

Safeguarding Policy, Procedures & Flowcharts

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Date Drafted:	January 2023
Date Effective:	17 th January 2023
Last Review Date:	1 st March 2024
Next Review Date:	1 st March 2025
Officer Responsible:	CEO
Delegated Delivery Responsibility:	Designated Safeguarding Lead

Version	Date	Note	Author
V1	21.10.21	Drafted new version	RC/GH
V2	11.01.23	reviewed	RC
V2	17.01.23	Signed off by board	RC
V3	1.3.24	Reviewed	GH

1. Overview

This policy applies to all staff, the board of Trustees, volunteers, sessional workers, agency staff, students, and anyone working on behalf of Respond.

This policy sets out Respond's responsibilities and actions to ensure children, (including unborn babies who are likely to be in need of support from children's services when born), young people and adults are kept safe from harm.

This policy should be read alongside the following policies and procedures: dealing with disclosures and concerns; whistleblowing; data protection; disciplinary; recruitment; lone working; health and safety and complaints. If the particular issue relates to dealing with safeguarding allegations about staff or volunteers, please refer to the dealing with disclosures and concerns about a child or adult procedures.

2. Purpose

The purpose of this policy and associated procedures is to:

- Protect and promote the welfare of the children, young people and adults using or receiving services provided by Respond;
- Ensure the safety and wellbeing of children and young people is paramount when adults, young people or children are using technology such as the internet, social media or mobile devices; and
- Provide all employees and volunteers with the overarching principals that guide Respond's approach to safeguarding.

3. Legal Framework

This policy demonstrates how Respond will meet its legal obligations and has been drawn up on the basis of current law and guidance that seeks to protect children and adults.

4. Principles

Respond recognises and is committed to the following principles of safeguarding for children, young people and adults:

- Their welfare is paramount;
- Whatever their background and culture, parental or pregnancy status, age, disability, gender, racial origin, religious belief, sexual orientation and/or gender identity, they have the right to participate in society in an environment which is safe and free from violence, fear, abuse, bullying and discrimination;
- They have the right to be protected from harm, exploitation, abuse, and to be provided with safe environments to live and play;
- Children should be able to use the internet for education and personal development, but safeguards need to be in place to ensure they are kept safe at all times;
- Safeguarding is the responsibility of everyone.

- Respond has arrangements to ensure that beneficiaries are safeguarded against the risk of abuse by means of
 - a) taking reasonable steps to identify the possibility of abuse, neglect or radicalisation
 - b) prevent it before it occurs
 - c) helping people to be responsible in their approach to online safety
 - d) responding appropriately to any allegation, suspicion or evidence of abuse, neglect or radicalisation,¹
- Some children, young people and adults are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- Working in partnership, alongside a person's family, carers and other agencies, is essential to the promotion of their welfare
- Embedding the "Making Safeguarding Personal" principles in our procedures and decision making – “no decisions about me without me” by supporting and empowering each person to make choices and have control about how they want to live their own life.

5. Policy Statement

Respond is committed to safeguarding children, young people and adults from abuse and neglect when they are engaged with services organised and provided by, or on behalf of the charity. The charity will seek to keep them safe by:

- establishing a Respond Safeguarding Board led by an appointed Designated Safeguarding Officer and On-line Safety Co-ordinator;
- proactively promoting the welfare and protection of all children, young people and adults using Respond services at all times;
- valuing, listening to and respecting people who use Respond's services;
- ensuring that there are robust safer recruitment procedures so that no child, young person or adult is put at risk;
- dealing with any concern raised promptly, appropriately and sensitively;
- not tolerating harassment of any employee, volunteer, child, young person or adult by adopting safeguarding practices and procedures and a code of conduct for staff and volunteers;
- developing and implementing effective online safety procedures;
- providing effective management for staff and volunteers through supervision, support, training and quality assurance measures;
- providing appropriate level of safeguarding training for everyone who will have contact with children, young people and adults during their induction period and beyond;
- recording and storing personal information professionally and securely;

¹ The Making Safeguarding Personal (MSP) framework developed 2018 emphasises that safeguarding adults should be person centred and outcomes focused.

- sharing information about safeguarding and good practice with children, young people, adults, their families, staff and volunteers via publications, social media campaigns, and one to one discussion;
- using safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, adults, their parents, families and carers appropriately;
- using procedures to manage any allegations made against staff and volunteers appropriately;
- creating and maintaining an anti-bullying environment and ensuring Respond has a policy and procedure to guide an effective response to bullying;
- ensuring that Respond has effective complaints and whistleblowing measures in place; and
- ensuring that Respond provides a safe environment for children, young people, adults, staff and volunteers by applying health and safety measures in accordance with the law and regulatory guidance.

6. Safeguarding Procedures for Dealing with Disclosures and Concerns

All those who come into contact with children and families in their everyday work have a duty to safeguard and promote the welfare of children and adults. The purpose of this is to protect and promote the welfare of the children (including unborn babies who may be in need of support from children's services when born), young people and adults using or receiving services provided by Respond, and support the Board of Trustees, Senior Leadership team (SLT), employees, sessional workers, agency staff, students and volunteers to fulfil their statutory responsibilities. These procedures explain the roles and responsibilities of these people at Respond.

The procedures explain what anyone providing services on behalf of Respond should do if they are concerned about the wellbeing of a child, young person or adult including when allegations or concerns are expressed about anyone working for or with Respond.

7. Definitions of Adult & Child Safeguarding

7.1 Adult safeguarding

Adult safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisation's 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 in 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 (Care Act Statutory Guidance, 2014, p230).

7.1.1 Adult at risk

The safeguarding duties apply to any 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; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse and neglect. (Care Act 2014, s.42)

7.1.2 Making Safeguarding Personal –

“No Decision about me without me”

"Making Safeguarding Personal" is a local authority sector-led initiative that aims to develop an outcome focus to safeguarding work, and a range of responses to support people to improve or resolve their circumstances.² Respond works within this initiative and adopts its principles and methods.

The approach of the initiative is to work with the individual on their own terms, rather than deciding what is best for them. The individual should always be involved from the beginning of raising the safeguarding concern and enquiry, unless there are exceptional circumstances that would increase the risk of abuse. Making Safeguarding Personal has a focus on the person, not the process.

The key principle of Making Safeguarding Personal is to support and empower each individual to make choices and have control about how they want to live their own life. This is about having conversations with people about how responses to safeguarding situations can be made in a way that enhances their involvement, choice and control, as well as improving their quality of life, wellbeing and safety. It is about seeing people as experts in their own lives and working alongside them to identify the outcomes they want. The focus is to achieve meaningful improvements to people's lives to prevent abuse and neglect occurring in the future, including ways for them to protect themselves.

Some people may express desired outcomes or wishes that are not possible, and this provides opportunities for frank discussion to establish what the next best option is within

² See Local Government Association, "Making Safeguarding Personal, <https://www.local.gov.uk/our-support/our-improvement-offer/care-and-health-improvement/making-safeguarding-personal>.

some broader boundaries and principles that they have stated. For other people their desired outcomes may not be possible, for instance, if they don't want the police involved but the person who has abused or neglected is in a position to do the same to others. Again, there will be opportunities to explain this honestly and to find ways to most closely meet their wishes.

7.2 Child safeguarding

Promotion of the welfare of children (defined as a person aged under the age of 18) and protection from harm is everyone's responsibility. Everyone who comes into contact with children and families has a role to play. Safeguarding and promoting the welfare of children is defined for the purposes of this guidance as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes ("Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children", HM Government, July 2018).

8. Types of Abuse

As an organisation that has day-to-day contact with children, young people and adults, Respond recognises that it has a duty of care to them, and protection from abuse is an important aspect of that duty of care.

Abuse may consist of a single act or repeated acts over time. It may occur as a result of a failure to undertake action or appropriate care tasks. It may be physical, psychological, or an act of neglect, or occur where a person is persuaded to enter into a financial or sexual transaction to which they have not, or cannot, give consent. Abuse can occur in any relationship and may result in harm to, exploitation of, the individual.

Even for those experienced in working with child or adult abuse it is not always easy to recognise a situation where abuse may occur or already has taken place. Whilst it is accepted that Respond practitioners are not experts at recognising child abuse, they have a duty to act if they have any concerns and should always discuss their concerns with their line manager or the charity's safeguarding officer.

Remember: You may be the first person who a child, young person or adult has trusted, and it has probably taken a great deal of courage to tell you that something is wrong.

8.1 Types of Abuse as defined by Care Act Guidance (2014)

8.1.1 Physical abuse – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.

8.1.2 Sexual abuse – including 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 to which the adult has not consented or was pressured into consenting.

8.1.3 Psychological abuse – including 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.

8.1.4 Financial or material abuse – including 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.

8.1.5 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.

8.1.6 Discriminatory abuse – including forms of harassment, slurs or similar treatment; because of race, gender identity, age, disability, sexual orientation or religion.

8.1.7 Organisational abuse – including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

8.1.8 Neglect and acts of omission – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

8.1.9 Neglect (specific to a child) 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 as a result of maternal substance abuse. 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 inadequate care-givers); or
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. ("Working Together", 2018)

8.1.10 Self-neglect – this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

8.1.11 Domestic Abuse is 'Any incident or pattern of incidents of controlling, coercive or

threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- emotional

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.” *

*This definition includes so called ‘honour’ based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.’ (Home Office, "Information for Local Areas on the change to the Definition of Domestic Violence and Abuse", March 2013).

8.1.12 Honour Based Violence is a crime or incident, which has or may have been committed to protect or defend the honour of the family and/or community’.

This definition is supported by further explanatory text:

"Honour Based Violence" is a fundamental abuse of Human Rights. There is no honour in the commission of murder, rape, kidnap and the many other acts, behaviour and conduct which make up "violence in the name of so-called honour".

It is a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and / or community by breaking their honour code.

Women are predominantly (but not exclusively) the victims of 'so called honour-based violence', which is used to assert male power in order to control female autonomy and sexuality. Honour Based Violence can be distinguished from other forms of violence, as it is often committed with some degree of approval and/or collusion from family and/or community members (ACPO & CPS, 2013).

8.1.13 Forced Marriage is a marriage conducted without the valid consent of one or both parties where duress is a factor. Forced marriage is a violation of human rights and is unlawful (HM Gov, 2000).

A forced marriage is a marriage in which one or both spouses do not (or in the case of some adults with learning or physical disabilities, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure. (HM Government 2008).

8.1.14 Female Genital Mutilation (FGM) comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls' and women's bodies. The practice causes severe pain and has several immediate and long-term health consequences, including difficulties in childbirth also causing dangers to the child (HMGov 2014).

8.1.15 Stalking a pattern of unwanted, fixated and obsessive behaviour which is intrusive and causes fear of violence or serious alarm or distress (Paladin 2018).

8.1.16 Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism (HM Gov, 2011).

8.1.16.1 Prevent is the Government's countering terrorism strategy, and is part of "CONTEST" (Home Office, "Counter-terrorism strategy (CONTEST)", 2018). The purpose of Prevent is to safeguard and support people to stop them from becoming terrorists or supporting terrorism. Prevent work also extends to supporting the rehabilitation and disengagement of those already involved in terrorism. Prevent works in a similar way to programmes designed to safeguard people from gangs, drug abuse, and physical and sexual abuse. Success means an enhanced response to tackle the causes of radicalisation, in communities and online; continued effective support to those who are vulnerable to radicalisation; and disengagement from terrorist activities by those already engaged in or supporters of terrorism.

"Prevent" objectives

- Tackle the causes of radicalisation and respond to the ideological challenge of terrorism;
- Safeguard and support those most at risk of radicalisation through early intervention, identifying them and offering support; and
- Enable those who have already engaged in terrorism to disengage and rehabilitate.

8.1.17 Safeguarding Children and Young People from Sexual Exploitation

Child sexual exploitation is a form of abuse by which a child or young person is coerced or manipulated to engage in sexual activities either in return for something or for the profit of others. This is seriously harmful to children both emotionally and physically.

Children and young people do not become involved voluntarily; they are forced or tempted into the situation by abusive adults or peers who present themselves as their 'friend' or 'boyfriend/girlfriend'.

Children and young people find it very hard to understand or accept that they are being abused through sexual exploitation and this increases their risk of being exposed to violent assault and life-threatening events by those who abuse them.

Risk Factors include:

- Sexually transmitted diseases
- Being bullied and/or vulnerable to bullying
- Unstable family relationships/violence and abuse/conflict with parents/carers

- Being looked after by the care system
- Truancy/being excluded from school
- Drugs and alcohol issues
- Staying out late
- Abduction
- Depression and self-harm
- Becoming involved with controlling and risky boyfriends/adults

If a Respond staff person is a concern about a child that is being sexually exploited, it is important to **report it to the necessary authorities.**

If a Respond staff person is worried that a child or young person is in danger of serious harm from sexual exploitation or any other form of abuse, they should call the police immediately on 999 then follow the guidance set out in this policy.

8.1.18 Safeguarding Children and Young People from Gang Exploitation

Being part of a gang will put children more at risk of:

- being involved in or committing a crime;
- dealing or taking drugs;
- being involved in other illegal activities such as fighting, dog fighting or gambling; and
- Being put in prison or in a young offender's institution.

Unusual behaviours in children which could indicate gang exploitation:

- stopping or dropping out of hobbies or clubs they are involved in;
- school reports dramatically changing;
- not doing as they are told, not adhering to boundaries, for example, staying out later than scheduled;
- not telling anyone where they are going, who they are with and what they are doing;
- sudden extra money, new gadgets, clothes or trainers and other unexplained amenities;
- new habits, for example, smoking, drinking, dealing or taking drugs, taking an interest in illegal activities;
- adopting change of name or new nickname; and
- having multiple mobile phones.

They will also be more at risk of becoming a victim of violence, which may lead to serious injury or even death. A child or teenager may be scared or unhappy to discuss their activities. It is vital that a person in such a situation knows that Respond is available to listen and to support them, in the following way:

- listen;
- try and understand their situation;
- ask if they need any help;
- agree what happens next;
- involve parents (if this would be helpful or necessary); and
- and if further help is required, seek support.

8.1.19 Child trafficking

Child trafficking involves the exploitation of children and young people through force, threats and deception. Signs and indicators could include children:

- having no access to their parents or guardians;
- looking intimidated and behaving in a way that does not correspond with behaviour typical of children their age;
- having no friends of their own age outside school or work;
- having no access to education;
- having no time for playing;
- living apart from other children and in substandard accommodation;
- eating apart from other members of the 'family';
- being given only leftovers to eat;
- being engaged in work that is not suitable for children;
- travelling unaccompanied by adults;
- travelling in groups with person who are not relatives; and
- being collected from school by older peers or adults, forced to travel to unknown places /premises.

If a Respond staff member considers a child may have been trafficked, they should **call the NSPCC Child Trafficking Advice Centre (CTAC) on 0800 800 5000** and then follow the procedure set out in this policy.

8.1.20. Child Radicalisation

Grooming online or in person is a classic technique used by abusers to exploit young people. It is important that Respond practitioners are able to identify the signs of such abuse so that Respond can help protect children from sexual exploitation, gang related activity or other hate crimes.

The consequences of radicalisation can be devastating for the child and others, leading to isolation, depression, use of drugs and self-harm. Young people must be equipped with a resilience and confidence in understanding and judging the risks associated with growing up, whilst ensuring adults are able to identify tell-tale signs of exploitation so they can be rapidly addressed. Children are exposed to news in many ways, so it would be practically impossible to shelter them from reports of terrorist attacks when they occur.

When talking with a child, a Respond staff member can agree with the child that such attacks are frightening and sad and that the staff member cannot stop them happening. Staff should avoid complicated, worrying explanations, as the child may not be able to process the information and it could leave them more frightened and confused.

- **Some children will feel targeted because of their faith**
It is important to look for signs of bullying and make sure that a child knows they can talk to a Respond staff member about it. Often, they will feel scared or embarrassed talking about it, so staff should reassure them it is not their fault that this is happening and that Respond will help the bullying stop. Alert the child's school so that they can be made aware of the issue.
- **Offensive or unkind comments about a child's faith or background in response to the terror attacks**

If a Respond staff member thinks this is happening, it is important to intervene. The staff member should calmly explain that comments like this are not acceptable. A child should also understand that someone's beliefs do not make them a terrorist. Staff should explain that most people are scared and hurt by the attacks, as any child would be. Staff could ask them how they think the other child felt or ask them how they felt when someone said something unkind to them, and explain what Respond will do next, such as telling the child's school, and what the staff member expects the child to do.

8.1.21 Missing from care / missing from home

Professionals dealing with missing children should have full appreciation of the risks and vulnerabilities that apply to those children. Where there is evidence or intelligence that a child has gone missing to be trafficked or following grooming for exploitation, the investigation to find the child must be treated as high risk. These children are extremely vulnerable and immediate effective steps must be taken to find them and take them to a safe place. The police will need to assign the correct level of resourcing, including the deployment of officers with the right levels of skills and experience. Some children who are trafficked may also then later come into care following being trafficked or groomed and this in itself can also be compelling evidence that they are missing and may be at risk of being exploited again.

9. Roles and Responsibilities

9.1 Designated Safeguarding Lead

- Develops and reviews Respond's safeguarding policies and procedures;
- Reports to the Acting CEO and Trustee Safeguarding Leads, any safeguarding concerns involving staff, volunteers, trustees, sessional staff or anyone delivering services on behalf of Respond;
- Provides 6 weekly and 6 monthly reports to the SLT as required;
- Provides the Trustee Board with details of any safeguarding concerns at each Board meeting, presents a 6-monthly report on safeguarding, and suggests updates to the safeguarding policy and procedure.

9.2 Internal Safeguarding Committee

- Ensures Respond is compliant with safeguarding legislation;
- Monitors and reviews safeguarding practice within area through audits;
- Shares best practice and disseminate learning internally and externally from Serious Case Reviews (SCRs), Domestic Homicide Reviews (DHRs), other safeguarding reviews and audits ensuring they are acted upon effectively;
- Recommends policies and procedures for approval, relating to safeguarding practice, ensuring that they are consistent with national and local requirements and seeking to adopt best practice in the sector;
- Ensures training provided is of an appropriate quality standard and staff, trustees volunteers, and agency staff are trained to the correct level.
- Ensures freelance and contracted practitioners know about this policy and have appropriate and current training.

9.3 Safeguarding Leads (SL)

- Acts as first point of contact for all staff, volunteers, sessional workers and agency staff to go to for advice if they are concerned about a child, young person or adult and are responsible for dealing with reports or concerns about the protection of children, young people or adults appropriately and in accordance with the procedures that underpin this policy;
- Supports staff and volunteers to assist in information regarding concerns and support decision making about whether concerns are sufficient to notify social services or whether other courses of action are more appropriate;
- Ensures consideration of the Mental Capacity Act 2005 (for those 16+) and Deprivation of Liberty Safeguards (DoLS) (for those aged 18+) as appropriate;
- Supports staff to make referrals to the Duty Team (or make such referrals themselves); and
- Ensures concerns are recorded promptly and accurately and stored securely.

9.4 Senior Leadership Team (SLT)

- Ensures that there is an appointed Safeguarding lead for the organisation and ensure that this role receives appropriate supervision and support;

- Ensures that the safeguarding policy is reviewed on an annual basis, and that it is proposed updates are sent to the Board of Trustees in accordance with law and policy, commissioning arrangements and sector best practice;
- Ensures that 6-monthly safeguarding reports are produced for review by the Board of Trustees;
- Makes available safeguarding training for Trustees for completion on an annual basis;
- Puts in place clear process for staff, volunteer and trustee safeguarding induction, mandatory training, reporting, recording, escalation of safeguarding and any concerns and allegations against staff, trustee, volunteers, sessional workers, agency staff or students.

9.5 Board of Trustees

- Ensures that there is an appointed Safeguarding Lead for the organisation and that the person in this role receives appropriate supervision and support;
- Reviews the safeguarding policy annually, ensuring that it is updated in accordance with law and policy, commissioning arrangements and best sectoral practice;
- Ensures that each trustee has completed safeguarding training and each new trustee complies with such training during their induction period;
- Ensures that Respond has a clear process for staff, volunteer and trustee safeguarding induction, mandatory training, reporting, recording, escalation of safeguarding and any concerns and allegations against staff, trustee, volunteers, sessional workers, agency staff or students.

9.5 Trustees, staff, volunteers, contracted, agency staff and students

Each person working and delivering services on behalf of Respond:

- promotes a safe environment for children, young people and adults;
- becomes and maintains familiarity with and follow Respond's organisation's policy and procedures for safeguarding the welfare of children and adults;
- can identify the person to whom a safeguarding concern should be reported, and the manner in which such a report must be made; and
- takes action when they suspect or recognise that a child, young person or adult may be a victim of significant harm or abuse.

The role of anyone working and delivering services on behalf of Respond is to inform, not to investigate or judge; that is the responsibility of investigative statutory agencies.

An allegation of child abuse or neglect may lead to a criminal investigation and therefore practitioners should not do anything that may jeopardise a police investigation, such as asking leading questions or attempting to investigate the allegations of abuse.

9.5.1 Being alert to signs of abuse

Signs of abuse can be physical, behavioural, or developmental. They can exist in the relationships between children and parents/ carers or between children and other family members. A cluster or pattern of signs is likely to be more indicative of abuse. Children who are being abused may hint that they are being harmed and sometimes make direct disclosures.

9.5.2 Disclosures should always be believed and reported to a Respond Safeguarding

Lead. Less obvious signs and concerns should be noted and discussed with a Safeguarding Lead. Play situations such as drawing or story telling may reveal information. It is important that Respond practitioners do not to directly question a child or adult as a way of exploring their own concerns.

Signs that may indicate abuse include:

- (i) disclosure of abuse and neglect by a child or young person or adult;
- (ii) age-inappropriate or abnormal sexual play or knowledge;
- (iii) specific injuries or patterns of injuries;
- (iv) absconding from home or a care situation;
- (v) attempted suicide and/or signs of self-harming behaviour;
- (vi) under-age pregnancy or sexually transmitted disease;
- (vii) signs in one or more categories at the same time. For example, signs of developmental delay, physical injury and behavioural signs may together indicate a pattern of abuse;
- (viii) texts or mobile calls that leave the person anxious, frightened;
- (ix) disassociation;
- (x) talking about an individual who seems to exert excessive influence and/or control;
or
- (xi) Relationships with older peers or adults which seem disproportionate.

10. Procedures

10.1 Procedure for receiving a disclosure or allegation from a child/young person

Staff must use as much of the following procedure as is possible and appropriate in responding to a child's or young person's disclosure or allegation either about themselves or another child or young person.

- Listen carefully and attentively;
- Do not promise secrecy - explain your duty to report if you have identifying information;
- Stay calm;
- Take everything you are told seriously;
- Let the child set the pace;
- Ask no leading questions;
- Check to ensure that what has been heard and understood accords with what was actually said - using the same words that the child used;
- If the child is anxious reassure them, let them know that they have a right to be kept safe and they are not to blame for what happened;
- Thank the child for telling you, letting them know that telling is the right thing to do;
- Make no promises that cannot be kept;
- Explain what will happen next, discussing details of who else needs to know and how they will be told; and
- Respond to any questions that the child / young person asks. If you do not have the answer, attempt to find it.

Respond practitioners should consider the child's wishes as regards their involvement in telling the others who need to know, e.g. - Do they want you to tell their parent/s for them, in their presence? Or do they want to tell them themselves in your presence? This may not always be appropriate in cases where the parent/carer may be put at greater risk by informing the parent/carer. The decision not to explain to the parent or guardian needs to be discussed and decided with the Respond's safeguarding team and statutory services safeguarding team that the concern has been reported to.

If the staff member believes the person is at risk of immediate significant harm, which includes situation that anyone would reasonably believe requires the emergency services, then they must contact the relevant emergency service and notify the appropriate Safeguarding Lead at Respond.

- practitioners should document verbatim as soon as possible after a disclosure noting date, time, location, who was present and who said what. Any direct quotes from children should be in "quotation marks".

Practitioners should complete the child safeguarding concern form on Lamplight emailing safeguarding@respond.org.uk and inform the case manager within 2 hours. (see flowchart)

- Record all details you are aware of Lamplight database within 24 hours;
- Provide appropriate support e.g., referral to specialist services through multi-agency partnerships, working together to prevent abuse and neglect where possible; and
- If deemed appropriate, raise a concern with the relevant social care services within 24 hours, following their processes (See Flowchart for external procedures).

10.2 Procedures when allegations or concerns are expressed about an employee, trustee, volunteer, sessional workers, agency staff or student or if an allegation involves services or activities involving Respond, or if a person at Respond has information about possible abuse by another Respond employee, trustee, volunteer, sessional worker, agency staff or student:

As above in section 10.1 and:

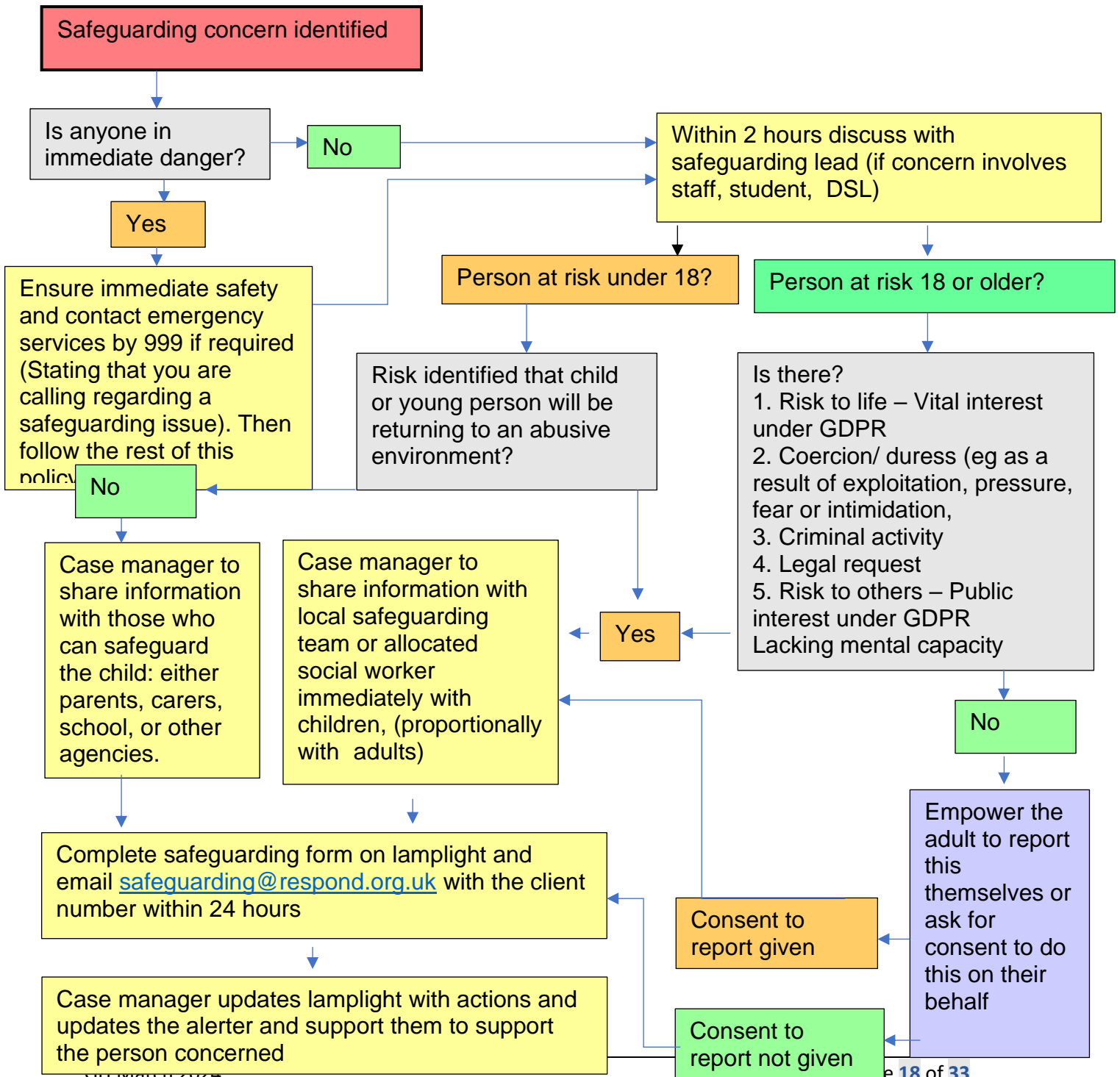
- Inform the Designated Safeguarding Lead within 2 hours of the allegation, who will immediately inform the OED. In absence of the Designated Safeguarding Lead, inform another Safeguarding Lead and inform the Organisation Effectiveness Director;
- If an allegation is made about an employee, trustee, volunteer or sessional worker, disciplinary procedures should be followed;
- If an allegation is made about a student, immediate action should be taken as directed by OED and Designated Safeguarding Lead;
- The Designated Safeguarding Lead should inform Trustee Safeguarding Leads and Acting CEO within 8 working hours of the allegation and if required report the allegation to Charity Commission within 1 day of the original allegation. In the absence of Trustee Safeguarding Leads, the Designated Safeguarding Lead should inform the Chair of the Board. The information relating to the incident should be recorded on an incident form and shared with the Trustee Safeguarding Lead.
- Record all details the person receiving the information is aware of, on an incident form within 4 hours, using a password protected document. Send this to Human Resources to hold copy of password.
- If a concern about an employee, trustee, volunteer sessional worker, agency staff or student raised is connected to an event in their personal life, a risk assessment is undertaken by the line manager and Designated Safeguarding Lead who will form a view based on all available information in consultation with the OED. If found unsafe, in consultation with Human Resources, next steps are considered. These may include moving to an alternative role to mitigate any risk or instigating disciplinary procedures.
- The Designated Safeguarding Lead will complete an incident form and hold a meeting with the Acting CEO will inform Trustee Safeguarding leads who will be provided with an incident form completed by the Designated Safeguarding lead.
- The Designated Safeguarding Lead must in these circumstances inform the Acting CEO in by email.

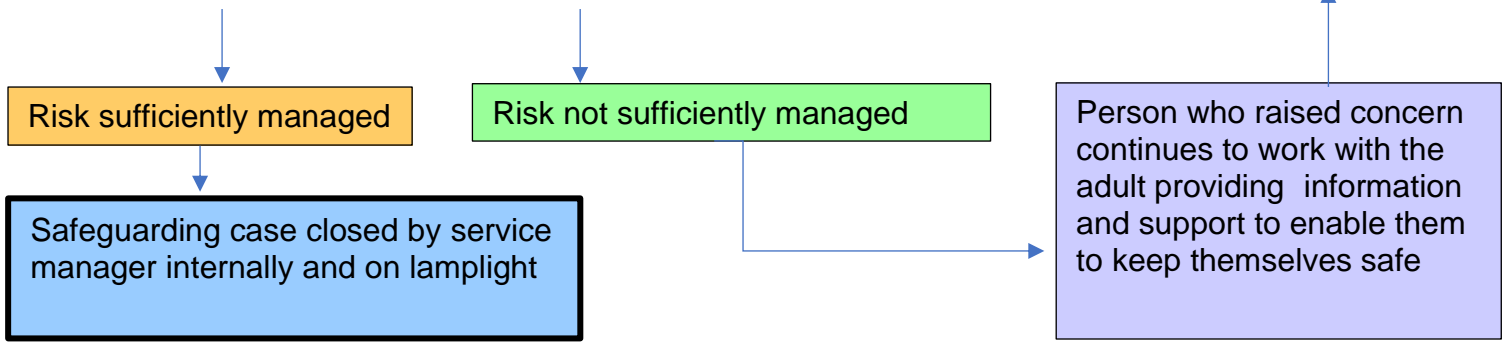
11. Useful Documents

- [RCPG: decision aid – making safeguarding referrals June 2017](#)
- [RCPG: top tips for making adult safeguarding referrals – June 2017](#)
- [Working together to safeguard children: July 2018](#)
- <https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees>

- <https://learning.nspcc.org.uk/child-protection-system/multi-agency-working-child-protection>
- <https://learning.nspcc.org.uk/child-abuse-and-neglect/online-abuse>
- <https://learning.nspcc.org.uk/child-abuse-and-neglect/bullying>

12. Safeguarding concern flowchart





13. Internal safeguarding concern flowchart

If the safeguarding concern involves a Respond staff member, volunteer, Trustee, sessional worker, agency staff, student or activity:

Continue with the below steps alongside the procedure:



14. SAFEGUARDING REFERRAL PATHWAYS

CHILDREN OR YOUNG PEOPLE

If a child is in immediate danger call 999 straight away.

If you think a child or young person is at risk or being abused or neglected, contact the children's social care team at their local council. If you do not know where they live, contact your local council's team, the NSPCC or the Police for advice.

You can search for the local council's team here:

<https://www.gov.uk/report-child-abuse-to-local-council/>

Contact the NSPCC if you want to discuss your concerns and get advice.

NSPCC Telephone: 0808 800 5000

<https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/report/>

www.anncrafttrust.org

ADULTS

Find the local safeguarding board:

<https://www.anncrafttrust.org/resources/find-your-nearest-safeguarding-adults-board/>

If you have any problems contacting the local authority, or they don't respond appropriately, you can call the Care Quality Commission: 03000 616161.

Forced Marriage Unit

fm@fcdo.gov.uk

Telephone: 020 7008 0151

From overseas: +44 (0)20 7008 0151

Monday to Friday, 9am to 5pm

Out of hours: 020 7008 1500 (ask for the Global Response Centre)

Confidential services provide information and support to an older person or anyone concerned about an older person who is at risk of, experiencing or recovering from any form of abuse or neglect

Hourglass helpline on 0808 808 8141

www.wearehourglass.org

Learning disability

Challenging Behaviour Foundation

For families & professionals caring for children & adults with severe learning disabilities & challenging behaviour.

0300 666 0126

National Autistic Society

For impartial, confidential advice and support on autism for anyone affected by or researching autism.

0808 800 4104

Sexual abuse

The Survivors Trust

Support & advice for anyone who has experienced rape or sexual abuse.

0808 801 0818

www.thesurvivorstrust.org

MOSAC (Mothers of Sexually Abused Children)

Supporting all non-abusing parents and carers whose children have been sexually abused.

0800 980 1958

www.mosac.org.uk

National Association for People Abused in Childhood (NAPAC)

Support line for adults who have suffered any type of abuse in childhood.

0808 801 0331

www.napac.org.uk

Elder abuse

Action on Elder Abuse

Help and advice on all aspects of elder abuse.

080 8808 8141

National Dementia Helpline

Information, support and advice about dementia.

03002221122

Domestic abuse

National Domestic Violence Helpline

Freephone 24hr national domestic violence helpline.

England: 0808 2000 247

Bright Sky UK

A directory of resources to help you find support in your area.

www.bright-sky.org.uk

Abuse in sport

NSPCC dedicated footballers' hotline

Free helpline for adults who experiences sexual abuse as a young footballer.

0800 023 2642

Mental health

Thinkaction

Support for people with mild to severe mental health difficulties.

0300 012 0012

Mind infoline

Information on mental health and where to get help.

0300 123 3393

Addiction

Drinkline

A free helpline for people concerned about their drinking, or someone else's.

0300 123 1110

FRANK

Friendly, confidential advice about drugs and drug use.

0300 123 6600

Advocacy

POhWER

Information, advice, support and advocacy services in England – to help your voice be heard.

0300 456 2370

VoiceAbility

If you need support, VoiceAbility will help you to speak up and be heard, have rights respects & be at the heart of decisions.

01223555800

Other

Victim Support

For anyone affected by crime in England or Wales.

08 08 16 89 111

Samaritans

Emotional support for people who are experiencing feelings of distress, despair or suicide.

08457 90 90 90 (24hrs)

Stop Hate Crime

Reporting + support for victims, witnesses & third parties.

0800 138 1625

www.report-it.org.uk

15. Respond Safeguarding Committee:

Role
Acting CEO
Interim Director of Services
Senior Therapist - Safeguarding Lead – Adults
Domestic Abuse Coordinator – Safeguarding Lead Domestic Abuse

Other Contacts

Role
Safeguarding Lead – Trustee
Clinical Governance -Trustee

Suicide risk Appendix

Responses to suicidal thoughts, feelings, or actions should be person centred and engaged with the individual's circumstances, including the reasons for the suicidal thoughts, ideations and risks. In terms of safeguarding the key principles of empowerment, prevention, proportionality, protection and partnership apply and making safeguarding personal.

The following steps can be followed:

- Risk assessment
- Crisis management/safety planning
- Problem solving
- Crisis prevention

Risk assessment

Staff and volunteers with their client, and network can use the following to assess the level of risk of suicidal action:

1. **Hopelessness** – the best single predictor of suicide risk
2. **Background knowledge** – current problems and past attempts
3. **Suicide intent** – the 'death question'
4. **Degree and seriousness of intent** – specific plans for suicide
5. **Risk factors** (gender, ethnicity, social isolation, role change eg. No meaningful role in life, recent separation or loss, poor physical health, especially long-term or not treatment responsive, history of violence to others, history of violent self harm, alcohol or drug problems, current mental illness)
6. **Factors that make suicide more or less likely** (more: immediate intention, choice of violent method, current symptoms of mental illness, recurrent drug or alcohol problem, past high risk attempt, likelihood of further bad news, self-imposed deadline, recent changes in behaviour, frequency of attempts), (less: looking forward to future events, if certain thing happens suicide won't take place, afraid of death; personal physical or mental damage if attempt not completed, impact on family or friends, who will look after children, no access to means of suicide)

What to ask about:

- Suicidal intent – thoughts of death
- Degree and seriousness, plan, means & measure to prevent detection
- Background – current problems
- Hopelessness, worthlessness, feelings of being trapped
- Symptoms of mental illness and/or signs of psychological distress, drug or alcohol use
- Past suicide attempts or self-harm
- Preparation for death – final acts, suicide note, will
- Coping mechanisms – what's stopped them from carrying it out so far

Crisis management

Ensuring safety:

- Identify if there's any means of lethality around, what is acceptable and available to the person
- Identify appropriate support, family, friends, community.

Problem solving

This is a solution focussed approach. Together with the client define the problem. Think about at least 3 different options and weight up the pros and cons of each. Think about the worst-case scenario of each together and support them to think about which action to take. Suicide is an increased risk if it feels as if it's the only option to take.

Crisis prevention

A collaborative exercise with the client and or their support network.

- Ensure immediate crisis has been diffused – have the difficulties been resolved? Are they likely to be repeated in the short-medium term?
- Explore physical signs, thoughts and feelings and triggers
- Explore what exactly led up to it
- Explore coping strategies
- Develop a crisis prevention plan, you can use the attached examples.

Procedure:

Listen, pay attention ask questions, reflect back your understanding

Clarify whether or not there are immediate needs for medical attention or urgent help to keep the person safe and respond accordingly. For urgent medical attention call 999, for non urgent medical help call 111 or the persons own GP.

share your concerns with your line manager or safeguarding lead they will help you to consider and manage the risk.. If this is a child you will need to let the school and/or parent know.

If possible person for the following few days / weeks. If you are not available or are there therapist make sure they know where to seek support

Document your risk assessment in a safeguarding alert form. You may use the below risk assessment form to evaluate the risks if you find this helpful.

Risk assessment form

Client Name:

Assessment carried out by:

**Date of next review:
out:**

**Date assessment was carried
out:**

What are the risks?	Who might be harmed and how?	What are they already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done

Organisations that can help:

Samaritans

Samaritans is a registered charity aimed at providing emotional support to anyone in emotional distress, struggling to cope, or at risk of suicide ..

24-hour support

Call: 116 123

Email jo@samaritans.org (response time 24 hours)

They also have a self-help app www.samaritans.org

Write to Freepost SAMARITANS LETTERS

Samaritans are open 24/7 for anyone who needs to talk. You can [visit some Samaritans branches in person](#). Samaritans also have a Welsh Language Line on [0808 164 0123](tel:08081640123) (7pm–11pm every day).

Papyrus

For the prevention of young suicide

Confidential suicide prevention advice contact HOPELINEUK. Open 9am–midnight every day.

0800 068 4141

pat@papyrus-uk.org

text 07860 039 967

Campaign Against Living Miserably (CALM)

0800 58 58 58

www.thecalmzone.net

Provides listening services, information and support for anyone who needs to talk, including a web chat.

Maytree Suicide Respite Centre

020 7263 7070

www.maytree.org.uk

Offers free respite stays for people in suicidal crisis.

Stay alive app

Styalive.app



Crisis Support

Quick access to UK national and local crisis support



Safety Plan

A mini-safety plan that can be filled out by anyone thinking about suicide



Staying Safe From Suicide

Steps to take when you or someone else is feeling suicidal



LifeBox

A place to store life-affirming photos



And more

Store Safety Contacts, Wellness Plan, Suicide Myth-Busting, and more

Examples of personal safety plans:

MY PERSONAL CRISIS PLAN

I know I'm triggered when I notice:

Some good ways to distract myself are:

Things that help me when I feel this way are:

Ways to keep myself and my space safe:

- _____
- _____
- _____
- _____
- _____
- _____

Some safe people I can reach out to are:

1 _____

2 _____

3 _____

Other resources I can use to get myself care:

- 1
- 2
- 3

CRISIS TEXT LINE:
text HOME to 741741

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Sample Safety Plan

Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. _____
2. _____
3. _____

Step 2: Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. _____
2. _____
3. _____

Step 3: People and social settings that provide distraction:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Place _____ 4. Place _____

Step 4: People whom I can ask for help:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Name _____ Phone _____