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| **POLICY AND PROCEDURE FOR SAFEGUARDING ADULTS, YOUNG PEOPLE AND CHILDREN AT RISK OF ABUSE OR NEGLECT** |

**Policy reference number:**

Care/safeguardingPOL/08.22/07

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**Policy Application:**

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| Charity-wide | Divisions | Department |
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**Job title of the author:** Safeguarding Manager

**Purpose of the policy:** To ensure that David Lewis safeguards the welfare of adults, young people and children who may be at risk of abuse or neglect

**Responsibilities for implementation:**

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| --- | --- | --- | --- |
| Charity-wide Policy | - | Executive Team Members as appropriate | ✓ |
| Divisional Policy | - | Clinical/Managerial Heads of Division | 🗸 |
| Departmental Policy | - | Clinical/Managerial Heads of Department | 🗸 |

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| **For immediate guidance on what to do if you have a concern, suspicion or allegation of abuse please see flow chart** **on *page 16*** |

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**The Policy for safeguarding adults at risk of abuse or neglect**

**1 Introduction**

DL recognises that children, young people and adults at risk can be subjected to many forms of mistreatment or Abuse and the safety of those in our care is of paramount importance. DL aims to provide all children, young people and adults with as safe an environment as possible. Safeguarding is everyone’s business. DL believes that it is always unacceptable for adults, young people and children to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all adults at risk in line with the Care Act (2014) and Children’s Act (1989 /2004). It is the aim of DL to respond effectively to any such forms of mistreatment or Abuse and we intend to achieve this by ensuring that DL complies with statutory and local guidance for safeguarding and promoting the welfare of children, young people and adults at risk by creating a safe environment.

**2 Objectives**

The purpose of this policy is to ensure that all concerns, suspicions and allegations of Abuse are taken seriously. Following an independent review of the David Lewis procedures and after discussion with the safeguarding authority the Children’s and adults safeguarding policies were combined. The procedures in the policy must be followed for all people we support and any breach of these procedures will be treated seriously under the David Lewis Disciplinary Policy. If a member of staff is unable or prevented from following procedures they must immediately inform the Lead Person.

This policy and procedure applies to all David Lewis staff and visitors whose work brings them into contact with adults, young people and children that may be at risk of abuse or neglect.

David Lewis aim to keep adults, young people and children at risk safe by:

• Preventing abuse and neglect wherever possible

• Supporting adults, young people and children in a way that supports them in making choices and having control about how they want to live

• Taking all safeguarding enquiries seriously and acting upon them.

• Raising awareness about what abuse is, how to stay safe and how to raise a concern about the safety or wellbeing of an adult, young person or child.

In safeguarding adults and those young people between 16 and 18, David Lewis will always consider the best interests of the individual at risk in line with The Mental Capacity Act (MCA, 2005) and corresponding Code of Practice. See separate policy for more details.

**3 Legislative Framework**

**Adults**

The Care Act (2014) and corresponding guidance (Department of Health, 2014) is legislation about care and support for adults in England and came into force on 1st April, 2014. The Care Act, outlines key principles for supporting adults who have been or are at risk of abuse or neglect and; provides a framework for local authorities and partner organisations for making safeguarding enquiries.

**Children**

The standards in this policy build on and incorporate legislation and Government expectations in respect of children. This includes the Children Acts 1989 and 2004 and the Government’s Every Child Matters agenda. In 2010 HM Government issued ‘Working Together to Safeguard Children’. The guidance is for statutory and voluntary organisations alike and covers all the expectations of Government in relation to safeguarding children in England. This has been further updated in 2013 and more recently in 2015.

Keeping Children Safe in Education 2022 guidance applies to all schools and colleges and is for: head teachers, teachers, staff, governing bodies, proprietors and management committees. It sets out the legal duties you must follow to safeguard and promote the welfare of children and young people under the age of 18 in schools and colleges. All school and college staff should read part 1 of this guidance.

See appendix 1 for Part 1 and links to other relevant legislation and guidance.

**4 What is safeguarding**

Child protection as defined in Working together to safeguard children is an activity which is undertaken to protect specific children who are at risk of suffering ‘significant harm’. Safeguarding them from maltreatment and preventing impairment of children's health or development. Thus ensuring that children are growing up in environments consistent with the provision of safe and effective care whilst taking action to enable all children to have the best life chances. The legal definition if a child is anyone under the age of 18.

Safeguarding Adults means protecting an adult’s right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that an adult’s wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. Professionals should work with the adult to establish what being safe means to them and how that can be best achieved. The term Adult at risk focuses on the situation causing the risk rather than the characteristics of the adult concerned.

Guidance issued under Care Act 2014 which supersedes the No Secrets guidance (2000) states that: “..safeguarding duties apply to an adult who has needs for care and support and 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 or neglect”

The aim of Safeguarding within the Care Act 2014 is to *make safeguarding personal* meaning the process should be person-led and outcome-focused whilst enhancing the involvement, choices and control for the adult as well as improving their quality of life, wellbeing and safety.

The following six principles apply to all sectors and settings and should inform the ways in which professionals and other staff work with adults:

* 1. Empowerment – People being supported and encouraged to make their own decisions and informed consent
	2. Prevention – it is better to take action before harm occurs
	3. Proportionality – The least intrusive response appropriate to the risk presented
	4. Protection – Support and representation for those in greatest need
	5. Partnership – Local solutions through services/agencies working together
	6. Accountability – Accountability and transparency in delivering safeguarding

**5 What is abuse and neglect**

Abuse or neglect can take many forms and the circumstances of the individual case should always be considered. The categories of Abuse, indicators and aspects which follow are not exclusive and each case should be considered on its own merit.

**6 Recognising the signs of abuse**

David Lewis staff may be particularly well-placed to spot abuse and neglect, as in many cases they may be the only professionals with whom the adult, young person of child has contact with. They may say or do things that hint that all is not well. It may come in the form of a complaint, an expression of concern, a visual indicator or as part of a disclosure. Regardless of how the safeguarding concern is identified, everyone should understand what to do, and how to report your concern including:

• Knowing about different types of abuse and neglect and their signs

• Supporting adults, young people and children to keep safe

• Knowing who to tell about suspected abuse or neglect and

• Supporting adults, young people and children to think and weigh up the risks and benefits of different options when exercising choice and control.

The Care Act 2014 defines the following areas of abuse and neglect; they are not exhaustive but are a guide to behaviour that may lead to a safeguarding enquiry.

The indicators are the main signs and symptoms which may suggest that some form of Abuse may have taken place, but care should be taken not to assume abuse, without further detailed investigation.

* **Physical Abuse** can be assault, hitting, pushing or rough handling, Restraining without justifiable reasons, Misuse of medication and Inappropriate sanctions.

\*Peer on Peer incidents and child on child incidents would still be classed as physical abuse.

**Indicators** of physical abuse can involve a history of unexplained falls or minor injuries, unexplained bruising or injuries of any sort, burn marks, changes/reluctance to visit GP.

* **Sexual Abuse** can include Rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography , exploitation, subjection to pornography or witnessing sexual acts all of which the adult has not consented, cannot consent to or was pressured into giving consent.

\*For those working in Education there is separate guidance on sexual violence and sexual harassment between children.

**Indicators** of sexual abuse can be unexplained changes in the demeanour and behaviour of the adult, tendency to withdraw and spend time in isolation, expression of explicit sexual behaviour and/or language by the adult which is out of character, irregular and disturbed sleep pattern, bruising or bleeding in the rectal or genital areas, torn or stained underclothing especially with blood or semen and sexually transmitted infections or pregnancy.

* **Psychological Abuse** including emotional abuse, threats of harm, punishment 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 or Deliberate denial of religious or cultural needs.

**Indicators** of psychological abuse can involve the inability of sleep or tendency to spend long periods in bed, Loss of appetite or overeating, Anxiety, confusion or general resignation. Tendency towards social withdrawal and isolation, appearing fearful and loss of self-esteem, uncharacteristically becoming manipulative, uncooperative and aggressive.

* **Financial Abuse** can include theft of money, fraud, scams, coercion, misuse or misappropriation of property, possessions or benefits.

**Indicators** of financial abuse can be unexplained inability to pay for household shopping or bills etc., withdrawal of large sums of money which cannot be explained, personal possessions go missing, incorrect paperwork or DL finance procedures not being followed.

* **Institutional/Organisational Abuse** including neglect and poor care practice as a result of the structure, policies, processes and practices within an organisation.

**Indicators** include the lack of flexibility, choice and consultation with the adult, regimented routines, over controlled, no opportunity for drinks or snacks. It also includes lack of privacy, respect and dignity including derogatory remarks or public discussions of personal matters.

* **Neglect and Acts of Omission** could include ignoring medical or physical care needs, failure to access care or equipment for functional independence, failure to give prescribed medication or obtain appropriate medical care, failure to provide access to appropriate health, social care or education services.

**Indicators** of neglect could include poor physical condition of the adult e.g. ulcers, bed sores, unkempt appearance, unexplained weight loss, inappropriate or inadequate clothing, sensory deprivation or no method of calling for assistance.

* **Self-Neglect** covers a wide range of behaviour neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding.
* **Indicators** of self-neglect where a person is declining support with their care needs, hygiene, health or their environment, and this is having a significant impact on their overall well-being.
* **Discriminatory Abuse** includes harassment and slurs or similar treatments because of race, gender and gender identity, age, disability, sexual orientation or religion. Hate Crime and Mate Crime if targeted due to a protected characteristic under the Equality Act 2010 could also be discriminatory abuse.

**Indicators** of discriminatory Abuse can result in the adult withdrawing and

isolating themselves due to fear and anxiety and Loss of self-esteem.

Other categories of abuse set out in the Care Act 2014 are:

* **Domestic Abuse** is an incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality.

It is important to note that a witness of domestic abuse is still a victim.

**Indicators** may include unexplained bruising, withdrawal from activities, work or volunteering, not being in control of finances, or decision making.

* **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.

**Indicators** similar to physical or emotional abuse indicators, they look malnourished, unkempt, withdrawn. Rarely seen on their own due to the control element, may avoid law enforces and be given lifts to and from work.

**Radicalisation - Prevent Duty 2015**

David Lewis have a duty to protect the adult under section 26 of the Counter-Terrorism and Security Act 2015 from being drawn into terrorism. The Education and Life skills service are required to build the students resilience to radicalisation by promoting fundamental British values and enabling them to challenge extremist views. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism potentially leading to terrorism.

Extremism is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.

**Indicators** of vulnerability include: Identity Crisis, Personal Crisis, isolation, and low self-esteem, Unmet Aspirations, Access to extremist websites, joining or seeking extremist organisation, significant changes to appearance or behaviour. This list is not exhaustive, nor does it mean that all adults experiencing the above are at risk of radicalisation.

Training should be completed on Prevent duty by all staff employed within the Education service and it is the responsibility of college management to ensure this is completed as required every 2 years.

**Internet Safety** - David Lewis also recognises that students and service users can and will access the internet via David Lewis devices and personal mobile phones with 3G/4G/5G connectivity. Everybody should be encouraged to use the internet whilst at David Lewis via the guest network, this limits access and allows monitoring in line with David Lewis policy.

As schools/colleges increasingly work online, it is essential that all students are safeguarded from potentially harmful and inappropriate online material. As such David Lewis will only use appropriate filters/sites and will have monitoring systems in place to maintain safety of each student. Where students may be asked to learn online at home David Lewis need to follow the advice and guidance provided in Annex C of part 1. All students, where appropriate, should receive e-safety learning within their curriculum in order to educate them on how best to stay safe, this should include the sharing of images and the legalities which surround this. Where appropriate information should also be provided to adults and parents/carers who may also need guidance to keep people safe. Any concerns should be reported to the lead person.

**County Lines** is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of “deal line”. They are likely to exploit children, young people and vulnerable adults to move and store the drugs and money and they will often use coercion, intimidation, violence (including sexual violence) and weapons.

**Indicators** include frequent absence from school/college, unexplained acquisition of money, clothes and personal items. Leaving home without explanation, parental concerns, unexplained injuries and change in emotional wellbeing.

**Operation Encompass** is a Police-led scheme. Following a domestic incident the police will make contact with the David Lewis Social Work Department to ensure that early support is provided to the Child/Young person who has either witnessed or was involved in an incident. This information will be stored within the David Lewis Social Work Department and shared on a need to know basis to ensure that the correct support is provided for the child/young person.

**David Lewis also know how to respond to and identify:**

Children missing from education – see missing from home policy

Drug/substance/alcohol misuse

Child sexual exploitation/trafficked children

Child criminal exploitation

Bullying, Inc. cyber, homophobic, racist, gender and disability (Breaches - Equality Act 2010) – see specific education policy

Self-Harm &

Female Genital Mutilation

**Patterns of abuse** it is important to recognise that abuse may be a one-off or multiple instances, and affect one person or more. Repeated instances of poor care may be an indication of more serious problems and fall into the category of institutional/organisation abuse.Patterns of abuseinclude:

•*Serial* abusing in which the perpetrator seeks out and ‘grooms’ individuals.

•*Long term* abuse which could be the persistent psychological abuse of an adult or

•*Opportunistic* abuse such as theft occurring because valuables have been left out.

**Contextual Safeguarding** - Safeguarding incidents and/or behaviours can be associated with factors outside of David Lewis, school or college. All staff should consider the context within which such incidents and/or behaviours occur. This is known as contextual safeguarding, which simply means assessments of children should consider whether wider environmental factors are present in a child’s life that are a threat to their safety and/or welfare. Children’s support / care plans should consider such factors. This will allow any assessment to consider all the available evidence and the full context of any abuse

**7 Who might abuse**

Abuse of adults at risk, young people and children may be perpetrated by a wide range of people including relatives, family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates or people who deliberately exploit vulnerable people and strangers.

**8 Prevention of Abuse**

All adults, young people and children should be made aware of who to contact if they feel unsafe or unhappy because of others actions, this should be discussed during service user meetings/core team meetings and PSHE. Increasing the service users understanding of safeguarding can help them to protect themselves from abuse. Everyone should be helped to recognise what abuse is and to understand that they can and should say no if they are unhappy with the actions.

To prevent Abuse and implement good practice David Lewis ensures that:

1. Recruitment practices are robust and rigorous to ensure the safe recruitment of all staff and volunteers. HR follow the requirements set out by the Disclosure and Barring Service (DBS) and ensures that the Enhanced barred list checks are completed, up to date and acceptable references are received. Safeguarding is also included in all job descriptions.
2. David Lewis will ensure that the policies and procedures in place are appropriate, practical and in line with current legislation, guidance and CQC standards.
3. David Lewis will ensure that suitable Safeguarding training is given to all staff on their Induction and subsequently during regular mandatory training.
4. David Lewis will ensure that safeguarding is covered regularly in staff supervisions and staff meetings refreshing knowledge of aspects and indicators and reiterating the policy and procedures for reporting concerns.
5. David Lewis safeguarding lead is available at all times, 24hrs a day, 7 days a week for emergency contact with any safeguarding concerns.
6. The voice of the adult, young person or child is heard and the principles of Every Child Matter and the Mental Capacity Act 2005 followed.
7. David Lewis monitor and learn from all incidents, concerns and complaints

Staff should never:

* Engage in sexually provocative behaviour.
* Make sexually suggestive comments in front of or about adults, even in fun.
* Let allegations pass without being reported to the Lead person.
* Deter adults from making allegations through fear or disbelief.
* Do things of a personal nature for adults that they can do for themselves.
* Share a bedroom with a Vulnerable Adult unless the Care Plan/Risk Assessment advises e.g. Holidays.
* Invite or allow a Vulnerable Adult to visit or stay with them at their own home in any circumstances.
* Make assumptions which might result in non-referral of incidents or situations without checking facts.
* Rely on the position or reputation of staff within the organisation.
* Share personal details such as addresses and contact details
* Befriend on social networking sites etc.

**9 Confidentiality & sharing information**

Sharing information is an essential part of effective safeguarding practice. It allows multiple staff and / or agencies to build a complete picture of a situation where one individual or agency would be unable to do so. Often it is only when information from a number of sources is shared that it becomes clear that an adult, young person or child is at risk of harm. This then enables early help/intervention and prevention work to be carried out.

Confidentiality and consent are two key issues and are clarified below. For more information, see the David Lewis policy for:

- Mental Capacity and Deprivation of Liberty Safeguards

- Data Protection and confidentiality or

Speak to the DL Caldecott Guardian (Director of Clinical Services).

Confidential information is information which is personal, sensitive, not already lawfully in the public domain, and shared in confidence or the reasonable expectation of confidence. Confidential information may be shared with the consent of the person who provided it or to whom it relates. Confidential information may also be shared without consent under the following circumstances:

•If there is evidence or reasonable cause to believe that an adult, child or young person is suffering or at risk of suffering significant harm, or of causing significant harm to themselves or others.

•Where an individual 16 years and over lacks capacity to consent supported by the Mental Capacity Act (2005)

•To prevent significant harm to children and young people.

Any personal information shared by David Lewis will be done so in line with GDPR and using the relevant information sharing routes e.g. Egress

Every person has a legal right to confidentiality. A breach of a person’s right to confidentiality could constitute abuse of their Human Rights.

Summarising the principles set out in the Caldecott Review published in 2013:

* Information will only be shared on a need to know basis when it is in the best interests of the adult.
* Confidentiality must never be confused with secrecy. Informed consent should be obtained to share information but, if this is not possible and others are at risk, it may be necessary to override this requirement.
* It is inappropriate to give assurances of absolute confidentiality in cases of possible Abuse, particularly in situations where other people may be at risk.

**10 Record Keeping**

David Lewis is required to keep clear and accurate records whenever a complaint or allegation of abuse is made. These records are held electronically by the Social Work department and can only be accessed with permission from the Safeguarding Lead Person.

**11 Safeguarding procedures for reporting and managing a Concern, Suspicion or Allegation of Abuse**

These procedures must be followed. If you are unable to follow procedure immediately inform your Line Manager or Lead Person.

**2.1 Responding to a Concern, Suspicion or Allegation of Abuse**

Where staff have concerns about the safety of an adult, young person or child, staff should report these concerns to the organisations Safeguarding Lead Person in the first instance.

**11.1 Witnessing an incident and/or responding appropriately to a disclosure of a concern, suspicion or allegation of abuse.**

The Staff Member should:-

* Stay calm.
* Make sure the child/adult and any other child/adult is safe.
* If urgent medical attention is required contact the centre cover nurse by pressing the aid call.
* Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with appropriate professionals, tell them what will happen next – DO NOT promise to keep secrets.
* Listen carefully to what is being said rather than question.
* Allow the Adult to continue disclosing information.
* Only ask a question for clarification and at all times avoid asking questions that may suggest a particular answer e.g. [TED] Tell me, explain or describe
* Reassure the Adult that they have done the right thing in telling you, comfort them as necessary and assure them that they will be kept safe.
* Contact the safeguarding lead person and share the concern, suspicion or allegation of abuse.
* Preserve any potential evidence.
* Complete a concern slip on the school pod system (see 11.2)

For children and vulnerable adults be aware that they may not be ready to or know how to tell someone about abuse they have experienced, or might not recognised their experiences as harmful. Be professionally curious.

All efforts should be made to avoid contact between the alleged perpetrator(s) and the abused individual(s). If the perpetrator is another service user there needs to be staff supervision at all times.

If the alleged perpetrator is a David Lewis employee, the Lead Person will liaise with the relevant Manager and all steps must be taken to ensure that there is no risk of further Abuse.

**11.2 Procedure for Recording a Concern, Suspicion or Allegation of Abuse**

All David Lewis staff are issued with a Safeguarding card with their ID badge with steps to follow to report a concern suspicion or allegation of abuse.

As soon as practicable after the concern, suspicion or allegation, the member of staff who has witnessed the incident or listened to the disclosure should record factually and fully the whole disclosure or scenario on a School pod concern slipto which all staff have log in details and access

* Describe the whereabouts in the room or of the scene and record the exact words and actions of those involved.
* Document what was said using the Adult, young person or child’s own words as much as possible - note the date, time and any names mentioned.
* Make a record of any other person to whom the information was given and when or who else was around at the time of incident/disclosure.
* Explain to the adult, young person or child what you are doing, who the information will be shared with and why. If they would like to add their own account you can support them to do this but only ask questions to clarify the details, and state that this is what you have been asked to share on their behalf. Remember you are not taking a statement.

**11.3 Procedure for the Management of a Concern, Suspicion or Allegation of Abuse**

The flow chart (appendix 2) entitled “Referral and Management of Suspected Abuse or Neglect of an adult, young person or child” identifies the procedure that must be adhered to following a concern being raised.

**11.4 Closure**

The Safeguarding Lead Person and the relevant Director of service will agree when a case can be closed. This will only be once all actions/recommendations have been met and tested, this is evidenced in writing by the appropriate Manager with feedback and overview provided to the Quality and Safety Group for assurance. Any person involved in the case will be provided with closure in line with Flow chart 2.

**11.5 Agencies, Roles and Responsibilities involved in Managing Safeguarding’s**

David Lewis Social Work and Safeguarding Department is the **designated Safeguarding lead** **person** for all concern or allegation of abuse.At the time of approval this is **Becci Peart**, Safeguarding Manager and **Greg Shelley** Assistant social worker. On receipt of a referral the Lead Person will set up a case file with a unique identification code and number. All information including internal/external communications and correspondence, evidence and records will be recorded in this case file. Access to the case file by relevant managers with a need to read the case notes requires prior authorisation by the Lead Person. The Lead Person must be the first person to receive all initial referrals of concern. Contact details will be displayed within all service areas including the Residential Houses, Clinic, School, College, JD’s, Paddocks and Land base. Concerns, suspicions or allegations of abuse referrals must not be shared with other persons unless advised to do so by the Lead Person. The Lead Person is responsible for the following: -

* Verbal receipt of the concern, suspicion or allegation of Abuse.
* Reviewing the concern slip on school pod.
* Gathering of relevant information relating to the adult, young person or child concerned.
* Clarifying the facts of the concern, suspicion or allegation of Abuse.
* Liaising with external agencies such as the Cheshire East Adult providers safeguarding team (APST), Cheshire East Consultation Service team (CHecS), Local Authority Designated Officer (LADO) and the Police, within 1 working day (Appendix 3)
* Liaising with the appropriate Registered Manager/Line Manager/Director as and when appropriate.
* Leading and co-ordinating David Lewis and local procedures.
* Informing the Chief Executive officer, Directors and Personnel.
* Informing the service users placing authority’s representative and
* Informing next of kin, within 1 working day.

The **Registered Manager** must ensure notification to their Regulatory Body of all concerns, suspicions or allegations of Abuse reported to the Adult Providers Safeguarding Team as soon as practical. They must also liaise closely with the Lead Person to ensure effective communication and that all required actions are carried out. The Lead Person will determine and advise the sharing of information where appropriate. It is the duty of the Registered Manager, following agreement with the Lead Person, to inform and liaise with the Residential Manager where relevant. Once the concern has been investigated and recommendations made by the investigating lead person the Registered Manager must formulate an action plan to meet all recommendations and confirm once complete.

The **Director of Education** must notify Ofsted of any safeguarding alerts where appropriate. They must also liaise closely with the Lead Person to ensure effective communication and that all required actions are carried out. The Lead Person will determine and advise the sharing of information where appropriate. It is the duty of the Director of Education, following agreement with the Lead person to inform and liaise with the Deputy Head and Assistant Principles where relevant.

**Adult Providers Safeguarding Team –** is a team of social workers within Cheshire East Social Services Department with the duty to ensure the Safeguarding of Adults at risk in Cheshire East.

* All concerns, suspicions or allegations of Abuse of an adult raised at David Lewis will be reported to the providers safeguarding team, who then becomes the lead agency.
* The providers safeguarding team will record all referrals and will advise David Lewis of actions required.
* The providers safeguarding team will decide if a strategy meeting is required, in which case this will be arranged and Chaired by them.

**Cheshire East Adult Safeguarding Board –** is a multi-agency partnership which provides strategic leadership for the development of safeguarding policy and practice, consistent with national policy and best practice.

* Any concerns raised with Adult Providers Safeguarding Team, Police, CQC or CCG will be shared with the safeguarding board who may decide that further investigation is required or may commission a quality audit to be completed by the Quality and Audit team for Cheshire East.

**Eastern Cheshire Constabulary Public Protection Unit (PPU) -** have a duty to ensure the protection of all people in Cheshire. They are responsible for taking the lead on all adult, young person and child safeguarding referrals of a criminal nature. The Police have nominated Officers who will lead the investigation where required. David Lewis will not commence a providers led enquiry or internal investigation until approved by the nominated officer.

The **Cheshire East Children’s consultation service** (ChECS) is the first team contacted to access the required services for safeguarding children. This also includes the Safeguarding Children in Education Settings Team (SCiES) and the Lead Agency Designated Officer (LADO). Safeguarding Children in Education team provide safeguarding information, support and guidance in order to enhance safeguarding policy and practice in all Cheshire East schools, colleges and settings. Lead Agency Designated Officer should be contacted for all allegations involving a child made against David Lewis staff/professionals. The lead person will contact the Lead Officer following receipt of the safeguarding concern and will then complete the relevant referral forms.

• All concerns, suspicions or allegations of Abuse of a child will be reported to the Cheshire East consultation service or the designated officer who then become the lead agency.

 • They will record all referrals and will advise David Lewis of actions required.

• They will decide if a Strategy Meeting is required, in which case this will be arranged and Chaired by them.

The **Personnel Department** has a supportive role for Staff and works with the Lead Person, Registered Managers and Line Managers when actions or investigations are needed which impact on Staff. Personnel along with the appropriate manager will take forward any recommendations with regards to disciplinary action. Should any member of staff be dismissed following a safeguarding investigation Personnel are responsible for completing the referral to the Discharge and Barring Service.

**Commissioners -** can be a Social Worker or Health Professional from the funding authority who is the allocated case worker for the Adult, young person or child placed at David Lewis. The commissioner’s representative will be notified of all concerns, suspicions or allegations of Abuse reported to external agencies. Responsibility for notifications will be determined by discussion between the David Lewis Lead Person and the relevant agency.

**CQC** - is the independent regulator of all health and adult social care services in England. In relation to David Lewis the scope of CQC currently covers all Residential Care Homes and the Clinic within the charity. CQC have a clear remit to support David Lewis in developing procedures for both the Safeguarding of Adults, young people and children and intervention in cases of Abuse. They also have a remit to take action if David Lewis is not meeting acceptable standards. If Abuse is suspected or identified at David Lewis it is the responsibility of the Registered Manager to ensure that CQC is notified as soon as is practical to do so.

**Ofsted** - Ofsted is the Office for Standards in Education, Children’s Services and Skills. They inspect and regulate services that care for children and young people, and services providing education and skills for learners of all ages. In relation to David Lewis Ofsted currently covers the School and College and has clear expectations in relation to safeguarding its students. If appropriate it is the responsibility of the Director of Education to notify Ofsted of any safeguarding concerns as soon as is practical.

**12 Awareness Culture**

* David Lewis strives to provide a culture and working environment for all staff which encourages and facilitates the appropriate reporting of serious concerns. This is fundamental to the successful implementation of the procedures detailed in this policy.
* All managers are responsible for promoting a strong commitment to high standards of practice and care. This includes openness whereby practitioners and carers have the confidence to examine their own practice and values and those of their colleagues and senior staff, to challenge and to report any unacceptable behaviour.
* All staff have a responsibility to promote a positive environment in which adults, young people and children are confident to share any concerns they may have with regard to their own safety and welfare.
* Staff working with adults, young people and children are to attend safeguarding training provided by David Lewis annually - This includes trustees and Governors.
* Communication between staff from all disciplines should be in an open and positive environment.
* Care Plans and Risk Assessments should be person centred and must be detailed. There needs to be an understanding of the imbalance of power between the people we support and staff and its potential for Abuse. Equally staff must recognise that there could be exposure to allegations.
* Those staff whose conduct or professional behaviour is under investigation must be treated fairly and sensitively. David Lewis will ensure that specific and adequate support systems are in place for staff during and after investigation.
* Adults should have access to independent advocacy services which should be well publicised. Contact details can be found at the end of this policy, all advocacy referrals should be made via the Social Work Department.

APPENDIX 1

* **Keeping Children safe in Education part 1 2022**

<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1080047/KCSIE_2022_revised.pdf> \*This should be printed, signed and displayed by all staff working within the education setting.

* **Mental Capacity Act (2005) -** <http://www.legislation.gov.uk/ukpga/2005/9/pdfs/ukpga_20050009_en.pdf>
* **Mental Capacity Act - Code of Practice (2007) -** <https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>
* **Mental Capacity Act - Deprivation of Liberty safeguards – Code of Practice to supplement the main Mental Capacity Act code of Practice (2008) -** [http://webarchive.nationalarchives.gov.uk/20130107105354/http:/www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\_085476](http://webarchive.nationalarchives.gov.uk/20130107105354/http%3A/www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_085476)
* **Human Rights Act (1998) -** <http://www.legislation.gov.uk/ukpga/1998/42/pdfs/ukpga_19980042_en.pdf>
* **Equality Act (2010) -** <http://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga_20100015_en.pdf>
* **Mental Health Act (2007) -** <http://www.legislation.gov.uk/ukpga/2007/12/pdfs/ukpga_20070012_en.pdf>
* **Criminal Justice and Courts Act 2015, section 20-25 for care workers and care providers –**

<http://www.legislation.gov.uk/ukpga/2015/2/contents/enacted>

* **Counter Terrorism and Security Act (2015) -** <http://www.legislation.gov.uk/ukpga/2015/6/pdfs/ukpga_20150006_en.pdf>
* **Channel Duty Guidance 2020**

<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/964567/6.6271_HO_HMG_Channel_Duty_Guidance_v14_Web.pdf>

* **Criminal exploitation of children and vulnerable adults: county lines**

<https://www.gov.uk/government/publications/criminal-exploitation-of-children-and-vulnerable-adults-county-lines>

* **Data Protection Act (1998) -** <http://www.legislation.gov.uk/ukpga/1998/29/pdfs/ukpga_19980029_en.pdf>
* **Working Together to Safeguard Children (2010, 2013, 2015)** <https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf>
* **Children Act (2004) -** <http://www.legislation.gov.uk/ukpga/2004/31/pdfs/ukpga_20040031_en.pdf>
* **Relationships & Sexuality in Adult Social Care Services -** <https://www.cqc.org.uk/sites/default/files/20190221-Relationships-and-sexuality-in-social-care-PUBLICATION.pdf>

Link to other David Lewis policies which may be relevant to safeguarding:

<http://whiskey/Document%20Center/_layouts/15/start.aspx#/>

* Positive behaviour support policy
* Enhanced Support policy
* Intimate Care policy
* Management of service users financial affairs
* Mental Capacity Act & Deprivation of Liberty Safeguards policy
* Missing from Home and Search policy
* Sexuality and Relationships policy
* Residential Trips policy
* Employee Code of Conduct Policy & Disclosure policy
* Professional Behaviours in College and School policy Inc. Teachers Standards
* Volunteer workers & visitors policy

**Appendix 2**

**Flow Chart 1 - Referral & Management of Suspected Abuse or Neglect of an Adult**

1. Concern, suspicion or allegation of Abuse or Neglect of an Adult, young person or Child.

**8.** On receipt of recommendations the Registered Manager/Relevant Director is to compile an action plan outlining how all recommendations from the investigation are going to be met identifying; action required, responsible professional, time frame and desired outcome including a date of when the action was met. Any outcome of recommended disciplinary hearings should also be included. This should be presented to the relevant Director for testing and closure and then shared with the Lead Person, documented in the safeguarding file and used to close the case. The case will be reviewed by the Safeguarding Committee monthly whilst open and if agreed closed off and lessons learnt disseminated. The registered manager must notify CQC of the outcome and recommendations as required; a copy of this correspondence should be kept by the Registered Manager for future reference.

**6**. The Lead Person and relevant agency will discuss actions taken to safeguard individuals and agree on actions to be taken. That agency will become the Lead Agency and may coordinate a Strategy Meeting/Discussion. This will either take place via the telephone with the David Lewis Safeguarding Lead or a meeting will be held with David Lewis representatives, with the person and/or their Advocate, relevant agency and the commissioner’s representative. If appropriate a representative from the Police may also attend. If the concern was referred to the Police and they deem the case to be of a potential criminal nature, the Police will become the Lead Agency. Once the case is either agreed or closed with the Crown Prosecution Service/Police they will report back to the David Lewis Lead Person who will debrief appropriately.

**3a.** The Lead Person will redirect non-safeguarding issues/low level care concerns to the relevant Manager. The Manager will then determine what action is taken and manage accordingly. The manager is responsible for providing written feedback to the Lead Person via school pod in a timely manner so the concern raised can be formally closed. It is important that these concerns are not referred to as Safeguarding concerns; they have not reached the safeguarding threshold at time of referral.

Monitoring and Lessons from the low level concerns will be discussed monthly by the safeguarding committee.

2. Staff member reports concern, suspicion or allegation immediately to the Lead Person in the Social Work & Safeguarding Department, either Becci Peart or Greg Shelley. In an emergency and outside working hours the Lead Persons contact number is 0844 8584848. Staff member records details of the concern, suspicion or allegation on a school pod concern slip and ensures that measures are in place to safeguard the alleged abused. Any evidence should be preserved. Multi agency toolkits and the Cheshire East Guidance on reporting a safeguarding concern should be followed, which helps distinguish between low level care concerns and those that meet the safeguarding threshold.

**3**. The Lead Person will liaise with the Registered Manager as soon as practical to gather, share and report information in relation to the concern, suspicion or allegation. This may include contacting the Duty Nurse to gather basic information on the type, size and location of any reported injury and the need for any necessary medical intervention or action required to keep the person safe (Appendix 4). The Lead Person will also inform the Chief Executive and relevant Director as appropriate with the degree of urgency determined by the Lead Person.

**4a**. On receipt of information from the Lead Person the Registered Manager must notify the regulatory agency (CQC/Ofsted) with details and actions taken to date as soon as is practical. A copy of the notification must be forwarded to the Lead Person for the file.

**5**. If required an assessment of Capacity must be completed to ascertain if the person has the capacity to partake in the safeguarding procedures. If the person is deemed to lack the capacity the family will be notified and asked to act as the adults Advocate. If the adult has no family or friends involved in their care an Independent Advocate must be appointed by the lead agency. If the person is 18+ and has capacity consent must be obtained to notify family and make the referral.

**4.** The Lead Person contacts the Duty Social Worker of the relevant agency to share the required information via the appropriate channel. If there are any criminal concerns the lead person will contact the police, share the relevant information and await instruction.

**7**. The lead agency will then determine whether the local Authority or David Lewis investigate the concern raised.

* If the local Authority investigates, they will report back to the Lead Person who will ensure that any recommendations are completed with the appropriate Manager.
* **If DL is asked to investigate, see Flow Chart 2**.

**Flow Chart 2 - Referral and Management of Safeguarding allegations that have been shared with external safeguarding agencies and passed back to David Lewis to investigate**

 ***DL Staff must not carry out any investigations until authorised***

**1**. Lead Person in consultation with the Director of Clinical services will determine what action needs to be taken and if required the nature/type of investigation i.e. Safeguarding or Management. If a service user is to be interviewed the lead investigator will have successfully completed the Achieving Best Evidence Training.

**2.** The Investigating officers will compile a report from their findings which will include the scope of the investigation, the concern details, the adult, young person or child’s wishes, background information, summary of findings with an outcome and recommendations/actions required.

**3**. The Lead Person will share the final investigation report with the Director of Clinical services for approval.

**4**. The Lead Person will share the final report with the relevant safeguarding agency

**5.** The Lead person will share the report with the relevant David Lewis Managers. If disciplinary action is recommend then the lead person will coordinate an internal feedback meeting with the Registered Manager, HR and any other professional deemed necessary will be invited. The meeting will discuss the outcome of the investigation and any recommendations or lessons learnt providing an opportunity to make changes ensuring that the risk of a recurrent incident is reduced/eliminated. Good practice also requires that the outcome is discussed internally with relevant Staff, Professionals and Directors to consider recommendations for changes to procedures which should be submitted through the Lead Person to the Safeguarding Committee, Quality and Safety Group and the Executive Team for approval.

**6**. If the adult or young person involved was deemed to have capacity and was involved in any aspect of the investigation the Lead Person will provide them with feedback. Further support may also be discussed for the adult if deemed necessary by the Lead Person, this may involve specific counselling done by qualified professionals or support from their Residential Manager. If the adult was not involved as they lacked the capacity their advocate would be notified of the outcome and recommendations. The lead person will also notify commissioners. The Registered Manager is responsible for ensuring that the referrer/s are provided with feedback and closure, if extra support for the staff involved is deemed necessary a referral will be made to the Occupational Nurse by their line manager.

**5a.** If the investigation recommends disciplinary proceedings the Registered Manager and Personnel will manage the process in line with the David Lewis Disciplinary Policy.

**5b.** If disciplinary proceedings are not required, outcomes and recommendations will be managed by the Registered Manager. Recommendation could include Recorded supervision, specified training, review of house structure/routines/paperwork etc. If the outcome is no further action the member of staff on exceptional leave will return to work and the Registered Manager will ensure they are provided with feedback, closure and support if necessary.

**7.** On receipt of recommendations the Registered Manager/Relevant Director is to compile an action plan outlining how all recommendations from the investigation are going to be met identifying; action required, responsible professional, time frame and desired outcome including a date of when the action was met. Any outcome of recommended disciplinary hearings should also be included. This should be presented to the relevant Director for testing and closure and then shared with the Lead Person, documented in the safeguarding file and used to close the case. The case will be reviewed by the Safeguarding Committee monthly whilst open and if agreed closed off and lessons learnt disseminated. The registered manager must notify CQC of the outcome and recommendations as required; a copy of this correspondence should be kept by the Registered Manager for future reference

**Appendix 3**

**Contact details**

All staff must be aware of how to raise concerns.

In the absence of the safeguarding lead a senior manager should be contacted.

Other contact details can be found below or on the Keeping safe poster displayed in school and college

**Internal Contact Detail**

**Social Work and Safeguarding Department:**

Becci Peart 01565 640180, ext: 2240 or 07841066336

Greg Shelley 01565 640042, ext: 2290 or 07740052407

Out of Hours or in an emergency: 0844 858 4848

**External contact details**

**Adults**

**Cheshire East point of contact** Tel: 0300 123 5010

**Cheshire East out of Hours** Tel: 01606 76611

**Cheshire East Adult providers safeguarding team** Tel: 01270 686213

**Cheshire East Adult Safeguarding Board** Tel: 01270 375 237

**Local Police Station**: Dial 101 or 999 in an emergency

**Eastern Cheshire Public Protection Unit** Tel: 01606 362 521

**Children**

**Cheshire East Consultation Service (ChECS)** Tel: 0300 123 5012 (ext2)

**Out of Hours Service (Emergency Duty Team)** Tel: 0300 123 5022

**Lead Agency Designated Officer (LADO) –**Tel: 01606 288931

**Safeguarding Children in Education Settings (SCiES) –** Tel: 01606 275039

**Local Safeguarding Children’s Board (LSCB) -** 1st Floor, Westfields, Middlewich Road, Sandbach, Cheshire, CW11 1HZ

**CQC**:

**Website**: [www.cqc.org.uk](http://www.cqc.org.uk)

**Email:** enquiries@cqc.org.uk

**Postal Address**:

CQC National Customer Service Centre

Citygate

Gallowgate

Newcastle upon Tyne

NE1 4PA

**Tel:** 03000 616161

**Ofsted**:

**Website**: <https://www.gov.uk/government/organisations/ofsted>

**Email:** **enquiries@ofsted.gov.uk**

**Postal Address:**

Piccadilly Gate

Store Street

Manchester

M1 2WD

**Tel**: 0300 123 1231

Disability positive – Advocacy

**Website**: <https://www.disabilitypositive.org>

**Email**: info@disabilitypositive.org,

Te**l**: 01606810752

Channel – Prevent

**Email**: prevent@cheshire.pnn.police.uk

**Tel**: 01606 362121

**Appendix 4**

**Protocol for Recording and evidencing unexplained injuries/bruising.**

All unexplained injuries/bruising is reported through to the David Lewis Safeguarding Lead for all service users. Following receipt of the referral the following protocol should be followed.

1. Staff member notices a bruise/injury and checks through previous documentation to see if a potential cause can be identified. If urgent treatment is required the Centre cover nurse should be called.
2. If a cause cannot be identified the staff member is to notify the lead person as soon as is practical to do so.
3. The lead person will either request:
	1. A school pod slip be completed &
	2. Ask that the Residential Manager check back through relevant documentation to ensure that it is unexplained

Or request

1. A school pod concern slip be completed,
2. The centre cover nurse to complete a body map &
3. The centre cover nurse to photograph the injuries with the use of a measuring scale. We should also be able to identify the individual from the photograph. The photographs are then to be sent electronically to the Lead Person and deleted from the camera in which it was taken within 48 hours. Photographs should be taken with consent or in line with the Mental Capacity Act Code of Conduct.
4. The responsible medical officer is to provide a written report covering the age, sex, diagnosis/treatment plan including any information or conditions which may be relevant to the cause of injury/bruise i.e. Osteoporosis or diabetes etc. Once requested this should be sent to the Lead Person as soon as is practicable to do so.
5. Bruise/Injury will either be shared as a care concern in line with Cheshire East guidance as unexplained or as a safeguarding concern if significant harm was caused.