff talking with these students should seek guidance from the college Designated Safeguarding Lead(s) who will advise as to how the matter should be discussed.
- 6.3. After an adult has disclosed abuse, the Designated Safeguarding Lead should carefully consider whether or not it is safe for the adult to return home to a potentially abusive situation. The DSL will assess the risk of harm and make the decision to either;
- Monitor the situation, collating evidence through the CPOMS system that may be needed in a later investigation.
  - Refer the vulnerable adult to Adult Services within the relevant local authority. If in doubt, a consultation with Kent County Council’s Adult Social Care Team should be completed by contacting 03000 416161 or emailing [social.services@kent.gov.uk](mailto:social.services@kent.gov.uk).
  - Call 999 in the event of an immediate risk of harm to the vulnerable adult.

Appendix A – Signs & Symptoms of Abuse

Physical Abuse	<p>Physical abuse may take many forms e.g. hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a young person.</p> <p>It may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a young person. This unusual and potentially dangerous form of abuse is now described as fabricated or induced illness in a young person.</p>	<p>Unexplained and so called “accidental” injuries, burns or bruising</p> <p>Improbable excuses or refusal to explain injuries</p> <p>Refusal to undress for physical activities</p> <p>Self-destructive tendencies</p> <p>Aggression towards others</p> <p>Fear of physical contact - shrinking back if touched</p> <p>Admitting that they are punished, but the punishment is excessive</p> <p>Fear of suspected abuser being contacted</p>
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<p>Emotional/ Psychological abuse</p>	<p>Emotional abuse is the persistent emotional ill treatment of a young person such as to cause severe and persistent effects on the young person's emotional development, and may involve:</p> <ul style="list-style-type: none"> <li>• Conveying to young people that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person</li> <li>• Imposing developmentally inappropriate expectations</li> <li>• Causing young people to feel frightened or in danger - e.g. witnessing domestic violence</li> <li>• Exploitation or corruption of young people</li> </ul>	<p>Physical, mental and emotional development delays</p> <p>Sudden speech disorders</p> <p>Continual self-depreciation ('I'm stupid, ugly, worthless, etc')</p> <p>Overreaction to mistakes</p> <p>Extreme fear of any new situation</p> <p>Inappropriate response to pain ('I deserve this')</p> <p>Unusual attention seeking behaviour</p> <p>Extremes of passivity or aggression</p>
<p>Sexual abuse</p>	<p>Sexual abuse involves forcing or enticing a young person to take part in sexual activities, whether or not the young person is aware of what is happening and includes penetrative (i.e. vaginal or anal rape or buggery) and non-penetrative acts.</p>	<p>Being overly affectionate or knowledgeable in a sexual way inappropriate to the young person's age</p> <p>Itchy or pain in the genital area</p> <p>Other extreme reactions, such as depression, self-mutilation, suicide</p>

<p>It may also include non-contact activities, such as involving young people in looking at, or in the production of pornographic materials, watching sexual activities or encouraging young people to behave in sexually inappropriate ways.</p>	<p>attempts, running away, overdoses, anorexia</p> <p>Personality changes such as becoming insecure or clinging</p> <p>Being isolated or withdrawn</p> <p>Inability to concentrate</p> <p>Become worried about clothing being removed</p> <p>Suddenly drawing sexually explicit pictures</p> <p>Trying to be 'ultra-good' or perfect; overreacting to criticism</p>
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Neglect	<p>Neglect involves the persistent failure to meet a young person's basic physical and/or psychological needs, likely to result in the serious impairment of the young person's health and development.</p> <p>This may involve failure to provide adequate food, shelter or clothing, failure to protect from physical harm or danger or failure to ensure access to appropriate medical/physical care or treatment e.g. correct maintenance of wheelchairs, use of body braces etc. Supply of medication needed according to care plans. It may also include neglect of a young person's basic emotional needs.</p>	<p>Constant hunger          Poor personal hygiene          Constant tiredness          Poor state of clothing          Emaciation          Untreated medical problems          No social relationships          Compulsive scavenging          Destructive tendencies          Stealing food/money          Poor college attendance          Compulsive attention seeking</p>
Modern Slavery and human trafficking.	<p>Human trafficking and modern slavery involves men, women and children being brought into a situation of exploitation through the use of violence, deception or coercion and made to work against their will.</p>	<p>Student missing from education          Involved in Criminal Activity          Sexually exploited          Domestic servitude          Forced labour</p>
Financial Abuse	<p>Includes theft, fraud, exploitation, coercion in relation to an adults financial affairs or arrangements, including in connection with Wills, property, inheritance or financial transactions</p>	<p>Inability to get to college due to lack of finances          Coming to college without lunch or money to buy lunch.          Extreme hunger or possessiveness of food          Stealing food/money</p>

	<p>Poor self esteem</p>
Discriminatory Abuse	<p>Poor self esteem          Poor identity formation</p> <p>This includes discrimination on the grounds of race, gender &amp; gender identity, disability, sexual orientation, religion, and other forms of harrassment, slurs or similar treatment.</p>

<p>Female Genital Mutilation</p> <p>FGM comprises all procedures involving partial or total removal of the external female genital organs or other injury to the female genital organs for non medical reasons.</p>	<p>A female talking about going to have a special procedure</p> <p>Being taken out of the country for a prolonged time to her country of origin</p> <p>Difficulty walking, sitting or standing</p> <p>Spending longer than normal in the toilets due to difficulties urinating</p> <p>Soreness or infection of the area</p> <p>Unusual mental problems</p> <p>Withdrawn or depressed</p> <p>Reluctant to undergo medical examination</p>
<p>Domestic Abuse</p> <p>This includes physical harm to a partner or ex partner, but also any acts of intimidation or threatening behaviour, putting the person down or undermining their self esteem, controlling behaviour including control of their contact with others, where they go and what they wear.</p>	<p>Bruises or injuries that can not be explained</p> <p>Fear of being late home or going home</p> <p>Social isolation</p> <p>Poor college attendance</p>

## **Designated Safeguarding Leads for SupaJam**

### **Swanley Base:**

1. Jules Abrams - Designated Safeguarding Lead & Designated LAC/PLAC
2. Riannan Martin - Deputy Designated Safeguarding Lead

### **Canterbury Base:**

1. Lindsay Green - Designated Safeguarding Lead
2. Rachel Maigrot - Deputy Designated Safeguarding Lead

### **Brighton Base**

1. Chelsea Evans - Designated Safeguarding Lead