

ChristChurch

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A New Frontiers Church and members of the Evangelical Alliance.

Charity Number: 1118740

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Section 1: Introduction and Intent:

ChristChurch has an open congregation; our Sunday services are open to the public.' We are therefore aware that 'adults at risk' are likely to form part of our congregation and our practices should reflect this with regards to safeguarding.

ChristChurch run a number of church-based groups and activities, including but not limited to:

- Life groups (small group fellowship held in people's homes)
- The Hub, a lunch group primarily but not exclusively attended by older people
- Global Café
- Chess Club
- Aspire
- The Call
- Alpha

More formal services offered by the church which are open to the public are:

- Keys Community Detox
- Community Money Advice
- Pregnancy Care
- ChristChurch also works in partnership with the local Food Bank (Trussell Trust)

Other church-based activity which requires consideration with regards to safeguarding adults at risk are:

- Pastoral care
- Pastoral Home Visits
- Individual ministry and prayer
- Community Outreach

Areas of Leadership requiring those involved to have DBS checks are:

- All church Elders
- Managers / leaders of formal projects offered to the public (listed above)
- Frontline volunteers of formal projects who are likely to work directly with adults at risk
- Leaders of Pastoral Care Team

Volunteers supporting and serving in church activities that are open to the congregation and / or the public are all conducted in groups and are not 1:1 activity, won't require the volunteers who are helping the groups run to be DBS checked but will be required to work to our "Keeping people safe" guidelines.

All areas of church life have been considered with regard to safeguarding Adults at Risk and a "Keeping People Safe" guide had been produced to ensure anyone involved in running our groups work to consistent and safe practices and are aware of our safeguarding practice and reporting systems.

Our commitment

The church leaders recognise the need to provide a safe and caring environment for children, young people and adults. We acknowledge that children, young people and adults can be the

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victims of physical, sexual and emotional abuse, and neglect. We accept the UN Universal Declaration of Human Rights and the International Covenant of Human Rights, which states that everyone is entitled to “all the rights and freedoms set forth therein, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status. As a Leadership we have therefore adopted the procedures set out in this safeguarding policy in accordance with statutory guidance. We are committed to building constructive links with statutory and voluntary agencies involved in safeguarding. We seek to protect vulnerable adults that ay access services provided by the church.

The Care Act 2014 explains that safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs)
- is experiencing, or at risk of, abuse or neglect
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

The Care Act statutory guidance defines care and support needs as follows: “The adult’s needs arise from or are related to a physical or mental impairment or illness. Local authorities must consider at this stage if the adult has a condition as a result of either physical, mental, sensory, learning or cognitive disabilities or illnesses, substance misuse or brain injury, a formal diagnosis of the condition should not be required”.

Safeguarding means 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.

An adult with care and support needs who may be at risk may be:

- An elderly person;
- A person with a physical disability, a learning difficulty or a sensory impairment;
- Someone with mental health needs, including dementia or a personality disorder;
- A person with a long-term health condition; or
- Someone who misuses substances or alcohol to the extent that it affects their ability to manage day-to-day living.

The Leadership undertakes to:

- endorse and follow all national and local safeguarding legislation and procedures, working co-operatively with local authorities where necessary.
- provide on-going safeguarding training for all its workers and will regularly review the operational guidelines attached.
- ensure that the premises meet the requirements of the Equality Act 2010 and all other relevant legislation, and that it is welcoming and inclusive.
- support the Safeguarding Coordinator(s) in their work and in any action they may need to take in order to protect children and vulnerable adults.
- Provide respectful pastoral ministry to all, recognising any power imbalance within such a relationship. Expect those involved in pastoral work to adhere to our good practice guide (Appendix 2).

- Safeguard all adults who may be at risk of abuse or neglect, ensuring their wellbeing in the life of the church.
- Equip church workers and members to be alert to the abuse of adults and aware of their duty report any suspected abuse or neglect.
- Promote safe practice by those in positions of trust.
- Recruit with care all church workers involved in any pastoral role and using of the Disclosure and Barring Service when appropriate (e.g. those with leadership roles).
- Comply with the principles of the Mental Capacity Act 2005 and the Care Act 2014 when it may be appropriate (see Appendix I).
- Support anyone who has suffered abuse by offering or arranging sensitive and informed pastoral care, including support to make a complaint if so desired.
- Recognise the personal dignity and rights of adults and will ensure all our policies and procedures and practice reflect this.
- Believe all adults should enjoy and have access to every aspect of the life of this place of worship
- We will keep up to date with national and local developments relating to safeguarding. We will follow statutory, denominational and specialist guidelines in relation to safeguarding adults and we will strive to ensure that all workers will work within the agreed procedure of our safeguarding policy.

Recruitment:

ChristChurch operates a safer recruitment practice ensuring that all employed staff:

- Receive an equal opportunities interview
- Provide two suitable references
- DBS checked
- Complete safeguarding awareness training
- Sign up to and agreed to working in accordance with our Keeping People Safe guidelines
- Are suitably trained, equipped and supported and supervised in their roles

Volunteers and staff working within our formal projects are also recruited according to this process.

Other volunteers who may get involved informally, from time to time in serving or supporting others are:

- Members of the church.
- Recommended by church leadership and are known to be of good character.
- Agree to working in accordance with our Good practice guidelines.
- Are suitably supported, equipped and supervised in their roles.

Section 2: Signs and Symptoms

Recognising and responding appropriately to an allegation or suspicion of abuse

Understanding abuse and neglect

Statutory Definitions of Abuse (Adults)

The following definition of abuse is laid down in 'No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse (Department of Health 2000):

'Abuse is a violation of an individual's human and civil rights by any other person or persons. In giving substance to that statement, however, consideration needs to be given to a number of factors:

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consent or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it'.

| Types of abuse | Signs |
|---|--|
| <p>Physical Abuse This is the infliction of pain or physical injury, which is either caused deliberately, or through lack of care. This includes: assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions</p> | <ul style="list-style-type: none">• A history of unexplained falls, fractures, bruises, burns, minor injuries• Signs of under or over use of medication and/or medical problems unattended |
| <p>Sexual Abuse This is the involvement in sexual activities to which the person has not consented or does not truly comprehend and so cannot give informed consent, or where the other party is in a position of trust, power or authority and uses this to override or overcome lack of consent. This includes: rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts.</p> | <ul style="list-style-type: none">• Pregnancy in a woman who is unable to consent to sexual intercourse• Unexplained change in behaviour or sexually implicit/explicit behaviour• Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting• Infections or sexually transmitted diseases• Full or partial disclosure or hints of sexual abuse• Self-harming |

| | |
|---|--|
| <p>Psychological or Emotional Abuse These are acts or behaviour, which cause mental distress or anguish or negates the wishes of the vulnerable adult. It is also behaviour that has a harmful effect on the vulnerable adult’s emotional health and development or any other form of mental cruelty. This includes: emotional abuse, 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;</p> | <ul style="list-style-type: none"> • Alteration in psychological state e.g. withdrawn, agitated, anxious, tearful • Intimidated or subdued in the presence of the carer • Fearful, flinching or frightened of making choices or expressing wishes • Unexplained paranoia |
| <p>Domestic violence: including psychological, physical, sexual, financial, emotional abuse; so called ‘honour’ based violence</p> | |
| <p>Financial or Material Abuse This is the inappropriate use, misappropriation, embezzlement or theft of money, property or possessions. This includes: theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits;</p> | <ul style="list-style-type: none"> • Disparity between assets and living conditions • Unexplained withdrawals from accounts or disappearance of financial documents • Sudden inability to pay bills • Carers or professionals fail to account for expenses incurred on a person’s behalf • Recent changes of deeds or title to property |
| <p>Modern Slavery: encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers 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</p> | |
| <p>Neglect/Self Neglect This is 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. A vulnerable person may be suffering from neglect when their general well-being or development is impaired. – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate</p> | <ul style="list-style-type: none"> • Malnutrition, weight loss and /or persistent hunger • Poor physical condition, poor hygiene, varicose ulcers, pressure sores • Being left in wet clothing or bedding and/or clothing in a poor condition |

| | |
|--|--|
| <p>health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating;</p> | <ul style="list-style-type: none"> • Failure to access appropriate health, educational services or social care • No callers or visitors |
| <p>Discriminatory Abuse This is the inappropriate treatment of a vulnerable adult because of their age, gender, race, religion, cultural background, sexuality, disability etc. Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies opportunity to some groups or individuals. Discriminatory abuse links to all other forms of abuse. – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion;</p> | <ul style="list-style-type: none"> • Inappropriate remarks, comments or lack of respect |
| <p>Organisational Abuse This is the mistreatment or abuse of a vulnerable adult by a regime or individuals within an institution (e.g. hospital or care home) or in the community. It can be through repeated acts of poor or inadequate care and neglect or poor professional practice.</p> | <ul style="list-style-type: none"> • Lack of flexibility or choice over meals, bed times, visitors, phone calls etc • Inadequate medical care and misuse of medication • Inappropriate use of restraint • Sensory deprivation e.g. denial of use of spectacles or hearing aids • Missing documents and/or absence of individual care plans • Public discussion of private matter • Lack of opportunity for social, educational or recreational activity |
| <p>Spiritual Abuse: The church should also be aware that spiritual abuse may occur within and outside faith communities and can arise from the inappropriate use of religious belief or practice; the misuse of authority; intrusive healing and deliverance ministries; and the denial of the right of faith or the opportunity to grow in the love of God. The provision of inclusive acts of worship will provide for the spiritual growth and wellbeing of adults with special needs</p> | |

Section 3: Handling a Concern:

- All reports or suspicions of abuse or neglect must be discussed with the safeguarding co-ordinator or the deputy at the earliest opportunity.
- It is important to gain consent from the alleged victim before raising an alert. Capacity to consent must always be assumed (Mental Capacity Act 2007). If there are reasonable grounds to override consent, such as risk to others, a referral (alert) will be made to Adult Social Care. If the individual experiencing abuse does not have capacity to consent a referral will be made without that person's consent, in their best interests. Where there is any uncertainty with regard to individual's capacity to consent, advice must be sought from Adult Social Care about capacity before information is disclosed.
- Adults may find it difficult to disclose abuse and need support to tell their story. They should be listened to without leading questions or suggestions that may influence or confuse the story. The listener should not show shock or judgment.
- If the person fulfils the criteria for being an adult at risk of abuse or neglect, or if they express suicidal thoughts, they should be informed that the information will have to be passed on as part of our duty of care, preferably with their consent (unless they lack the capacity to give this).
- Careful notes must be kept, recording factual information and direct quotes where possible. Notes should be signed and dated and kept securely. A concern form is available to assist with recording.
- If the person is at immediate risk of harm or danger, the police and/or East Sussex Adult Safeguarding board must be contacted. The Safeguarding Coordinator or, in their absence the deputy, should be informed as soon as possible.
- If the person is not at immediate risk, the Safeguarding Coordinator or deputy should be informed in the first instance. They will decide whether the concern needs to be referred to the local safeguarding board. If a criminal offence has occurred the police will be informed.
- Pastoral care and support will be offered to the person who has disclosed the abuse or is at risk of abuse and neglect. All people within the church who work with adults who may be at risk of abuse or neglect will agree to read and abide by these recommendations and the guidelines established by this church.
- If someone discloses thoughts of suicide it is important to take them seriously. See appendix 3 for notes on how to respond.

RESPONDING TO ALLEGATIONS OF ABUSE

Under no circumstances should a worker carry out their own investigation into an allegation or suspicion of abuse. Following procedures as below:

- All concerns should be recorded on the Concern Form located in the labelled holder on the wall in the office. These should be recorded as soon as possible after the event and include as much information as possible. Write down the actual words used in the conversation if possible, rather than paraphrasing. Please do not discuss the concern with anyone else other than the safeguarding officer or deputy.
- The person in receipt of allegations or suspicions of abuse should report concerns as soon as possible to Andrew Tardif (hereafter Adult Safeguarding Co-ordinator tel no: 07923 856495) or Eloise Reah (hereafter the "deputy Safeguarding Co-ordinator for adults") tel no: 07967 818741 who are nominated by the Leadership to act on their behalf in dealing with the allegation or suspicion of neglect or abuse, including referring the matter on to the statutory authorities. Concerns can also be emailed to safeguarding@christchurchhailsham.org

- If the concern is about the safeguarding co-ordinator or the individual raising the concern does not feel they can discuss it with the safeguarding co-ordinator, deputy, leadership team or church trustees, then the issue can be raised directly with Adult Social Care.
- Adult Social Care will decide whether what safeguarding process will be instigated and they will lead the process as per the East Sussex Multi Agency Safeguarding Policy and Procedures. The safeguarding co-ordinator will keep the individual who experienced abuse informed of the next stages and offer appropriate support and information to the individual. The safeguarding co-ordinator will help the process where required by Adult Social Care or the Police.
- ChristChurch safeguarding co-ordinator and leaders will ensure that any allegations made against members or member of staff will be dealt with swiftly and without delay.
- Where a member of staff/volunteer is thought to have committed a criminal offence the police will be informed. If a crime has been witnessed the police should be contacted immediately.
- The safety of the individual who has experienced abuse is paramount. A risk assessment must be undertaken immediately to assess the level of risk to (all individuals) posed by the alleged perpetrator. This will include whether it is safe for them to continue in their role or any other role within the church whilst the investigation is undertaken.
- The safeguarding co-ordinator will liaise with Adult Social Care and other agencies involved (such as the police) to discuss the best course of action and to ensure that the actions taken by ChristChurch are co-ordinated and consistent with the enquiries taking place and the outcomes of the enquiries. Where relevant this will include liaising with thirtyone:eight and the charity commission.

Contact adult social care: 0345 60 80 191, 8am to 8pm 7 days a week. If your call is out of hours ring the same number and select option 2 for the emergency contact.

The Police telephone number is 999 in an emergency and 101 for non-emergency calls.

- The Safeguarding Co-ordinator **may** need to inform others depending on the circumstances and/or nature of the concern (for example the Chair of Trustees to log that a safeguarding concern is being dealt with, Insurance company to log that there is a possibility of a serious incident concerning safeguarding or a Designated Officer (LADO) if allegations have been made about a person who has a role with under 18's).
- Whilst allegations or suspicions of abuse will normally be reported to the Safeguarding Co-ordinator, the absence of the Safeguarding Co-ordinator or Deputy should not delay referral to Social Services, the Police or taking advice from thirtyone:eight.
- The Leadership will support the Safeguarding Co-ordinator/Deputy in their role and accept that any information they may have in their possession will be shared in a strictly limited way on a need to know basis.
- It is, of course, the right of any individual as a citizen to make a direct referral to the safeguarding agencies or seek advice from thirtyone:eight, although the Leadership hope that members of the place of worship / organisation will use this procedure. If, however, the individual with the concern feels that the Safeguarding Co-ordinator/Deputy has not responded appropriately, or where they have a disagreement with the Safeguarding Co-ordinator(s) as to the appropriateness of a referral they are free to contact an outside agency direct. We hope by making this statement that the Leadership demonstrate its commitment to effective safeguarding and the protection of all those who are vulnerable.

- The Leadership will also ensure that children and adults with care and support needs are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.

Data Protection

All confidential information shared and stored with regard to any safeguarding issue and our safer recruitment practice, will be undertaken in line with ChristChurch's data protection policy and procedures and will be overseen by the Data-Controller. Details about recording and storage of confidential information in relation to safeguarding adults at risks can be found in the Keeping people safe guidance

The role of the safeguarding co-ordinator/ deputy is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies who have a legal duty to investigate.

Reporting a 'Serious Incident' to the Charity Commission

Under Charity Commission regulations a Serious Incident occurs where a result has, or could, entail '...a significant loss of funds or a significant risk to the charity's property, work, beneficiaries or reputation. They should be reported as soon as possible.

As far as allegations of abuse are concerned Charity Commission guidance states:

'You (the place of worship or organisation) should report this if any one or more of the following occur:

- There has been an incident where the beneficiaries of your charity have been or are being abused or mistreated while under the care of your charity or by someone connected with your charity such as a trustee, member of staff or volunteer.
- There has been an incident where someone has been abused or mistreated and this is connected with the activities of the charity.
- Allegations have been made that such an incident may have happened regardless of when the alleged abuse or mistreatment took place.
- You have grounds to suspect that such an incident may have occurred.

The Charity Commission states that these are 'zero tolerance' issues which would always be investigated by them. Serious incidents also include not having adequate safeguarding policies in place and failure to carry out Disclosure checks on workers and trustees (where legally possible); in summary, anything that could affect the good reputation of the charity.

Those charities whose incomes exceed £25,000 must declare all Serious Incidents as part of their Annual Returns. Failure in the latter respect also signifies failure regarding the charity's legal obligations. Charities can make a report in the following ways:

- Writing to Charity Commission Direct, P O Box 1227, Liverpool L69 3UG
- Telephoning 0845 300 0218
- E-mailing RSI@charitycommission.gsi.gov.uk

Complex Issues.

Due to church being 'open to all', we are aware we may be faced with the complexities of having people in our congregation who may have an offending background and may pose a risk to others, particularly children or adults at risk.

We recognise that these risks need to be managed in order to maintain a safe environment. We take the following approach:

1. Known offenders who present a potential risk to 'at risk groups':

For example: Risk assessment approach, supervision and support. Not allocated responsibilities for roles that require DBS checks with at risk groups. Adhering to any restrictions imposed by DBS or Sex Offenders Registers or Non molestation orders where known.

Our Keeping people safe guidelines and our safer recruiting process is designed to ensure that our general practices safeguard adults at risk and will help highlight predatory behaviours or those failing to adhere to our codes of behaviours. We foster a culture of safeguarding awareness and safe practice and encourage people to raise concerns if they witness any behaviours that conflict with our guidelines.

2. Disclosures or confessions from a perpetrator of recent or past offending behaviours which have not yet been dealt with or previously disclosed.
3. Disclosures from adults at risk of historic abuse (including abuse occurring at church).

We will follow our process as with any other disclosure of abuse. Involving the adult at risk in consenting to reporting it on to Adult Social Care and should they consent and where a crime was committed, the Police. Offering involvement, support and care throughout the process.

APPENDIX I

STATUTORY PRINCIPLES FOR SAFEGUARDING ADULTS

The Care Act 2014

The Care Act is the first piece of legislation that puts Adult Safeguarding on a statutory basis. It came into force on 1 April 2015. Its key principles are:

- Empowerment – people being supported and encouraged to make their own decision and informed consent.
- Prevention – it is better to take action before harm occurs.
- Proportionality – the least intrusive response appropriate to the risk presented.
- Protection – support and representation for those in greatest need.
- Partnership – local solutions through services working with their communities.
- Communities (including the church) have a part to play in preventing, detecting and reporting neglect and abuse.
- Accountability – accountability and transparency in delivering safeguarding.

The Mental Capacity Act 2005

Some adults within the church or served by the church may have “an impairment of the mind or brain, or a disturbance affecting the way their mind or brain works”. If this means that the person is unable to make a decision at the time it needs to be made, they may be said to lack the mental capacity to do so. It must not be assumed that someone lacks mental capacity on the basis of their age, appearance, condition or an aspect of their behaviour. The five key principles of the Mental Capacity Act are:

1. A presumption of capacity: Every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise. We cannot assume that someone cannot make a decision for themselves just because they have a particular medical condition or disability.
2. Individuals being supported to make their own decisions: Every effort must be made to encourage and support people to make the decision for themselves.
3. Unwise decisions: People have the right to make what others might regard as an unwise or eccentric decision. We cannot treat them as lacking capacity for that reason.
4. Best interests: Any action taken, or any decision made for, or on behalf of that person, must be made in his or her best interests.
5. Least restrictive option: Any decisions made on behalf of the person must act in a way that would interfere less with the person’s rights and freedoms of action, or whether there is a need to decide or act at all.

Appendix 2:

Good Practice in Pastoral Care:

Not everyone who receives pastoral care is defined as a vulnerable adult. However, all those involved in pastoral care of others, whether paid or unpaid, in a leadership role or not, should be working within these guidelines. Following such guidelines will not only protect vulnerable people but also help to ensure that workers are not wrongly accused of abuse or misconduct.

Pastoral relationships:

Exercising any kind of ministry involves workers developing an understanding of themselves and how they relate to others, how they increase the wellbeing of others and how they ensure the wellbeing and safety of themselves and others. People in positions of trust necessarily have power, although this may not be apparent to them; therefore respecting boundaries is particularly important. Many pastoral relationships can become intertwined with friendships and social contacts, making the following guidance even more necessary. Church workers should not generally minister to people with whom they have a close personal friendship or family relationship. Church workers must be aware of the dangers of dependency in pastoral and professional relationships and seek advice or supervision when these concerns arise. Church workers who exercise a 'healing ministry' should be trained in the theology and non-intrusive practice of that work. Church workers should recognise their limits and not undertake any ministry that is beyond their competence or role (e.g. therapeutic counselling, deliverance ministry, counselling victims of abuse and domestic violence, or their perpetrators, or giving legal or financial advice). In such instances the person should be referred to another person or agency with appropriate expertise.

Church workers should consider issues of ethnicity and gender in their ministry. Generally ministry needs to be conducted with another church worker or person, and one should be of the same gender as the person being ministered to.

Church workers should avoid behaviour that could give the impression of inappropriate favouritism or the encouragement of inappropriate special relationships.

Church workers should treat those with whom they work or visit with respect, encouraging self-determination, independence and choice.

Pastoral relationships may develop into romantic attachments and such situations should be handled sensitively. Workers need to recognise such a development and make it clear to their supervisor or colleague. Alternative arrangements must be made for the ongoing pastoral care of the person concerned

Church workers should not undertake any pastoral ministry while they are under the influence of drink or drugs.

Church workers should be aware of their language and behaviour. For example, innuendoes or compliments of a sexual nature are always inappropriate. When a person asks questions or seeks

advice around topics of a sexual nature, the worker should be discerning about the motives and needs of the person and question their own ability to assist.

Church workers should be mindful that pastoral conversations might reveal serious difficulties experienced by an adult (whether or not vulnerable). For example financial difficulties, risk of homelessness etc. These should be reported to the safeguarding lead or deputy who will be able to signpost to appropriate support.

The church worker should consider in advance:

*The place of the meeting, arrangement of the furniture and lighting, the worker's dress.

*The balance of privacy for conversation with the opportunity for supervision (open doors or windows in doors, another person nearby).

*The physical distance between people determined by hospitality and respect, being aware that someone may have suffered abuse or harassment in the past.

*Whether the circumstances suggest a professional or social interaction.

*The propriety or danger of visiting or being visited alone and personal safety in visits, especially in the evening.

*The personal safety and comfort of all participants.

*Establishing at the outset the nature of the interview in respect to subject matter, confidentiality and duration, and the appropriateness of initiating or receiving any physical contact, for example, gestures of comfort, which may be unwanted or misinterpreted.

* The specific pastoral needs of individuals and whether the worker has the skill to meet these without additional support. Certain people will need skilled and professional support to which pastoral work will be supplementary. It may be that the initial pastoral task in such a situation is to work with the individual in supporting them to access professional help.

Appendix 3:

Suicidal Thoughts

From time to time someone might disclose suicidal thoughts to you. Take all thoughts of suicide seriously and don't dismiss it as attention seeking. If you have a good relationship with the person, or they are keen to talk to you, then you may be the best person to help them, even if you feel unprepared. If you do not feel able to respond to the disclosure, please contact the safeguarding officer and make sure you pass on your concerns.

If someone discloses suicidal thoughts you can try to explore whether these thoughts are vague e.g. "What's the point of going on" or whether they have definite intentions. Those with definite intentions and a plan are at the highest risk of suicide, but drugs and alcohol can lead people into acting on impulse. If they have previously attempted suicide they are at a higher risk. Asking directly about suicidal thoughts won't make a person more likely to take their own life, they might find it a relief to talk about it. You could ask the following questions:

- 1) "Do you have a suicide plan?" to find out whether they have a specific plan in mind. If they do you could then ask:
- 2) "Do you have what you need to carry out your plan?" (e.g. pills, tools etc).
- 3) "Do you know when you would do it?"
- 4) Do you intend to take your own life? (Does their behaviour indicate this even if they deny it? E.g. have made a will, rehomed a pet, cancelled deliveries)
- 5) "Have you been using drugs or alcohol?" This can increase the risk of impulsive decisions.

If the suicide attempt seems imminent dial 999 or take the person to A&E. Explain that you believe the person has a definite plan, the means and the intention to take their own life. Don't leave them alone.

If you don't feel that they are at immediate risk, you can still offer valuable support. People who feel alone are at greater risk. You can help them feel more connected by exploring the resources available to them. For example:

- 1) Have they told anyone else how they are feeling? Who can they turn to?
- 2) Have they received any treatment for mental health issues, or are they taking any medication? What professional support is available (e.g. do they have a mental health nurse?)
- 3) If they have not had treatment before, encourage them to speak to their GP about their feelings. Offer to go with them if they would like you to. Alternatively they might prefer to seek counselling to help cope with a specific issue that is causing the suicidal thoughts.
- 4) Have there been any big changes in their life recently? What practical support can they access to help with these?
- 5) Have they felt this way before? What helped then?
- 6) What distractions might help? Going for a walk? Painting? Reading? Spending time with a pet? Listening to music? Exercise?
- 7) Are there any situations or activities that make you feel worse? (e.g. drugs, alcohol) How can you avoid these?

If the person is part of the church encourage them to seek further support from their life-group leaders or the elders. Feeling part of the church community will help reduce isolation and increase support.

After speaking to the person involved please record what has happened on a safeguarding concern form and hand to the safeguarding co-ordinator as quickly as possible. They will be able to help identify any further support.

How to listen to someone who is having suicidal thoughts:

- Let them know that you care about them and that they aren't alone
- Empathise with them. Be aware you don't know exactly how they feel. You could say something like, 'I can't imagine how painful this is for you, but I would like to try to understand'
- Be non-judgemental by trying not to criticise or blame them
- Repeat their words back to them in your own words. This shows that you are listening. Repeating information can also make sure that you have understood it properly
- Ask about their reasons for living and dying and listen to their answers. Try to explore their reasons for living in more detail
- Focus on people they care about, and who care about them. And who they might hurt by leaving them behind
- Ask if they have felt like this before. If so, ask how their feelings changed last time.
- Reassure them that they won't feel this way forever, and that intensity of feelings can reduce in time.
- Encourage them to focus on getting through the day rather than focussing on the future.
- Ask them if they have a plan for ending their life and what it is.
- Encourage them to seek help that they are comfortable with. Such as help from a doctor or counsellor, or support through a charity such as the Samaritans.
- Follow up any commitments that you agree to.
- Make sure someone is with them if they're in immediate danger
- Help them to get professional help.
- If appropriate. offer to pray for them and encourage them to pray regularly.
- Offer support from the church pastoral team and if they would like this, talk to the elders to help facilitate this.
- Get support for yourself. Hearing someone disclose suicidal thoughts will impact you.

Resources that might be useful for a person with suicidal thoughts:

- 1) <https://www.stayalive.app/> This is an app which offers immediate support to someone at risk of suicide.
- 2) Premier is a confidential, free helpline giving emotional support from a Christian perspective. Telephone: 0300 111 0101 (9am – midnight)
<https://www.premierlifeline.org.uk/>
- 3) The Samaritans: give people confidential emotional support. In some areas they have local branches where you can go for support. Telephone: 116 123 (UK) (24 hours) Address: PO Box RSRB-KKBY-CYJK, P.O. Box 90 90, Stirling FK8 2SA
Email: jo@samaritans.org Website: www.samaritans.org
- 4) POPYRUS (prevention of young suicide) Charity that offers emotional support to people under 35 who are suicidal. They can also support people who are concerned about someone under 35 who might be suicidal. Telephone: 0800 068 41 41 Text: 07786 209697
Email: pat@papyrus-uk.org Website: www.papyrus-uk.org
- 5) CALM (The Campaign Against Living Miserably) CALM is leading a movement against suicide. They offer accredited confidential, anonymous and free support, information and signposting to people anywhere in the UK through their helpline and webchat service.
Telephone: 0800 58 58 58 Webchat: www.thecalmzone.net/help/webchat Website: www.thecalmzone.net

It might be appropriate for you to support someone by suggesting they create a crisis plan, a template is available.

Crisis plan

| | | |
|--|--|--|
| <p>Who can help me and how?</p> | <p>Who can I call?: Friend Professional Helpline</p> | <p>What would I say to someone else in my situation?</p> |
| <p>Where can I go that I feel safe?</p> | <p>What have I done before that's worked?</p> | <p>If the suicidal feelings won't go away what should I do? Go to A&E Call 999</p> |
| <p>What can I do to distract myself?</p> | <p>What things make me feel worse that I should avoid?</p> | <p>Any other helpful thoughts, ideas.</p> |

Reviewed.....

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