24 - Safeguarding Children and Vulnerable Adults Policy

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Contents

1.	Introduction
2.	Purpose of the Policy2
3.	Scope of this Policy2
4.	Legislation2
5.	Definitions
6.	Policy Responsibilities
7.	Implementation Stages4
8.	Training and support for employees, contractors and consultants
9.	Professional boundaries 6
10.	Guidance for employees, contractors and consultants who become aware of concerns
12.	Reporting form procedure
13.	Making contact with an external agency8
14.	Managing information
15.	Preventing Radicalisation9
16.	Communicating and reviewing the policy10
17.	Policy Review10
18.	Compliance

N.B. Please ensure that all written correspondence relating to Safeguarding or welfare concerns are emailed to: safeguarding@braininhand.co.uk

1. Introduction

Brain in Hand Ltd makes a positive contribution to a strong and safe community and recognises the right of every individual to stay safe.

Brain in Hand Ltd comes into contact with children and adults at risk through the provision of Specialist Support to use our system and through the provision of associated Response Services.

2. Purpose of the Policy

This policy seeks to ensure that Brain in Hand Ltd undertakes its responsibilities with regard to the protection of children and adults at risk and will respond to concerns appropriately. The policy establishes a framework to support employees, unpaid employees, consultants and contractors in their practices and clarifies the organisation's expectations.

3. Scope of this Policy

- 3.1 The scope of this Safeguarding Policy is broad ranging and in practice, it will be implemented via a range of policies and procedures within the organisation. These include:
 - Whistleblowing ability to inform on other employees / practices within the organisation
 - Grievance and disciplinary procedures to address breaches of procedures / policies
 - Health and Safety policy, including lone working procedures, mitigating risk to employees and clients
 - Equal Opportunities policy ensuring safeguarding procedures are in line with this policy, in particular around discriminatory abuse and ensuring that the safeguarding policy and procedures are not discriminatory
 - Disclosure and Barring Service Policy ensuring all employees and contractors are appropriately vetted to work with our users and/ or have access to our users' data and that this information is maintained, reviewed and regularly updated
 - Recruitment of Ex-Offenders Policy
 - Data protection how records are stored and access to those records
 - Confidentiality ensuring that service users are aware of staffs' duty to disclose
 - Employees, unpaid employees, consultants and contractors' induction and training.

4. Legislation

The principal pieces of legislation governing this policy are:

- Working Together to Safeguard Children 2018
- The Adoption and Children Act 2002:
- o The Children Act 2004
- Safeguarding Vulnerable Groups Act 2006
- o Care Standards Act 2000
- Public Interest Disclosure Act 1998
- Disclosure and Barring Service 2012
- o Mental Health Act 2007
- o Mental Capacity Act 2005
- NHS and Community Care Act 1990



- o Rehabilitation of Offenders Act 1974
- Counter-Terrorism and Security Act 2015
- o The Equality Act 2010
- o Modern Slavery Act 2015
- Counter Terrorism and Security Act 2015 (inc. the 'Prevent Duty)

5. Definitions

Safeguarding is about embedding practices throughout the organisation to ensure the protection of children and adults at risk wherever possible. In contrast, child and adult protection is about responding to circumstances that arise.

Abuse is a selfish act of oppression and injustice, exploitation, and manipulation of power by those in a position of authority. This can be caused by those inflicting harm or those who fail to act to prevent harm. Abuse is not restricted to any socio-economic group, gender, or culture.

It includes the following:

- Physical abuse
- Domestic violence or abuse
- Sexual abuse
- Psychological or emotional abuse
- Financial or material abuse
- Modern slavery
- Discriminatory abuse
- Organisational or institutional abuse
- Neglect or acts of omission
- Self-neglect

Definition of a child

A child is any person under the age of 18 (as defined in the United Nations convention on the Rights of a Child).

Definition of an Adult at Risk

An adult at risk is a person aged 18 years or over who may be unable to take care of themselves or protect themselves from harm or from being exploited.

This **may** include a person who:

- Is elderly and frail
- Has a mental illness including dementia
- Has a physical or sensory disability
- Has a learning disability
- Has a severe physical illness
- Misuse drugs or alcohol
- Is homeless.
- 6. Policy Responsibilities

6.1 All employees and contractors (paid or unpaid) have responsibility to follow the guidance laid out in this policy and related policies, and to pass on any welfare concerns using the required procedures.

We expect all employees and contractors (paid or unpaid) to promote good practice by being an excellent role model, contribute to discussions about safeguarding and to positively involve people in developing safe practices.

- 6.2 The Senior Leadership Team (SLT) have responsibility to ensure:
 - The policy is in place and appropriate
 - The policy is accessible, implemented, monitored and reviewed
 - Liaison with and support for the Designated Safeguarding Officer
 - Sufficient resources (time and money) are allocated to ensure that the policy can be effectively implemented.

The Senior Leadership Team member with responsibility for Safeguarding is the Service Delivery Director.

6.3 The Designated Safeguarding Officer (DSO) has the following responsibilities:

- Promote the welfare of children and vulnerable adults
- Ensure employees and contractors (paid and unpaid) have access to appropriate training/information
- Receive employees concerns about safeguarding and respond seriously, swiftly, and appropriately
- Maintains Single Central Record of all employees, contractors and volunteers DBS status and Safeguarding training
- Maintain an up-to-date Register of Risk, which includes the Safeguarding Incident Log
- Keep up to date with national and local arrangements for safeguarding and DBS
- Develop and maintain effective links with relevant agencies
- Take forward concerns about responses.
- 6.4 The Safeguarding Team Leads have the following responsibilities:
 - Works in conjunction with the DSO and deputises in the DSO's absence, with support from SLT
 - Reviewing with the DSO the information to aid clarification of risk as low/medium/high
 - Acknowledges receipt and responds to incoming enquiries and incident forms
 - Makes outbound calls to support those reporting an incident e.g., Specialists or clients
 - Escalates to DSO Medium and High -risk Incident Reports
 - Develops Safeguarding resources and delivers Safeguarding training to staff and contractors
 - Ensure that all employees and contractors understand their safeguarding responsibilities, policies and procedures
 - Act as a point of contact for safeguarding concerns within their teams
 - Supports the Safeguarding and welfare concern audits
 - Supports dissemination of lessons learnt objectives.

7. Implementation Stages

7.1 Safe Recruitment

Brain in Hand Ltd ensures safe recruitment through the following processes:



- Job or role descriptions for all roles involving contact with children and adults at risk contain reference to safeguarding responsibilities.
- Shortlisting is based on formal application processes and not on provision of CVs.
- Interviews are conducted according to equal opportunity principles and interview questions are based on the relevant job description and person specification.
- DBS checks will be conducted for specific roles for all employees (paid or unpaid), consultants and contractors working with children and adults at risk.
- Brain in Hand Ltd will accept existing DBS Disclosures from other authorities or organisations providing the applicant has a suitable DBS Certificate and they are subscribed to a DBS Update Service.
- It is a criminal offence for individuals barred by the DBS to work or apply to work with children or adults at risk in a wide range of posts.
- If a new employee starts work before DBS clearance is given, then no unsupervised contact with children or adults at risk is permitted until the DBS clearance is confirmed.

7.2 Disclosure and Barring Gap Management

The organisation commits resources to providing DBS check on employees (paid or unpaid) and whose roles involve contact (e.g. in-person or by phone, email, webchat, video call or other mechanism) with children and /or adults at risk.

In order to avoid DBS gaps, the organisation will maintain and review a list of roles across the organisation which involve contact with children/adults at risk.

Risk assessments will be carried out on any member of the staff team:

- for whom we have not yet received a completed DBS application and until such time as BiH have received a completed DBS. Any member of BiH employees without a completed DBS we have verified, must be supervised if in contact with a BiH User
- who has a gap in their employment history
- for whom we have a declaration on a completed DBS.

All DBS risk assessments must be completed by HR or the DSO, these will need to be completed prior to the first day of employment, before they have access to BiH user data or commence any duties with children and /or adults at risk. Employees who are considered as being too high risk to enter employment with Brain in Hand will be informed at the earliest opportunity and before their planned start date.

Risk assessments are conducted sensitively and only those conducting the risk assessment (HR and DSO) will have access to them, they will also be stored and destroyed in line with our GDPR Policy. Neither HR nor the DSO will share information from the risk assessment with their proposed line Manager, only that the job offer has been withdrawn.

In addition to checks on recruitment for roles involving contact with children/adults at risk, the following processes are in place:

- A 3 year rolling programme of DBS re-checking is in place for holders of all identified posts.
- Existing employees (paid or unpaid) who transfer from a role which does not require a DBS check to one which involves contact with children / adults at risk will be subject to a DBS check.

7.3 Service delivery contracting and sub-contracting

- There will be systematic checking of safeguarding arrangements of organisations contracted to supply services to Brain in Hand Ltd that might include contact with children or vulnerable adults
- Contracts and memorandums of agreement for such arrangements will include clear minimum requirements, arrangements for safeguarding and non-compliance procedures
- As part of the Quality Assurance (QA) process, evidence of an employee's / contractor's DBS and mandatory training will be required.

8. Training and support for employees, contractors and consultants

Brain in Hand Ltd commits resources for induction, training of employees and contractors (paid and unpaid) and consultants, and effective communications and support mechanisms in relation to Safeguarding.

8.1 Induction and Training

All employees, contractors and consultants who, through their role, are in contact with children and / or adults at risk will complete safeguarding training at an appropriate level.

8.2 Support

We recognise that involvement in situations where there is risk or actual harm can be stressful for employees concerned. The mechanisms in place to support employees include:

- Debriefing support for paid and unpaid employees so that they can reflect on the issues they have dealt with.
- Signposting to further support as appropriate; e.g., access to counselling.
- Employees, contractors and consultants who have initiated protection concerns will be contacted by the DSO within 5 working days.

9. Professional boundaries

Professional boundaries are what define the limits of a relationship between a service or support provider (including, non-medical helpers) and a client. They are a set of standards we agree to uphold that allows this necessary and often close relationship to exist while ensuring the correct detachment is kept in place.

Brain in Hand Ltd expects employees to protect the professional integrity of themselves and the organisation.

All employees and contractors working directly with users will receive training on Professional Boundaries.

The Employee Handbook also contains guidance on employees (paid or unpaid) contractors and consultants conduct.

Breaching professional boundaries and / or organisational policies could result in disciplinary procedures.

10. Guidance for employees, contractors and consultants who become aware of concerns

- 10.1 If an employee or contractor is notified, or becomes aware through the declaration, indication or disclosure (behaviourally, verbally or in writing) of an individual, that a child or an adult at risk is being, or has been, abused or is at risk from themselves or others, the employee or contractor must:
 - React calmly.
 - Reassure the person they were right to disclose the matter.
 - Take what is said seriously. Be clear that they cannot keep secrets and that they must pass the information on if they think a child or adults at risk has been or is being harmed or is at risk of harm in some way.
 - Keep questions to an absolute minimum to ensure a clear and accurate understanding of what is being said.
 - Only ask questions if they need to clarify what they are being told. They must not ask about explicit details as it is up to the external agency to investigate fully.
 - Clarify the facts about what happened only and avoid asking leading questions.

11. Concerns for Welfare or safety of Child or Adult at Risk

- 11.1 The employees, contractors and consultants must make it clear that if they are concerned about the wellbeing or safety of any child or adult at risk then they will report the risk to the Brain in Hand Safeguarding Team, who may notify other services as appropriate in accordance with the Brain in Hand Terms and Conditions of Use and Safeguarding Policy.
- 11.2 Where an **isolated concern for welfare** is raised the user should always be encouraged to disclose this to the appropriate person themselves or consent gained for the Brain in Hand Safeguarding Team to escalate externally on their behalf. If the Service User is under the age of 18, all welfare issues will be reported to the Safeguarding Team.
- 11.3 Where there are **cumulative welfare concerns** for a user, or a user is at **increased risk of harm**, consent is not required but the user must be informed that the concern is being reported to the Brain in Hand Safeguarding Team and may be escalated externally if appropriate. Only where it is deemed unsafe or placing the user at more risk may the risk be reported to the Brain in Hand Safeguarding Team without the users' knowledge.
- 11.4 If there is a concern for the **immediate safety** of a child or adult at risk, **a high risk of harm** to the service user, or a **risk of the service user harming others**, this should be escalated to the appropriate 999 service and their emergency contact, and then reported to the Safeguarding Team once the risk has been addressed. In such high-risk situations the risk can be escalated externally with or without consent from the user, but the user should still be informed. Only where it is deemed unsafe or placing the user at more risk may the risk be escalated to the emergency services or the Brain in Hand Safeguarding Team without the user's knowledge.
- 11.5 The Brain in Hand Safeguarding Team may (where it is in the vital interest of the user or others) escalate cumulative welfare concerns, high risks of harm or immediate risks of harm by contacting the service user's school, college or university, Student Support Team or Non-Medical Help Provider, the individual's support provider or referring agency, their Local Authority Safeguarding Team, or the police or other emergency services as appropriate.
- 11.6 If the person who is disclosing abuse or harm is a child or adult at risk, they may not wish to take the matter further than the person they have informed. They may fear the effect this will have on their or another person's family or may fear forms of retribution. The child or adult at risk must be helped to understand why the report must be made and what is likely to happen as a result. This discussion need not happen if on the balance of probabilities having the discussion could result in a worsening situation or further avoidable harm.

11.7 If a child or adult at risk alleges that they or another child or adult at risk is a cause for concern, Safeguarding Procedures must be followed in respect of both parties. Brain in Hand will attempt to ensure their disclosure is handled confidentially, although no absolute guarantees will be offered.

12. Reporting form procedure

- 12.1 All child protection or safeguarding concerns must be recorded on a Brain in Hand Safeguarding Incident Form and emailed securely to safeguarding@braininhand.co.uk
- 12.2 Where forms are unable to be submitted securely, to ensure delays do not occur, a report may be made by phone, and a signed or emailed copy must follow within one week (5 working days).
- 12.3 All forms must be completed, reviewed, and relayed onwards if appropriate within 24 hours of having a concern or an incident occurring.
- 12.4 All forms will be reviewed by the Safeguarding Team within 24 hours (1 working day) of receipt.
- 12.5 These records may need to be disclosed to third parties such as childrens services, police, the courts and solicitors, so every care must be taken that they are clear, accurate and objective.
- 12.6 Employees and contractors should take care not to write speculative comments and stick to the facts given by the person raising the concern.
- 12.7 Employees' opinions may in some circumstances be crucial, but they must be recorded as an opinion and evidence accompanied to support these opinions.
- 12.8 All fields should be completed and where information is non-applicable, 'unknown' or 'unavailable' must be clearly noted.
- 12.9 The person filling in the form is responsible for the contents and ensuring it is emailed securely to safeguarding@braininhand.co.uk.

13. Making contact with an external agency

- 13.1 The decision whether to make a referral to an external agency will be based on the information provided in the Incident form and following review by the DSO and SLT if appropriate. Any other issues Brain in Hand Ltd is aware of in relation to the child or adults at risk should be taken into account, and any risks associated with not taking action should be assessed and documented.
- 13.2 The referral to the appropriate services will be made by the DSO or a member of the Safeguarding Team under the guidance of the DSO or the Deputising DSO.
- 13.3 If appropriate, after discussing with a member of SLT and taking advice from the NSPCC helpline, it is the responsibility of the DSO to decide whether the parents/carers of the child or adults at risk should be informed of the report, if they have not already been made aware of this.
- 13.4 If the child or adults at risk has a known contact with an external agency, they must be informed of Brain in Hand Ltd's concerns.
- 13.5 Once the referral has been made in writing, the DSO or Deputising DSO must ensure he/she has a written record that this has been received. This must be stored with the reporting form and any other paperwork relating to the case in line with agreed processes.
- 13.6 If a referral is made outside the organisation, it is the responsibility of the DSO or, under the guidance of the DSO, the Safeguarding Team member to ensure that the referral has received appropriate attention from the external agency within 7 days. The DSO or the Safeguarding Team Member should confirm this and record the action on the form.

14. Managing information



- 14.1 Information will be gathered, recorded and stored in accordance with the Data Protection Policy and Access to Confidential Information Policy.
- 14.2 All employees must be aware that they have a professional duty to share information with other agencies in order to safeguard children and adults at risk. The public interest in safeguarding children and adults at risk may override confidentiality interests. However, information will be shared on a need to know basis only, as judged by the DSO.
- 14.3 All employees must be aware that they cannot promise service users or their families / carers that they will keep secrets.
- 14.4 All concerns and any discussions about the welfare of a child or adults at risk must be recorded and reported on a safeguarding incident form it must include whether further action is taken.
- 14.5 Safeguarding incident form and associated records will be logged on the safeguarding Incident Log (Register of Risk), with relevant documents / emails / records attached to the record, audited for any patterns or trends and lessons learnt objectives. This Log is held securely on the shared drive in a restricted folder. Any Hard copies must then be shredded.
- 14.6 Only the DSO, Safeguarding Team Members and appropriate members of SLT (including CEO) will have access to these records. Any other employees will need to request access from the DSO, which will only be granted only for a valid reason.
- 14.7 Verbal discussions around any child protection or safeguarding case will be conducted confidentially and not in the open office. Verbal conversation should be recorded in written format and attached to the incident log case file.
- 14.8 Any information sent through the post around a child protection or safeguarding case will be marked 'Confidential – addressee only' for the attention off the Designated Safeguarding Officer.
- 14.9 Sensitive information sent in emails around a child protection or safeguarding case must be encrypted or, included in a password-protected document attached to the email.

15. Preventing Radicalisation

Under Section 26 of the Counter-Terrorism and Security Act 2015, and as part of our safeguarding procedures, all employees and contractors working for and on behalf of Brain in Hand Ltd must have "due regard to the need to prevent people from being drawn into terrorism".

The Prevent Strategy is part of the Government's overall counter-terrorism strategy, known as CONTEST. The specific aim of Prevent is to stop people becoming drawn into terrorism.

The three specific strategic objectives under Prevent are:

- Respond to the ideological challenge of terrorism and the threat we face from those who promote it
- Prevent people from being drawn into terrorism and ensure they are given appropriate advice and support
- Work with sectors and institutions where there are risks of radicalisation that we need to address.

The following list of behaviours may indicate an individual as at risk of radicalisation:

- Expressing opinions that indicate a support for terrorism or violence and / or for the leaders of terrorist organisations
- Possession of violent or extremist material either in hard copy or digital formats
- Attempts to access violent extremist websites and associated password protected chat rooms
- Possession of material relating to weapons and explosives
- Possession of material relating to military training skills and techniques (outside of British Armed forces recruitment / careers material)

• Social isolation from family, peers and social events, particularly if this is in conjunction with association with proscribed organisations or individuals known to hold extremist views

The above list is not exhaustive, and it should be noted that the behaviours listed above are not in themselves indicators of criminality or criminal intent. Prevent is about looking for signs that an individual may be at risk and benefit from some supportive intervention.

There is evidence that radicalisation can be linked to a crisis of identity and uncertainty about belonging, which may be triggered by experiences of victimisation, racialism, or abuse, hence the importance of identifying clients who may be vulnerable due to issues and challenges within their personal and home life.

Employees or contractors should not investigate concerns or allegations themselves but should report them immediately to the Brain in Hand DSO. Employees and contractors need to act without delay by speaking with the designated person. Referral should follow Brain in Hand Ltd's existing safeguarding protocols.

16. Communicating and reviewing the policy

Brain in Hand Ltd will ensure that this Safeguarding Policy is readily accessible on their website.

17. Policy Review

This policy will be reviewed by the DSO and SLT at least every 2 years and when there are changes in legislation.

18. Compliance

This Policy meets the requirements of Technology and Enabled Care Quality Standard Framework control 2.4, 2.9, 2.10, 2.12, 3.3, 5.5 and 8.8.