

This is policy provides essential information about safeguarding the welfare of children in our care.



IMPORTANT INFORMATION & INTRODUCTION



WORKING TOGETHER TO PROTECT CHILDREN FROM HARM

All colleagues should know from the onset that 'nothing is more important than children's welfare.

Children who need help and protection deserve high quality and effective support as soon as a need is identified' (Working Together to Safeguard Children). This expectation is fundamental to South West Intervention Services' ("SWIS") ethos and values.

This policy has been implemented to provide a summary of core safeguarding and child protection procedures. It has been created to provide colleagues with easy access to key safeguarding information.

This policy includes:

- The contact details of key people who have responsibility for safeguarding in SWIS.
- A Summary of Indicators of abuse or neglect.
- Allegations, disclosures, and whistleblowing.
- The 'harm threshold' serious and low-level concerns.
- Managing safeguarding concerns.
- Information about Local Authority Child Protection Services.
- A summary of what must happen if a colleague suspects or witnesses harm or abuse of children.

Please note that this policy does not replace our Safeguarding Policy Manual, which provides a wealth of contextual information and mandatory procedures for colleagues.



WHO'S WHO?

THIS PART EXPLAINS WHO HAS RESPONSIBILITY FOR SAFEGUARDING.

It includes the names and contact details of people who can help and those who must be told about any safeguarding incidents or concerns.

There are two specific safeguarding roles:

- The Nominated Safeguarding Lead (NSL) has overall responsibility for safeguarding in SWIS.
- The Designated Safeguarding Lead (DSL) has responsibility for safeguarding within their respective service.

The following table provides clarification of roles and contact details, which are listed in addition to the main office number: 01803 862320.

NAME	ROLE	TELEPHONE	EMAIL
Alison Moore	NSL	07498 563361	alisonmoore@southwestinterventionservices.com
Donna Greep	DSL	07958 331507	donna.greep@southwestinterventionservices.com
Emily Coulson	DSL	07398 843485	emily.coulson@southwestinterventionservices.com

WHAT DO THEY DO?

THE NOMINATED SAFEGUARDING LEAD (NSL)

The NSL has organisational responsibility for safeguarding and must be a company director. They must ensure that safeguarding measures are robust and effective throughout SWIS provisions.

The NSL's responsibilities are delegated to the DSL(s), who must inform the NSL of all safeguarding issues and concerns.

The only exception would be if the NSL is the subject of the concern, in which case the DSL can go directly to Daryl Holkham. This option may be used if colleagues have reasonable grounds to suspect or believe that the DSL and NSL will not manage the concern effectively. Daryl can be contacted by phone on 07969 973920 or by email daryl.holkham@tristone.healthcare. Daryl has extensive experience of safeguarding vulnerable groups.

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DESIGNATED SAFEGUARDING LEAD (DSL)

The DSL has responsibility for operational safeguarding. They ensure that safeguarding measures are robust and effective, which means that they must make sure children are protected from harm or the potential for harm.

The DSL is the first point of contact if a concern is raised. They must be told about all incidents, concerns or issues relating to safeguarding. They will coordinate actions and ensure that accurate records are taken.

The only exception would be if the DSL is the subject of the concern, in which case the NSL should be informed.

PLEASE NOTE: SWIS work within schools and the community. Where concerns are identified in schools (and other education settings) colleagues will liaise directly with the relevant setting's DSL. If concerns are identified in the community, colleagues will follow the LSCP protocols (Page 13).

INDICATORS OF ABUSE OR NEGLECT

This section provides a summary of indicators of abuse or neglect. It demonstrates that harm to children through abuse or neglect can take many forms.

ABUSE

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm.

Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

PHYSICAL ABUSE

Physical abuse is a form of abuse which may involve hitting, shaking, throwing, poisoning, burning, or scalding drowning, suffocating, or otherwise causing physical harm to a child.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

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EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development.

Emotional abuse may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, as well as preventing the child from participating in normal social interaction.

Emotional abuse may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may

SEXUAL ABUSE

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse.

Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

NEGLECT

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It includes self-neglect and any relate impact of financial abuse. Neglect may occur during pregnancy, for example, 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.

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ALLEGATIONS, DISCLOSURES & WHISTLEBLOWING

This part provides information about allegations, disclosures, and whistleblowing.

There is some debate around what exactly a disclosure is, and the difference between a disclosure and an allegation. To clarify:

- A DISCLOSURE is usually used within the context of responding from a position of belief.

 Therefore, a disclosure has "sufficient factual content and specificity."
- An ALLEGATION is a claim that someone has committed a crime or perpetrated wrongdoing, though the person making the claim has not submitted any proof of the assertion.

For the avoidance of doubt, in both cases colleagues must ensure that all allegations and disclosures must be reported to the DSL. If the DSL is the subject of the concern, please refer to the table (Page 6).

WHISTLEBLOWING

Whistleblowing is a term that is used when colleagues raise safeguarding or welfare concerns outside of the organisation.

SWIS are committed to ensuring that colleagues can speak up about concerns of actual or potential harm or abuse. We encourage an open, psychologically safe environment that empowers colleagues to raise concerns without fear of disadvantage. However, the need to 'blow the whistle' on unsafe or harmful practice is fundamental part of established safeguarding practice, but whistleblowing must only be used when:

- Concerns have been raised and there is a reasonable belief that they have not been taken seriously, ignored, or brushed over.
- Colleagues feel unable to raise concerns internally (i.e., within SWIS). Colleagues should note that reasonable justification for not raising the concern with managers and directors may be required. This could be, for example, if a colleague does not feel safe to raise a concern with senior colleagues in SWIS.

BLOWING THE WHISTLE

If you think SWIS is putting a child or young person at risk of harm and you are not being listened to, even if you're not certain, contact the NSPCC Advice Line to talk through your concerns.

You can call 0800 028 0285, email help@nspcc.org.uk or, if the child is in immediate danger, call 999.

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For clarity, you should call the Whistleblowing Advice Line if:

- You think your concern won't be dealt with properly or may be covered-up.
- You've raised a concern, but it hasn't been acted upon.
- You're worried about being treated unfairly.

STILL UNSURE ABOUT WHAT TO DO?

If colleagues are unsure or have any doubts about any of the above information, they must speak with a senior colleague who will provide further clarification. Additionally, colleagues should ensure that they have familiarised themselves with the following linked policies:

- Safeguarding Policy Manual
- Allegations Policy
- Whistleblowing Policy

Furthermore, SWIS will provide refresher training as required or necessitated.

WHO SHOULD BE NOTIFIED ABOUT A SAFEGUARDING CONCERN OR ALLEGATION?

This part aims to provide clear guidance on who should be notified in the event of a disclosure or allegation.

If the allegation or disclosure involves:	You must immediately notify:
A colleague, volunteer, or an agency professional	The Designated Safeguarding Lead (DSL)
The DSL	The Nominated Safeguarding Lead (NSL)
The On-call Manager	The DSL*
The NSL	The DSL
The DSL & the NSL	The Responsible Individual (RI)

^{*}If the DSL is the On-call manager, you must notify the NSL.

If colleagues have reasonable grounds to suspect or believe that the DSL and NSL will not manage the concern effectively, they have a further option of contacting Daryl Holkham (Director of Corporate Governance for Tristone Healthcare).

Daryl can be contacted by phone on 07969 973920 or by email daryl.holkham@tristone.healthcare. Daryl has extensive experience of safeguarding vulnerable groups.

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HARM THRESHOLDS

This part provides information about concerns that meet the harm threshold and concerns that do not meet the harm threshold. In both cases, all colleagues are required to act and inform the DSL.

Concerns that meet the harm threshold are those that indicate a colleague, an agency staff professional or contractor has:

- Behaved in a way that has harmed a child or may have harmed a child.
- Possibly committed a criminal offence against or related to a child.
- Behaved towards a child or children in a way that indicates [they] may pose a risk of harm to a child or children or young people.
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children, including where a child is not directly involved, such as by uploading extreme views on social media, carrying a weapon, drunken brawling, and relationship abuse for example (i.e., behaviours that should not be modelled to children).

It should be noted that the above points include 'behaviour that may have happened outside [the setting] that might make an individual unsuitable to work with children [or young people],' which 'is known as transferrable risk' (Keeping Children Safe in Education (KCSIE) (P. 86)). Examples include colleagues and other individuals who are connected with external facilities such as sports clubs, activity providers and other such institutions.

Concerns that do not meet the harm threshold are known as 'low-level concerns.' It is important to establish that the term 'low-level' does not mean that such concerns are insignificant. KCSIE provides the following guidance:

A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' - that an adult working [with children or any vulnerable group] may have acted in a way that:

- Is inconsistent with the staff code of conduct, including inappropriate conduct outside of work.
- Does not meet the harm threshold or is otherwise not serious enough to consider a referral to the Local Authority Designated Officer (LADO).

Examples of such behaviour in a children's home could include, but are not limited to:

- Being over friendly with children.
- Having favourites.
- Using their personal mobile phone to take pictures of children.
- Humiliating children.

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In all cases, it is essential that low-level concerns are shared with the DSL who will ensure that information is recorded, and that the concern is handled appropriately and effectively. This includes protecting colleagues from 'becoming the subject of potential false low-level concerns or misunderstandings' (KCSIE, P. 100).

STILL UNSURE ABOUT WHAT TO DO?

If colleagues are unsure or have any doubts about any of the above information, they must speak with a senior colleague who will provide further clarification.

Furthermore, SWIS will provide refresher training as required or necessitated.

GUIDANCE ON THE SPECTRUM OF BEHAVIOUR

CONCERN OR ALLEGATION THAT MAY MEET HARM THRESHOLD

Behaviour which indicates that an adult who works with children has:

- Behaved in a way that has harmed a child or young person, or may have harmed a child or young person; and/or
- Possibly committed a criminal offence against or related to a child or young person; and/or
- Behaved towards a child or children or a young person or young people in a way that indicates they may pose a risk of harm to children or young people; and/or
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children or young people.

LOW-LEVEL CONCERN

Does not mean that it is insignificant. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' – that an adult working with children or young people may have acted in a way that:

- Is inconsistent with an organisation's staff code of conduct, including inappropriate conduct outside of work; and
- Does not meet the harm threshold or is otherwise not serious enough to merit a referral to the LADO.

APPROPRIATE CONDUCT

Behaviour which is entirely consistent with the organisation's staff code of conduct, and the law.

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MANAGING SAFEGUARDING CONCERNS

This part provides step-by-step guidance on how we manage safeguarding concerns, and what we must do in the event of an allegation or disclosure that meets the harm threshold.

INITIAL CONSIDERATIONS

The procedures for dealing with allegations need to be applied with common sense and judgement. Some safeguarding concerns may be so serious they require immediate intervention by Children's Services Social Care and the Police as appropriate to the circumstances.

STEP-BY-STEP PROCEDURE

If an allegation is made, or it is suspected or reported that a colleague has mistreated or caused significant harm to a child or young person, it is imperative that the following process is followed.

STEP ONE

Upon receipt of an allegation or disclosure, colleagues must report all details to the DSL as soon as possible. If "out-of-hours," colleagues must inform the manager on call, who will in turn notify the DSL at the first available opportunity.

If the DSL is the subject of the concern, colleagues should refer to page 2.

STEP TWO

It is imperative that every reasonable effort is made to ensure that the rights of the child/children, and colleagues, are protected and promoted. All action taken must be recorded in a safeguarding log, and the welfare of children concerned must be treated as a priority.

The colleague who is the subject of the concern may be suspended from work or asked to take 'garden leave.' Suspended colleagues or those on garden leave will remain on full pay during the period of suspension from duties or garden leave (excluding payments that may have been made for sleeping in, etc.).

Colleagues subject to these measures will be provided with a single point of contact to support their welfare and respond to any queries (some of which may not be addressed due to any ongoing sensitivities). We are clear that colleagues must be fully supported during the investigation process.

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STEP THREE

The colleague who is the subject of the concern should only be informed about the allegation after consulting with the LADO. Colleagues must note that where a Strategy Discussion is needed, or the Police or other statutory agencies may need to be involved, this should not be done until all relevant agencies have been consulted and critically, they have agreed upon what information can be disclosed to the subject of the concern. If the subject of the concern is a member of a trade union or a professional association, they should be advised to seek support from that organisation.

STEP FOUR

During the enquiry, the colleague who is the subject of the concern will be told not contact or discuss the matter with colleagues or children.

STEP FIVE

If there is cause to reasonably believe the child has suffered or is likely to suffer significant harm a Strategy Meeting will be convened. A Section 47 'Strategy Meeting' will involve all relevant professionals (including any agency staff provider). They will discuss the allegation and decide the next steps to take. This may involve an "interview under caution" carried out by the Police, and a joint interview of the child/children involved by the Police and local authority.

STEP SIX

Once the enquiry is complete, the colleague who is the subject of the allegation shall be informed of the outcome(s), where it is appropriate to do so. The decision will be made in consultation with relevant agencies. The following definitions will be used when determining the outcome:

- SUBSTANTIATED: There is sufficient evidence to prove the allegation.
- MALICIOUS: There is sufficient evidence to disprove the allegation or a deliberate act to deceive.
- FALSE: There is sufficient evidence to disprove the allegation.
- UNSUBSTANTIATED: There is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.
- UNFOUNDED: To support cases where there is no evidence or proper basis which supports the allegation being made.

Depending upon the outcome of the enquiry, disciplinary measures may be invoked. Colleagues should note that even if the concerns have not been identified as 'substantiated' SWIS may still proceed with disciplinary measures if there is evidence of behaviour that is consistent with misconduct or gross misconduct. This also applies if the Police decide there are insufficient grounds for a criminal investigation or conviction.

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STEP SEVEN

If the outcome of the process confirms that an allegation or disclosure was malicious, unsubstantiated, false, or unfounded, the colleague will be debriefed and asked to participate in a 'Back to Work' interview. Likewise, if there have been grounds for disciplinary measures that have not resulted in dismissal, the colleague will be debriefed and asked to participate in a 'Back to Work' interview. In both scenarios, the returning colleague will have the opportunity to discuss any unresolved feelings or concerns with a manager.

If the outcome of the process is substantiated, SWIS will follow any recommendations and required actions arising from relevant agencies. This will include a notification to the Disclosure and Barring Service (DBS). In all cases where abuse or harm is substantiated, this will amount to gross misconduct and dismissal.

LOCAL AUTHORITY CHILD PROTECTION SERVICES

This part explains the roles and functions of local authority child protection servcies. In particular, information is provided about Multi-Agency Safeguarding Hubs (MASH), Emergency Duty Team (EDT), Local Safeguarding Children Partnerships (LSCPs) and the Local Authority Designated Officer (LADO).

MULTI-AGENCY SAFEGUARDING HUB (MASH)

The Multi Agency Safeguarding Hub (MASH) brings key professional together to facilitate early, better quality information sharing, analysis, and decision-making, to safeguard children, young people, and vulnerable adults more effectively. Within the MASH, information from different agencies will be collated and used to decide what action to take. As a result, the agencies will be able to act quickly in a coordinated and consistent way, ensuring that children and vulnerable adults are kept safe. Please note: Not all local authorities use the term Multi-Agency Safeguarding Hub (MASH) and have provisions that meet "MASH" duties under a different name.

The MASH acts as the first point of contact, receiving new safeguarding concerns/enquiries relating concerns about abuse, neglect, or concerns about potential/actual harm impacting upon children.

EMERGENCY DUTY TEAM (EDT)

The Emergency Duty Team (EDT) deals with social care emergencies outside office hours involving vulnerable children or adults.

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THE POLICE

Call 999 if the child is at immediate risk of harm. If colleagues know or suspect that a child is in danger, the Police must be called. All colleagues notifying the Police must inform the DSL/senior On-Call immediately. Accurate records must be taken and retained within the child's case files.

LOCAL AUTHORITY DESIGNATED OFFICER (LADO)

Every local authority should have a Local Authority Designated Officer (LADO) or team of officers (either as part of multi-agency arrangements or otherwise). Their role is to be involved in the management and oversight of allegations against people who work with children.

Arrangements should be put in place to ensure that any allegations about those who work with children are passed to the LADO without delay.

LOCAL SAFEGUARDING PARTNERSHIP BOARDS

Every Local Authority in the country must have Multi-Agency Safeguarding Arrangements (MASA) in partnership with the Police and Health.

The priorities of the Devon Safeguarding Children Partnership (Devon SCP):

- Improving outcomes of pre-birth services and for infants.
- Improving partnership working in compliance with Working Together, focusing on areas of shared responsibility and multi-agency responses to families.
- Improving response to adolescent need through developing multi-agency contextual safeguarding approaches.
- Improving the partnership response to domestic abuse to prevent harm to children.

REPORTING CONCERNS

If you are concerned about a child's welfare or worried they are being abused, you can make a referral to the Devon Multi Agency Safeguarding Hub (MASH) by phoning 0345 155 1071 or e-mail: mashsecure@devon.gov.uk.

Further information can be found here: <u>Devon Children and Families Partnership - Worried that a child is at risk?</u>

The MASH Referral Form can also be used to share information with your local office. More information on how to make a referral can be found here.

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If you are unsure the <u>Devon Children and Families Partnership Procedures</u> will be able to help guide you or the <u>Threshold Tool</u>, which tells you which types of services a family may need to get support Alternatively, you can call ChildLine on 0800 1111 or by visiting <u>www.childline.org.uk</u>

If you have concerns about how child protection issues are being handled in your own or another organisation then you can contact the Whistleblowing Advice Line which offers free advice and support on 0800 028 0285 or E-mail help@nspcc.org.uk.

RELEVANT DOCUMENTS

What to do if you're worried a child is being abused: Advice for practitioners

WHAT MUST HAPPEN IF A COLLEAGUE SUSPECTS OR WITNESSES HARM OR ABUSE OF CHILDREN

This part summarises mandatory safeguarding procedures that must be followed by all colleagues in the event that harm or abuse is suspected or witnessed.

If a child says or behaves in a way that indicates they are at risk of abuse or harm, colleagues must record the concern and notify the DSL without delay. They must:

- Listen and take seriously what the child says and never express disbelief.
- Do not make any suggestions about what has taken place, or how it came about, or question the child except to clarify what they are saying.
- Allow the child time to express themselves', but do not press for detail beyond what is minimally necessary to be clear that some form of abuse or harm has taken place.
- Do not ask the child to repeat what has been said to anyone else before referring.
- Be calm and reassuring and do not make assumptions.
- Avoid making judgements about what is being said, but if required reassure the child that they are not responsible for what may have happened.
- Do not promise to keep secrets. Be clear that you need to refer the matter on and to whom.
- Tell the child that we will help and keep them safe.
- Write down what has been said, using the child's exact words and what you said in response. Be factual and clarify any opinion.
- Sign and date report, which should be sent to the DSL without delay.

IF A CONCERN IS WITNESSED AT A NON-SWIS SETTING, COLLEAGUES MUST INFORM THE SAFEGUARDING LEAD IN THE SETTING (AS WELL AS THE SWIS DSL) OR THE RELEVANT MASH.

IF A CHILD IS BELIEVED TO BE A VICTIM OF CRIMINAL BEHAVIOUR, THE POLICE MUST BE CALLED WITHOUT DELAY.

South West Intervention Services (SWIS)

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