

Appendix 2:

DEFINITIONS OF TERMS, RECOGNISING SIGNS & INDICATORS OF ABUSE RESPONDING TO, RECORDING AND REPORTING CONCERNS

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1. Definitions of Terms

What does the term Abuse mean?

Abuse describes physical, sexual, psychological, emotional or financial abuse and includes abuse taking place in any setting, whether a private dwelling, an institution or any other place. (WSP)

It is a single or repeated act, or lack of action, that happens within any relationship where there is an expectation of trust, which causes harm or distress to another person or violates their human or civil rights.

It happens when a person deliberately withholds or fails to provide an appropriate level of care and support which is needed by another person.

It can involve a Parent/Carer and can also happen during pregnancy e.g. as a result of maternal substance abuse.

It is the misuse of power and control and can be perpetrated by a wide range of people, including those who are close to the person or those who have no previous connection to them.

What does the term Neglect mean?

This means a failure to meet a person's basic physical, emotional, social or psychological needs, which is likely to result in impairment of the person's well-being. (WSP)

Neglect (or acts of omission) is the failure to meet a person's basic physical or emotional needs which is likely to have a serious negative impact on their health or development.

Neglect to an adult at risk includes a failure to access medical care or services, emotional neglect, negligence in face of risk-taking, failure to assist in personal hygiene or the provision of food, shelter or clothing.

What does Harm mean?

Harm is caused by accidents, deliberate abuse (physical, sexual, emotional, financial), neglect (deliberate or not) or factors such as bullying, prejudicial attitudes or a failure to enable a person to participate in activities that are open to most peers.

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2. CATEGORIES OF ABUSE

The Wales Safeguarding Procedures 2024 (WSP) recognise the following categories of abuse:

- Physical
- Emotional & Psychological
- Sexual
- Financial
- Neglect

The Procedures recognise that all these forms of abuse can take place in different contexts such as domestic abuse, modern slavery, institutional abuse and so on. However, within the context that Cornerstone is working, the main categories are being focused on.

As Cornerstone Church is a Christian organisation, it is especially important for us to recognise the possible impact of **Spiritual Abuse** within our context. This particular category of abuse will be looked at after the main categories.

2.1 PHYSICAL ABUSE

Physical abuse is the deliberate use of physical force by one person against another to cause harm.

It may result in physical harm or injury to the other person, or it may not, and may be a one-off act or ongoing.

Physical abuse can include:

- Hitting, slapping, biting or pinching.
- Rough handling, shaking, pushing, or throwing.
- Burning or scalding.
- Drowning, or suffocating
- Poisoning, misuse of medication or the denial of treatment.
- Intentional exposure to extreme heat or cold, or force feeding.
- Misuse or illegal restraint, inappropriate physical punishment, or depriving someone of their liberty.

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Injuries caused by accidents such as trips and falls are not uncommon, especially in children, but these usually occur on bony or prominent areas such as knees, shins and elbows.

Abusive injuries tend to involve softer areas that are harder to damage accidentally e.g. upper arms, forearms, chest, back, abdomen and thighs.

Physical harm may also be caused when a child's Parent/Carer fakes the symptoms of, or deliberately causes illness or ill health in a child.

Possible signs and indicators:

- Visible injuries and bruising.
- Unexplained cuts, marks or scars.
- Injuries that don't match the explanation given.
- Getting injured often
- Unexplained falls
- Subdued or changed behaviour
- Changes in weight, being excessively under or overweight or malnourished.
- Failing to get medical treatment or changing Doctors often.

2.2. EMOTIONAL/PSYCHOLOGICAL ABUSE

Emotional abuse (or psychological abuse) involves harming a person emotionally and includes any persistent emotional ill-treatment that causes severe and long-lasting adverse effects on a person's emotional development.

Some level of emotional abuse is present in all types of abuse and ill-treatment of one person by another, but it can also occur on its own.

Emotional abuse can include:

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- Consistently telling someone that they are worthless, unloved or inadequate.
- Using intimidation, coercion, and harassment.
- Having inappropriate expectations for a person's age or development
- Seeing or hearing another person being mistreated, such as in Domestic Abuse
- Not giving someone the opportunity to express their views or to take part in normal social interaction.
- Bullying, including on-line bullying.
- Causing someone to frequently feel frightened or in danger.

Possible signs and indicators

- **Low self-esteem, attachment issues, depression, self-harm and eating disorders;**
- **Signs of distress, tearfulness or anger;**
- **Reluctance to be alone with a particular person.**

2.2.1 Psychological Abuse

Psychological abuse is behaviour that aims to cause emotional or mental harm. It may not hurt a physical body but can be just as painful and distressing in other ways. When someone deliberately hurts you over and over again it becomes abusive.

Psychological abuse often known as emotional abuse, or psychological violence, is a form of abuse characterised by a person subjecting or exposing another person to a behaviour that may result in psychological trauma, including anxiety, chronic depression, or post-traumatic stress disorder (PTSD) amongst other psychological problems.

The main difference between psychological and emotional abuse is **that Emotional abuse affects what people feel; psychological abuse affects what people think.** It is the hardest abuse to detect.

Psychological abuse can include:

- Difficulties in school/external organised activities;
- Trouble sleeping;
- Eating disorders such as anorexia or bulimia;

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- Mental health issues – depression, anxiety, low self-esteem, difficulty regulating emotions;
- Behavioural issues such as aggression, acting out, Lying or trying hard to please;
- Physical health issues, including aches, pains and gastrointestinal issues;
- Tendency to engage in risky behaviours or use substances at an early age.

Possible Signs and Indicators

- Helplessness
- Hesitation to talk openly
- Implausible stories
- Confusion or disorientation
- Anger without apparent cause
- Sudden change in behaviour
- Emotionally upset or agitated
- Unusual behaviour (sucking, biting or rocking).

2.2.2 Intimate Partner Abuse (Adults)

Psychological aggression from an intimate partner can be evidenced in some of the following ways:

- Wanting to know what you're doing, where you are and who you're with at all times;
- Expecting you to be in constant contact or checking up on your whereabouts;
- Wanting passwords for your phone, emails and social media to track your digital activity;
- Monitoring your spending habits and controlling your finances;
- Getting jealous and frequently accusing you of cheating on them;
- Making decisions on your behalf – what you wear, eat often without consulting you;
- Trying to keep you from meeting your friends and family.

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2.3 SEXUAL ABUSE

Sexual abuse (or Sexual violence) is any behaviour perceived to be of a sexual nature which is unwanted or takes place without consent or understanding.

The abuse may involve physical contact and touching or non-contact activities.

Sexual abuse is found across all sections of society, irrelevant of gender, age, ability, religion, race, ethnicity, personal circumstances, financial background or sexual orientation.

It can be perpetrated by family or non-family members, women, men and other children.

2.3.1 Children and young people

The sexual abuse of children or young people - also called **Child Sexual Abuse (CSA)** - is involving a child or young person in an activity for the sexual gratification or gain of another person, whether or not it is claimed they have consented or agreed.

Sexual abuse of a child can include:

- Forcing or enticing a child or young person to take part in sexual activities, including penetrative or non-penetrative acts, whether they are aware of what is happening or not.
- Including children in looking at adult sexual content or activities, or having their photo taken or being filmed for the production of indecent images.
- Using sexual language towards a child or encouraging them to behave in sexually inappropriate ways.
- Grooming a child in preparation for abuse, either in person or online.

Child sexual exploitation is a form of child sexual abuse where a child is sexually exploited for money, power or status. Sexual abuse may awaken premature sexual feelings in a child that they find hard to deal with and feel guilty about and they may need reassurance that they are not to blame for the abuse.

Penetrative sex with a child under 13 years by an adult or another child is classed as rape.

One of the ongoing effects of childhood sexual abuse may be that adult survivors experience difficulties forming meaningful relationships with other adults.

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Possible signs and indicators:

- Physical injuries and bruising, particularly to the thighs, buttocks, upper arms and neck.
- Bleeding, pain or itching in the genital area or when walking or sitting.
- Sexually transmitted diseases or infections.
- Uncharacteristic or age-inappropriate use of sexual language or significant changes in sexual behaviour or attitude.
- Self-harming.
- Poor concentration, withdrawal, sleep disturbance.
- Excessive fear/apprehension of, or withdrawal from, relationships or being alone with a particular person

2.3.2 Sexual abuse of adults

The sexual abuse of adults involves sexual acts to which the person has not consented or has been pressured into consenting to.

3.4 Sexual abuse of a adults can include:

- Penetrative or non-penetrative sexual acts, whether they aware of what is happening or not e.g. sexual assault, oral sex, rape, attempted rape, and date rape.
- Indecent exposure, sexual harassment, inappropriate looking or touching, groping, sexual teasing or innuendo,
- Being made to look at or be involved in the production of sexually abusive material or being made to watch sexual activities.
- Stalking and grooming.

Possible signs and indicators:

- Physical injuries and bruising, particularly to the thighs, buttocks, upper arms and neck.
- Bleeding, pain or itching in the genital area or when walking or sitting.

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- Sexually transmitted diseases or infections.
- Pregnancy in a woman who is unable to consent to sex.
- Uncharacteristic or age-inappropriate use of sexual language or significant changes in sexual behaviour or attitude.
- Self-harming.
- Poor concentration, withdrawal, sleep disturbance.
- Excessive fear/apprehension of, or withdrawal from, relationships or being alone with a particular person

2.4 FINANCIAL ABUSE

Financial abuse (or Material abuse) is the attempted or actual misappropriation or misuse of a person's money, property, benefits, or other assets, my means of intimidation, coercion, deception, or other ways to which the person does not or can not consent to.

Financial abuse includes having money or other property stolen, being defrauded or put under pressure in relation to money or other property and having money or other property misused.

Financial abuse can include:

- Theft, burglary, or fraud (including internet scamming).
- Exploitation and embezzlement.
- Coercion or being put under pressure concerning a person's finances (including wills, property, inheritance or financial transactions).
- Misuse or misappropriation of property, possessions or benefits.
- Withholding pension or other benefits.

Possible signs and indicators:

- Unusual financial activity such as making an unexpected change to a will, a sudden sale or transfer of a property, or unusual activity in a bank account.

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- Sudden inclusion of additional names on a bank account or where a signature does not resemble the person's normal signature.
- Reluctance or anxiety by a person when discussing their finances.
- A substantial gift to a carer or other third party.
- A sudden interest by a relative or other third party in the welfare of the person.
- Bills remaining unpaid.
- Complaints that personal property is missing.
- Signs of coercive control or neglect.

2.5 NEGLECT

This means the failure to meet a person's basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person's well-being (for example, an impairment of the person's health)

Neglect is the most common form of child abuse in the UK.

Neglect may happen because of a lack of knowledge or awareness, or through a failure to take reasonable action whether deliberate or not.

In its extreme form, neglect can be a significant risk as it can lead to serious long-term effects and even be life-threatening.

Neglect can include:

- Not providing adequate food, clothing, or assistance with personal hygiene.
- Not providing adequate shelter and heating.
- Failing to protect someone from harm or danger.
- Not ensuring appropriate supervision (including the use of inadequate care-givers)
- Failing to give prescribed medication or provide access to appropriate health care or treatment.
- Failing to provide access to educational services.
- Ignoring a person's basic emotional needs.

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- Failing to take action when a person is taking unnecessary risk (especially when the person lacks capacity to properly assess risk).

Possible signs and indicators:

- Poor appearance or hygiene e.g. being smelly or dirty
- Living in an unsuitable home environment e.g. having no heating
- Inappropriate or inadequate clothing
- Signs of malnutrition or not being given enough food
- Having frequent and untreated medical issues or an accumulation of untaken medication.
- Body issues such as sores, skin complaints, poor muscle tone or prominent joints.
- Poor language or social skills
- Being left alone for a long time
- Being withdrawn, depressed or anxious
- Tiredness or finding it hard to concentrate or take part in activities
- Self-soothing behaviours such as drug or alcohol misuse and self-harm.
- Poor school attendance or performance

2.6 SPIRITUAL ABUSE

Spiritual abuse is a form of psychological and emotional abuse that occurs when someone uses religious or spiritual beliefs to control, hurt, or scare another person.

It can involve coercive and controlling behaviour in a faith context and can be difficult to identify. Any attempt to exert power and control over someone using religion, faith or beliefs can be spiritual abuse.

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Spiritual abuse can take place in a variety of settings. Religious abuse takes place within a religious organisation. A religious leader may use scripture or beliefs to coerce or control the behaviour of members of the organisation.

Possible signs of Spiritual abuse:

- Has used scripture or beliefs to humiliate or embarrass individuals;
- Coerced individuals to give money or other resources that they didn't want to give;
- Forced individuals to be intimate or have sex that they didn't want;
- Made individuals feel pressured or obligated to do things against their wills.

Personal Faith, Religion and spirituality should be a source of comfort, peace, community and inspiration. If this is not the case, then please consider the following:

- Speak with a trusted friend, family member or a trusted member of the Church;
- Talk to an advocate from an organisation that can help – (list of helpful organisation contacts at the end of this document)
- Leave the organisation/church.

3. Responding to allegations of abuse

Safeguarding and child protection is everyone's responsibility, and all workers must respond to concerns they may have about a child's or adult's wellbeing. **However, strict confidentiality must be maintained.**

We support all workers to speak up and contact the DSL where there is:

- A *concern* (a worry, issue or doubt about a child or adult, or even about practice within Cornerstone)
- A *telling or disclosure* (information that is shared about a child or adult at risk of or suffering from significant harm)
- An *allegation* (the possibility that a worker, either paid or voluntary, could cause harm to a child or adult within Cornerstone)

The absence of the DSL/ Deputy or DST should not delay making a referral to Social Services or the police, or to taking advice from Thirtyone:eight if there is concern or a 'telling' or disclosure.

The procedure of **RECOGNISE, RESPOND, RECORD, REPORT & REFLECT** should be followed. Reflective Practice is particularly pertinent to those in Designated Safeguarding positions, as lessons learned from previous cases can have a positive impact on future approaches to Safeguarding. The DSL and DST, who are accountable to the Board of Trustees, should present a confidential written report to the Trustee of their reflections at the conclusion of a 'case'.

3.1 CODE OF PRACTICE FOR THOSE RESPONDING TO "TELLINGS" or DISCLOSURES

A Responder (the worker who responds) should:

- Remain calm, listen well and show acceptance
- Be ready to listen rather than to speak
- Allow time for the child/young person or adult to speak
- Be non-judgmental
- Be neutral and non-committal in responses
- Reassure the child/young person or adult that they are right to share their concern

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- Inform the child, young person or adult that the information will be shared with a limited number of other people who will be asked to help.

A Responder should NOT:

- React with outrage or unbelief
- Ask any questions, with the possible exception of "have you told anyone else about this?"
- Ask the child, young person or adult to repeat the account
- Promise to keep a secret
- Speak to anyone other than the those nominated in the previous section, when appropriate

The Responder should then:

- **Record** in writing their account of the conversation, using the person's own words as much as possible and sign it with the date and time.
- The Responder may include their personal observation of the person's behaviour if appropriate.
- Speak in person to the Designated Safeguarding Lead, (DSL) or if she is not available to the Deputy or DS Trustee, as soon as possible after the disclosure.
- The written account/record should be handed to the DSL within 24 hours .This Designated person should then countersign the written record and date and time their signature.

3.3.2 CODE OF PRACTICE FOR THE DSL

If consulted by a Responder regarding a concern, disclosure, or allegation of a safeguarding issue or child abuse the DSL will:

- **RESPOND** - elicit from the worker the reasons for concern and discuss the details in confidence

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- **RECORD** -ensure a detailed statement is written by the Responder on the appropriate report form.
- Only add to the statement if necessary
- **REPORT** - take advice as necessary from the Gwent Safeguarding Board or Thirtyone:eight Helpline, without identifying the details of the person.
- After taking advice, decide, in discussion with the DST, a response and a course of action if necessary
- Advise the initial Responder of any plans if and when appropriate.
- There is a Duty to REPORT and to hand the matter over to the Gwent Safeguarding Board, being available to provide necessary paperwork.
- Report the matter to the Trustees without disclosing names and details.
- **REFLECT on how the matter was handled within the organisation and provide a written report of the reflections and lessons learned, where appropriate, to the Trustees. Confidentiality will be maintained at all times.**

4. REPORTING

4.1 When the child/adult involved is NOT in immediate danger:

- Concerns need to be shared with a limited number of people and workers **must not** attempt to deal with a problem on their own.
- The concern/disclosure should be reported to the DSL /Deputy. If both are away, then report to the Designated Safeguarding Trustee (DST). A course of action will then be agreed.
- The Responder must record any conversation with the child /young person or adult on either a 'Concern' form, or in the case of a 'Telling' or 'Disclosure', the Safeguarding Report Form (This must be completed on paper, not electronically) and include the reasons for their concern and /or suspicion.
- The record should be signed and dated and completed within 48 hours of the concern/disclosure. The concern/report forms can be found on the Church web site (Church suite Safeguarding area) or in the SG Resource file kept in the box on the Welcome Desk.
- Returned Concern forms will be kept in a safe, locked place. **The concern should not be shared with anyone else and not with the parents, guardians, or carers at this point.**
- The Worker concerned may be asked to keep a confidential log regarding that child or adult, and to report any future concern.

4.2 Where there is a serious allegation/emergency situation

- In the event of a serious disclosure or allegation, the DSL will immediately discuss with the DST and then seek advice from Gwent Safeguarding Board or Thirtyone:eight as necessary.
- If there is reason to suspect a child or an adult is at risk, this **MUST** be reported to the Gwent Safeguarding Board. There is a **LEGAL DUTY** to report every disclosure of

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a safeguarding nature as required by the Social Services and Well-being (Wales) Act (2016). This action should be taken verbally immediately and recorded in writing within 48 hours on the SG Report Form.

- The DSL/Deputy and DST should then be informed of the action taken.
- **If there is an immediate risk, the relevant emergency services (Police/Ambulance) should be contacted by dialling 999.**
- The DSL may then make an appointment with the Designated Safeguarding Officer in Children's Services for a face-to-face discussion. If it is advised that a formal referral should be made, the DSL will come back to the Trustee before identities are disclosed.
- No approach will be made to the family unless Children's Services/Gwent Safeguarding Board agree (in accordance with WSP)
- The Trustees will be informed of the nature of the incident and action taken, but names and specific details will not be shared, unless it is necessary to do so for legal reasons.
- The DSL will keep a record of all discussions including those with Social workers/advisors. This record will then be kept securely either electronically within Church-Suite or in a locked filing cabinet with limited access at the Cornerstone Centre.
- All paperwork/electronic records will be subject to retention/disposal as set out in the GDPR section.

4.3. Concerns regarding Spiritual Abuse

The DSL will:

- Contact Thirtyone:eight and in discussion with them consider the appropriate action with regards to the scale of the concern.

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5. REPORTING ALLEGATIONS (Whistle-blowing)

5.1 Allegations of abuse against a person who works with children/young people

Where allegations are made regarding a church worker, whether a paid member of staff or volunteer, in accordance with the Regional Safeguarding Board, the DSL will:

- Ensure that the worker suspends their activity whilst an investigation is carried out and until the matter is resolved;
- Liaise with Children's Social Services in regard to the suspension of the worker;
- Make a referral to the Designated Safeguarding Officer, (DSO) whose function is to handle all allegations against adults who work with children and young people whether in a paid or voluntary capacity;
- Make a referral to Disclosure and Barring Service for consideration of the person being placed on the barred list for working with children or adults. This decision should be informed by the DSO if they are involved.

Whilst there may be a pressing need for pastoral support, the DSL must be informed first to decide whether any formal action should precede pastoral care. The DSL will decide this in discussion with the DST and Board of Trustees where appropriate.

The Trustees will support the DSL/Deputy in their roles 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.

5.2 Allegations of abuse against a person who works with adults

The DSL will:

- Liaise with the Gwent Safeguarding Board and Adult Social Services in regards to the suspension of the worker;
- Make a referral to the DBS following the advice of Adult Social Services

Adult Services should investigate situations of harm to adults at risk of abuse and neglect and those with care and support needs. This may result in a range of options including action against the person or organisation causing the harm, increasing the support for the carers or no further action if the 'victim' chooses for no further action and they have the capacity to communicate their decision. **However, this is a decision for Adult Services to decide not the church.**

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6. EMERGENCY CONTACT DETAILS

DESIGNATED SAFEGUARDING LEAD (DSL)

Name: Janice Llewellyn
Tel: 07720 320147
Email: Janllewellyn7325@gmail.com

DEPUTY DESIGNATED SAFEGUARDING LEAD (DSL)

Name: David Johns
Tel: 07980 721286
Email: Davidjohns556@btinternet.com

If both are away, the report should be made to the **DESIGNATED SAFEGUARDING TRUSTEE (DST):**

Name: Martin Brown
Tel: 07812 023058
Email: martanne10@gmail.com

POLICE/Emergency 999

Regional Board: Gwent Safeguarding Board:
Advice and Assistance Service: Monmouthshire
Tel: 01291 635 669
Email: ChildDuty@monmouthshire.gov.uk

South East Wales Emergency Duty Team for all services: 0800 328 4432

Christian Advice:
Thirtyone:eight PO Box 133, Swanley, Kent, BR8 7UQ
Tel: 0303 003 1111 Option 2

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7. USEFUL ORGANISATIONS

Action on Elder Abusewww.elderabuse.org.uk Offers comprehensive information and reports. Excellent list of contact organisations on website dealing with general issues on vulnerable adults. T: 020 8765 7000.

Aneurin Bevan University Health Board. Urgent mental health help and support in the Gwent area- ring 111 and choose option 2 to speak to a specially trained mental health advisor. 9am to midnight 7 days a week.

Alcoholics Anonymous – Abergavenny. Meets locally at the Music Rm, St Mary's Priory Church, Monk Street @ 8pm. More info; www.alcoholics-anonymous.org.uk

Andy's Man Club-Abergavenny. Provides peer to peer support for men age 18+. Meets every Monday evening other than Bank Holidays at 7pm at the Tithe Barn, Monk Street. Info on Twitter and Facebook: <https://andysmanclub.co.uk>

Ataloss Organisation A national organisation offering support for bereaved people; also offers support after suicide; www.Ataloss.org

Carers UKwww.carersuk.demon.co.uk T: 020 7490 8818. Information, advice and support for carers.

Community Legal Serviceswww.justask.org.uk Free advice and information on legal issues and rights.

CYFANNOL Women's Aidwww.cyfannol.org.uk Based at Multiagency Centre 26b Monk Street, Abergavenny. Immediate help Tel: 03300 564456

Dementia webwww.dementia.ion.ucl.ac.uk Research and information.

Directory of Social Changewww.dsc.org.uk T: 020 7209 4949, Information, training and resources for the charity sector.

Disabled Living Foundationwww.dlf.org.uk T: 0845 130 9177

Disability Rights Commissionwww.drc-gb.org DRC Helpline 08457 622 633 Faxback service - 08457 622 611

Macmillan Cancer Supportwww.macmillan.org.uk T: 0845 601 6161 working for people with cancer.

Melo Cymru<https://www.melo.cymru/> provides information, advice and self-help resources to help you look after your mental health and wellbeing.

Mencapwww.mencap.org.uk T: 020 7696 5593 working for people with learning disabilities
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Mental Health Foundation www.mentalhealth.org.uk T: 020 7535 7400.

MIND Monmouthshire (Mental Health Support) www.mindmonmouthshire.org.uk Based at Henton House, 28 Monk Street, Abergavenny. Tel: 01873 858275.

Refugee council www.refugeecouncil.org.uk T: 020 7820 3000. Supporting Refugees and Asylum Seekers.

RNIB www.RNIB.org.uk T: 0345 669999 Royal National Institute for the Blind. Also the lead organisation for the Disability Charities Consortium. An umbrella group for disability charities.

RNID www.RNID.org.uk T: 020 7296 8000 Royal National Institute for the Deaf.

SCIE www.scie.org T. 020 7089 6840 Social Care Institute for Excellence. Independent charity publishes reviews of knowledge and practice guides. Electronic Library of Social Care (elsc) available through website.

SCOPE www.SCOPE.org.uk T: 020 7636 5020 working for people with Cerebral Palsy

Additional sources of support for young people:

7 Corners www.7corners.org.uk Young People up to age 26. Meet in safety and find help for personal development and receive support. Meets at 1-3 Seven Corners Lane Abergavenny. Tel: 01873 855414

Kidscape <https://www.kidscape.org.uk> is a national charity providing a wide range of resources and support for those working with young people.

YoungMinds <https://www.youngminds.org.uk/> is a national charity supporting the mental health of young people.

ChildNet International <https://www.childnet.com/> is a non-profit organisation working to help make the internet a safe place for children.

Click CEOP <https://www.ceop.police.uk/safety-centre/> is a resource for children and young people worried about online abuse to report concerns.

ChildLine <https://www.childline.org.uk/> is the national helpline for children and young people to talk about concerns (part of the NSPCC)

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