

**URN:** 20-087

**Subject:** Review and Update of the Safeguarding Policy

**Report to:** Policy and Resources Committee

**Report by:** Lindsay Barker, Strategic Director

#### **SUBJECT MATTER/RECOMMENDATIONS**

The Council has a duty to safeguard Children and Adults and has a safeguarding approach in place to enable it to meet this requirement throughout the Council. The previous Safeguarding Policy was approved in March 2017 with the agreement to review it after three years. The review has now been completed and this report recommends that Committee:

1. approve the new Safeguarding Policy
2. agree to carry out a review of this policy after three years unless there is a significant change in legislation requiring earlier review.

## **1. Introduction / Background**

- 1.1 Great Yarmouth Borough Council has a statutory duty to safeguard Children and Adults under the Children Act 2004, Working Together to Safeguard Children 2015 and The Care Act 2014. In order to meet its requirements under the Acts the Council put in place a number of measures including widespread training and 'designated officers' from services as key contact points for referrals and reviewed its policy and approach in March 2017 when the last Safeguarding Policy was adopted. The recommendation for review of this policy was after three years from adoption.
- 1.2 Early in January 2020 a new Strategic Safeguarding Group was established, chaired by Lindsay Barker, Strategic Director and Designated Safeguarding Lead, comprising Head of Environment, Housing Director, Head of Marketing and Communications, Head of Organisational Development and the Deputy Designated Safeguarding lead and Early

Help Hub manager. This group has reviewed the existing Safeguarding Policy as required, the Designated Officers role and meetings which support the management of Safeguarding responsibilities throughout the Council, the recording system for Safeguarding referrals, the Norfolk Community Safety Partnership set up which provides the Multi Agency oversight and coordination across Norfolk and the Council's links into this and the training programme for the organisation.

- 1.3 The Council also jointly funds a Norfolk Safeguarding Coordinator role along with the other districts in Norfolk to provide the oversight and help achieve consistency in approach where possible, to share learning and good practice and support the Norfolk Adult Safeguarding Board. Becky Booth, who currently holds this role, has been involved in the preparation of this revised policy and provided expertise as necessary.

## **2. Main Body**

### **2.1 Policy**

- 2.1.1 The Council has been operating within its Safeguarding responsibilities and its previous Policy agreed March 2017. The Safeguarding Policy was due for its three year review in March/April 2020. Due to the impact of COVID 19 and redeployment of key staff the review of the Safeguarding Policy has been delayed. The new policy approach has been proposed by the Norfolk Safeguarding Coordinator and adapted for Great Yarmouth's purposes. It reflects the changes in categories of concern and approaches that have been endorsed by the Norfolk Safeguarding Boards for Children and Adults and brings the Policy up to date.

- 2.1.2 While the review of the Policy has been delayed it is important to note that during the past 6 months the Council has been vigilant about its safeguarding responsibility. It has strengthened its Early Help resource through the COVID community response element and focussed on the most vulnerable in the community through the set up of the new Vulnerability Hub. Although some visiting services were paused or suspended during the lockdown period, especially in housing, considerable effort was made to ensure tenants and residents were fully supported and had many ways of contacting the council with any form of concern.

- 2.1.3 The new policy is a comprehensive update on all of the areas of concern covered by the Safeguarding duty. In order to make it accessible to both employees and Councillors it is proposed a summary of key points is prepared for the Loop including a flowchart for referring concerns and the whole safeguarding area is updated to enable easy access to both information and training opportunities for each of the areas of concern.

### **2.2 Updates**

- 2.2.1 In order to ensure that everyone within the Council understands their own individual Safeguarding responsibility and what to do if they identify a Safeguarding situation a new online training programme has been developed across Norfolk and purchased by the Council. It is proposed that all staff complete the majority of the training with the

exception of the Recruitment element being targeted at Managers and staff directly involved in the Council's recruitment. The online training will also be made available to all Councillors to enable them to fulfil their Safeguarding responsibilities. The aim is that staff will complete the online training by the end of 2020.

- 2.2.2 The Designated Safeguarding Officers (DSO) group has also reviewed. It has been agreed by Group Management Team that the DSO role be redefined in line with the new Policy and that each service revisits their DSO representatives to ensure they are clear of the responsibilities they will be taking on and their role going forwards. Each service will be required to have at least one DSO. It is proposed that the DSO officers will meet bi-monthly to take an overview of referrals within services, discuss the learning from cases and take it back into their services to ensure the Council is meeting its legal responsibilities. The Early Help Hub manager is the Council's representative on the Norfolk Safeguarding Boards for both Adults and Children and is best placed to chair the Great Yarmouth DSO group to ensure the linkages between the GY and Norfolk groups. The Council's Designated Safeguarding Lead (Strategic Director) will also attend the DSO meetings.
- 2.2.3 One issue that has been raised is that there is currently a lack of consistency across Norfolk Councils regarding Safeguarding referrals and recording. At GYBC, previously referrals have been managed using a Spreadsheet and a single email inbox. The Council has now purchased ECINS (a bespoke recording system) and will use this to improve the recording of information and the referral process. All DSO's will be trained on ECINS once it is implemented.
- 2.2.4 As far as the Norfolk Safeguarding set up is concerned there are a number of partnerships operating across the strategic and operational remits. Attendance at these meetings has been reviewed to make sure the most appropriate officer attends each meeting. The Designated Safeguarding Lead (Strategic Director) now attends the Norfolk County Community Safety Partnership as the overarching body for all groups dealing with Crime and Disorder, Anti-Social Behaviour, Safeguarding, Prevent, County Lines and Domestic Violence. The members of the GY Strategic Safeguarding Group (above) attend the various groups and boards above that report into the NCCSP.
- 2.2.5 As mentioned above the Loop requires an update to ensure all the information relating to Safeguarding is up to date and linked to the new Safeguarding Policy and training programme – this work is underway. The Policy will also be published on the Council's website and there is a significant role for Communications to play in raising public awareness across all the issues within the remit of the NCCSP. The Head of Communications and Marketing is supporting the development of this work with other district and county colleagues.

### **3. Financial Implications**

- 3.1 The new online training programme has already been purchased from the central training budget as it is a statutory duty to train all staff in their safeguarding responsibilities. This training will also be available to all members.

- 3.2 The Designated Service Officer roles have been identified as key and similar to other roles such as Health and Safety Coordinators in terms of their importance and responsibility. It has been agreed that these roles should also attract a £240pa special responsibilities payment. This is budgeted for from within current HR allowances.
- 3.3 GY also pays a £5,000 annual contribution towards the Norfolk County Safeguarding Coordinator role.

#### **4. Risk Implications**

- 4.1 The Safeguarding duty is a statutory duty and the risk of not ensuring all staff are well trained and aware of their responsibilities under the relevant acts and how to report concerns and take appropriate action is significant. Although there have not been any notable concerns raised with the current approach the changes proposed will enable a more robust and comprehensive approach across all staff which mitigates this risk.

#### **5. Recommendations**

1. Proposes the new Safeguarding Policy for approval
2. Notes some updates to the Councils approach to managing its safeguarding responsibilities.
3. Agrees to carry out a review of this policy after three years unless there is a significant change in legislation requiring earlier review.

#### **6. Background Papers**

##### **Great Yarmouth Safeguarding Policy**

*Areas of consideration: e.g. does this report raise any of the following issues and if so how have these been considered/mitigated against?*

<b>Area for consideration</b>	<b>Comment</b>
Monitoring Officer Consultation:	Carried out
Section 151 Officer Consultation:	Carried out
Existing Council Policies:	Great Yarmouth Safeguarding Policy March 2017
Financial Implications (including VAT and tax):	Covered in report
Legal Implications (including human rights):	Covered in report

Risk Implications:	Covered in report
Equality Issues/EQIA assessment:	Considered in policy
Crime & Disorder:	Considered in policy
Every Child Matters:	Considered in policy



# Great Yarmouth Borough Council Safeguarding Policy

<b>Date of Policy</b>	<b>October 2020</b>
<b>Owner of Policy</b>	<b>GYBC Safeguarding Managers Group</b>
<b>Ratified by</b>	<b>Policy and Resources Committee</b>
<b>Review Date</b>	<b>March 2023 (or as legislation requires)</b>

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## 1. Introduction

- 1.1 Safeguarding encompasses legal duties and responsibilities to protect people's health, wellbeing and human rights, supporting them to prevent problems from escalating and enabling them to live free from harm, abuse and neglect.
- 1.2 Safeguarding involves many organisations including: Criminal Justice Agencies, Children's Services, Adult Social Care and Health. District Councils have a range of statutory duties to safeguard and promote the wellbeing of individuals and communities which complement but do not duplicate those of our partners.

- 1.3 This Council embraces its duties and responsibilities to keep people safe. This policy ensures that we fulfil our legal duties, taking consistent and effective action to protect those who need safeguarding. This includes:

- Having effective safeguarding policies and procedures in place
- Having a workforce who know how to identify concerns
- Referring concerns to partner agencies
- Working closely with partners (e.g. police, social care, etc)
- Undertaking regular audit and scrutiny to test our effectiveness.

**This policy and its related procedures apply to and must be followed by all staff, councillors, volunteers, and contractors or consultants working on behalf of and/or representing the Council.**

Everyone must:

- Know where and how to access this policy and its related procedures;
- Read and comply with these documents;
- Complete appropriate training for their role;
- Identify and respond to concerns, abuse, alleged abuse, neglect, exploitation and/or poor practice;
- Understand how, why and who to contact with concerns or for further advice;
- Always respond to concerns, discussing these with their manager, the safeguarding lead officer or another appropriate organisation;
- Act swiftly to ensure the safety and wellbeing of anyone at risk or suspected of being at risk.

## 2. Safeguarding Roles and Responsibilities

### Safeguarding is everyone's business

#### 2.1 All Employees

- 2.2 All employees must read this policy and associated procedures and complete relevant safeguarding training in order to fulfil their legal responsibility to identify and respond to actual or alleged abuse and poor practice. Those who visit people's homes must be particularly alert to signs of abuse or neglect. All officers must always report and respond to concerns, doing so swiftly to ensure the safety and wellbeing of those involved. Early intervention and empowerment are key, working with the person in a multi-agency approach to prevent the situation deteriorating. Officers will be alert to and record their response to the person's wishes, keeping details of safeguarding activity on the individual's case file and advice of the Safeguarding Managers Group.

- 2.3 All officers should exercise professional curiosity, looking beneath the surface and testing the facts and also their 'gut feelings' rather than accepting every explanation, however plausible. Staff may need to discuss concerns with their manager and/or refer these to another agency. If an employee and their manager do not agree on the best course of action when a concern is raised, they should speak to the Designated Safeguarding Officer (DSO) for their service area.



## **2.4 Managers and Supervisors**

- 2.5 Team managers and supervisors are responsible for increasing safeguarding awareness in their services, ensuring that staff are properly trained and follow good practice. They will include relevant safeguarding actions in their service plans, ensure that team and individual training needs are identified in appraisal and supervision, and ensure training is completed. They will review and manage progress on cases identified by their teams.
- 2.6 Dealing with abuse and neglect can be stressful and distressing. Managers will support and supervise staff appropriately recognising the impact Safeguarding cases can have on staff. They will respond promptly to requests for information regarding specific cases and maintain clear communication with the Designated Safeguarding Officer and their Deputies, and good working relationships with other agencies, addressing any difficulties between frontline staff.

## **2.7 Housing and Environmental Health**

- 2.8 All Housing and EHO staff working with individuals and families in difficult and/or crisis situations may identify concerns regarding their welfare. Intervening early, working with parents or carers, taking account of the needs of the individual, in a multi-agency approach e.g. joint home visits with a Health Visitor; referral to Children's Services or Adult Care, often prevents the situation deteriorating. This policy requires such a response in every case where staff work with a 16 or 17 year old homeless child, a pregnant teenager or teenage parent, care leaver, or where Domestic Abuse is suspected. Housing staff also assess the needs of families, including those with disabled children who may need home adaptations to enable them to participate fully in family life, and are alert to the child's own needs and wishes. Part 1 of the Housing Act 2004 requires authorities to take account of the impact of health and safety hazards in housing on vulnerable occupants, including children, when deciding on the action to be taken by landlords to improve conditions.
- 2.9 Housing staff work with and assess the needs of adults who may be vulnerable due to their circumstances, including older people, those with disabilities, long-term conditions and sensory impairment, those fleeing domestic violence, those with learning disabilities, mental health needs or who abuse drugs or alcohol. They may need specialist housing, medical help and/or housing adaptations. The Housing Act 1996 section 213A requires housing authorities to refer to adult care services people with whom children normally reside or might reasonably be expected to reside, who they believe may be ineligible for assistance, or who may be homeless and may become so intentionally or who may be threatened with homelessness intentionally, as long as the person consents. If homelessness persists, any child in the family could be in need. In such cases, if social services decide the child's needs would be best met by helping the family to obtain accommodation, they can ask the housing authority for reasonable advice and assistance, and the housing authority must give reasonable advice and assistance.
- 2.10 Tenancy Services staff will ensure that safeguarding concerns in relation to children or adults are quickly. In making decisions in relation to enforcement action, staff will consider the vulnerabilities of the tenant and their household in taking proportionate and reasonable action to resolve tenancy breaches. Such decisions will also take into account the vulnerabilities of adjacent residents who are impacted upon by the

actions/in action of the tenant. Staff will take early action where there are concerns to liaise with Early Help as well as Social Services and the police as applicable.

#### **2.11 Community Team**

- 2.12 The communities team works with children, young people and adults who are the victims or the perpetrators of anti-social behaviour or crime, or who live in families involved in anti-social behaviour. They are involved in agreeing multi-agency responses to meeting people's needs and ensuring that they live in a safe environment e.g. through Anti-Social Behaviour Advisory Group (ASBAGs). Staff are alert to signs of abuse or neglect, including the links with Domestic Abuse and Prevent, know how to record and act on their concerns, and make referrals to other agencies as appropriate.

#### **2.13 Licensing Service**

- 2.14 The Council has a responsibility to undertake its functions under the Licensing Act 2003 and the Gambling Act 2005. The Licensing Act 2003 requires 'the protection of children from harm', one of four licensing objectives. The Council must indicate in its statement of licensing policy the body (responsible authority) it deems to be competent to advise on matters relating to child protection: for the local district councils, this is Norfolk Safeguarding Children Partnership (NSCP). Also, where a premises license authorises the exhibition of films, this must include a condition requiring the admission of children to be restricted from viewing age-restricted films classified according to the recommendations of the British Board of Film Classification (BBFC) or the licensing authority itself. The licensing service is well-placed to raise awareness of abuse and neglect and promote good practice with taxi drivers and owners of licensed premises, requiring compliance with specific criteria such as completion of training in order to receive their licence.

#### **2.15 Designated Safeguarding Lead (DSL) / Deputy DSL**

The Designated Safeguarding Lead (DSL) is the senior person responsible for ensuring that the Council meets its responsibilities under the Children Act 2004, the Care Act 2014, and related statutory guidance. Their role is to provide leadership and accountability, increasing awareness of safeguarding issues across the Council. They have authority to commit resources and make strategic decisions, providing expert advice to Senior Managers, staff and councillors.

- 2.16 Working with the Safeguarding Managers Group and the Designated Safeguarding Officers Group they co-ordinate safeguarding activity: implementing and reviewing policy and procedures; co-ordinating and monitoring training; ensuring safer recruitment; supporting referrals; overseeing complex cases to ensure these are dealt with promptly, thoroughly and fairly; ensuring appropriate reporting and recording systems which comply with Data Protection and Confidentiality requirements; meeting external requests for information; engaging in serious case reviews, audits and inspections, and conducting assurance reviews, reporting on and implementing the outcomes of these. They also disseminate information from Norfolk Safeguarding Children Partnership and Adults Board (NSCP and NSAB) as necessary.

- 2.17 The DSL or deputy DSL leads on inter-agency arrangements, liaising with NSCP and NSAB. They support case referrals to NSCP / NSAB for review where: there is a need to enhance inter-agency working or the case is of particular interest or concern; a case is an example of good and effective practice; or where there is a split decision regarding action to be taken to safeguard an individual. The DSL/Deputy DSL contributes to multi-agency reviews and investigations, with a role in agreeing the scope of reviews and representing their agency; and assists in overcoming difficulties in inter-agency working which cannot be resolved by other colleagues, including initiating and responding to cases in line with the agreed escalation policy.

**The Strategic Director is the Designated Safeguarding Lead, The Deputy DSL is the Early Help Hub Manager.**

2.18 **Chief Executive and Management Team**

- 2.19 The Chief Executive leads and promotes the Council's work to identify, respond to and prevent abuse and neglect, in line with national legislation and local guidance. The Chief Executive must assure themselves that safeguarding systems and practices within the Council are effective.
- 2.20 The Council's Senior Management Team must ensure that resources are available to support staff, councillors, volunteers, contractors and consultants, including lead officer time, training budgets, etc. and ensure appropriate scrutiny and reporting arrangements are in place to review legal compliance with safeguarding requirements.

**The Chief Executive as Head of Paid Service is responsible for recruitment and disciplinary action in relation to all staff.**

- 2.21 **All councillors** need a good understanding of safeguarding and the need to balance this with empowerment. All councillors must read this Policy, adhering to this at all times and undertaking appropriate training. Councillors attending Norfolk Health Overview and Scrutiny Committee, Health and Wellbeing Boards (HWBs) and County Community Safety Partnership all play a further role in assuring local safeguarding measures are effective and accountable.
- 2.22 **The Monitoring Officer** ensures that the Council, its officers and its councillors maintain the highest standard of conduct in all they do. The Monitoring Officer is likely to be involved in advising political group leaders regarding member conduct.
- 2.23 **The Licensing Committee** operates under the Licensing Act 2003 and the Gambling Act 2005, requiring members of the Committee to protect children and other vulnerable persons from being harmed or exploited by gambling. Committee members must complete appropriate training in order to serve on this Committee.
- 2.24 **Policy and Resources** approves this Safeguarding Policy and procedures.
- 2.25 **The Council as a Commissioner of Services from Key Contractors** Where a Council commissions services from key contractors, it retains a legal duty to assure itself of the quality and safety of their safeguarding arrangements, holding them to account for preventing and dealing promptly and appropriately with any examples of abuse and neglect. Staff and volunteers in these agencies will have different levels and types of contact with children, young people and adults, but all are required to be alert to safeguarding concerns, recording details of these and any actions taken in response, reporting these to their manager and to the relevant agencies where further

action is needed. GYBC requires these agencies to complete three-yearly Section 11 (children's) audit reviews and annual updates on progress and to share their annual Modern Slavery Statements.

- 2.26 **Community and Voluntary Organisations** Where the Council makes grants to community and voluntary organisations, these should have appropriate safeguarding policies in place.

**Anyone who does not believe they can comply with this Policy should speak to the Designated Safeguarding Lead.**

### 3. Policy Overview

- 3.1 This Policy aims to protect all children, young people and adults who need safeguarding (including employees, apprentices and those on work experience); those who use our services or are cared for by others who use our services; and those with whom our staff, councillors, volunteers, commissioned contractors and consultants have contact. It aims to:

- Provide guidance for staff, councillors, volunteers, contractors and consultants acting on behalf of the Council, protecting the Council and those individuals from failing to take safeguarding actions;
- Ensure a person-centred approach which puts people's own needs and wishes first, hears their voice, respects their views and upholds their human rights but recognises some safeguarding concerns will be required to be raised without consent;
- Achieve the best possible outcomes for all individuals, including enabling all children and young people to Stay Safe, Be Healthy, Enjoy and Achieve, Make a Positive Contribution and Achieve Economic Wellbeing (Children Act 2004);
- Secure stable relationships with professionals built on trust but with respectful challenge if required;
- Provide consistent support to help people to meet their individual needs, with all decisions taken in line with the Mental Capacity Act (MCA) 2005;
- Ensure that everyone gets the support they need;
- Provide a proportionate, timely, supportive, informed and professional response to anyone experiencing abuse or neglect;
- Ensure that the Council plays its full role in safeguarding and promoting the health and welfare of all children, young people and adults, at all times;
- Create a safe and healthy environment within all of our services, avoiding situations where abuse or allegations of abuse may occur.

The Council will:

- Work within national legislation and guidance.
- Be an active member of multi-agency partnerships in Norfolk including Norfolk County Community Safety Partnership, Norfolk Safeguarding Adults Board (NSAB) Norfolk Safeguarding Children Partnership (NSCP), Domestic Abuse and Sexual Violence Group (DASVG), County Lines and Channel / Prevent protocols.
- Prevent harm and minimise risks by working closely with other agencies, supporting risk assessments and providing proactive support.
- Designate a Senior Manager to oversee and manage the Council's safeguarding activity.
- Listen to and respect individual's wishes and feelings, empowering and supporting them to make their own choices, and promoting their rights, including publicising routes for self-referral.
- Respond to concerns, unmet needs and emerging issues quickly and in the individual's best interests.
- Develop, implement and maintain effective procedures for recording, tracking and learning from incidents and how these were handled.
- Implement safer recruitment procedures.
- Identify training needs, develop plans and provide appropriate training for staff and councillors to enable them to recognise signs of potential harm and to act on any concerns in line with this policy.
- Ensure ongoing supervision and support, in particular for those staff most likely to be dealing with those at risk of abuse or neglect.
- Develop safe working practices and environments which reduce the risk and avoid situations where abuse or allegations of abuse may occur.
- Aid staff, councillors, volunteers, key contractors and consultants to respond sensitively and seriously to anyone who discloses information about abuse, ensuring that they are confident to take appropriate action regardless of whom the allegation is about (e.g. carer, staff, councillor, partner agency, etc.).
- Develop and implement effective procedures for recording and responding to complaints of alleged or suspected abuse by staff, councillors, volunteers, key contractors or consultants, ensuring they receive appropriate advice.
- Raise awareness of the Council's responsibilities throughout the organisation, actively encouraging good practice and promoting wider awareness where possible e.g. through partnerships and other user groups.

- Actively reflect on the Safeguarding Policy, Procedures and Practice.

## 4. Components of Safeguarding

4.1 This Policy covers six key components:

- Safeguarding Children and Young People
- Safeguarding Adults at Risk
- Domestic Abuse
- Preventing Violent Extremism
- Modern Slavery and Human Trafficking
- Hate Crime and Mate Crime

## 5. Safeguarding Children and Young People

5.1 The Children Act 2004 places a statutory duty on all agencies to safeguard and promote the welfare of children. The statutory guidance Working Together 2018, defines this as:

- Protecting children from maltreatment;
- Preventing impairment of children's health or development;
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- Taking action to enable all children to have the best outcomes.

5.2 The Children Act requires agencies to co-operate through the Norfolk Safeguarding Children's Partnership (NSAP) to take co-ordinated action where there is evidence of abuse and neglect, to identify and prevent Child Sexual Exploitation, to safeguard the victims, to review and understand what occurred, and to make every effort to prevent this occurring again.

5.3 The NSCP develops local guidance in response to issues arising from case reviews such as the Pre-Birth Protocol.

5.4 If you have any concerns that a child, young person is at risk of significant harm or that through early intervention agencies working together could offer help or support, follow the **Flow Chart on the Loop**.

## 6. Safeguarding Adults at Risk

6.1 The Care Act 2014 defines safeguarding as protecting an adult's right to live in safety, free from abuse and neglect. It requires people and organisations to work together to prevent and stop the risk and experience of abuse or neglect, and at the same time to ensure that the adult's wellbeing is being promoted.

6.2 The Care Act 2014 and Care and Support Statutory Guidance 2016 require all agencies to identify, record, respond to, investigate and report concerns which might indicate that an adult is experiencing or is at risk of experiencing abuse and neglect, always taking account of the needs and wishes of the individual. It requires agencies



to co-operate through the Norfolk Safeguarding Adults Board (NSAB) to take coordinated action where there is evidence of abuse and neglect, to safeguard the victims, to review and understand what occurred, and to make every effort to prevent this occurring again.

- 6.3 Borough Councils co-operate fully with Multi-Agency Public Protection Arrangements (MAPPA) to manage registered sex offenders, violent and other offenders who pose a risk of serious harm to the public.
- 6.4 The Care Act specifically refers to safeguarding people who experience difficulty and require support as a result of **hoarding** behaviours. Hoarding is beyond collecting and in extreme cases puts the individual, and potentially others, at risk of harm. Local guidance in the form of a multi-agency protocol will be available shortly.
- 6.5 If you have any concerns that adult with needs for support and care is at risk of significant harm, follow the **Flow Chart on the Loop**.

## 7. Domestic Abuse

- 7.1 The 'Call to End Violence Against Women and Girls' Report and The Ending Violence against Women and Girls Strategy (2016-2020) outline the need for a multi-agency response to support high risk victims with a commitment to preventative action to reduce domestic abuse. These recognise that men and boys are also victims of domestic abuse, challenging established attitudes and beliefs.
- 7.2 The Norfolk County Community Safety Partnership (NCSP) has identified domestic abuse as a priority. Reporting to the NCSP, the Domestic Abuse and Sexual Violence Group (DASVG) takes responsibility for delivering action to reduce domestic abuse, creating an environment where domestic abuse is not tolerated and seeking to reduce the impact on victims. Developed in consultation with partner agencies, councillors and with victims and survivors of domestic abuse, Norfolk's Domestic Abuse Strategy and Delivery Plan sets the vision and direction for tackling domestic abuse.
- 7.3 Under the DASVG sits a number of operational subgroups and working groups which meet to deliver on the various objectives associated with this strategy these include:
  - That domestic abuse will not be tolerated.
  - That domestic abuse is not the fault of the victim.
  - That staff and managers should be aware of domestic abuse, its impact and how to respond appropriately.
  - That partner agencies must work together to provide a joined up approach when responding to domestic abuse situations.
  - That prevention, provision of services and partnership working in relation to domestic abuse remains a priority.
  - That there is a commitment to justice for victims and reduction in risk.

- 7.4 The Council co-operates fully with Multi-Agency Risk Assessment Conferences (MARACs) where information about high risk domestic abuse victims (those at risk of murder or serious harm) is shared to develop a risk-focused, co-ordinated safety plan to support the victim, ensuring their voice is heard through the Independent Domestic Violence Advisor (IDVA).
- 7.5 If you suspect or become aware that someone is experiencing Domestic Abuse, follow the **Flow Chart on the Loop**

## **8. Radicalisation and Extremism: Prevent/Channel**

- 8.1 Whilst there is no specific terror threat to Norfolk, everyone has an important role to play in identifying and preventing people from becoming radicalised into extremist violence. Section 26 of the Counter-Terrorism and Security Act 2015 placed a Prevent Duty on all local authorities, requiring councils to have “due regard to the need to prevent people from being drawn into terrorism”. Channel is part of the Prevent Strategy, nationally and locally, to intervene early to prevent people becoming radicalised into violent extremism. Norfolk’s Prevent Strategy (2019-21) aims to empower all communities and to stand up to the small minority who support violent extremism

For more information, refer to the **Flow Chart on the Loop**

## **9. Modern Slavery and Human Trafficking**

- 9.1 Human trafficking is the movement of a person from one place to another into conditions of exploitation, using deception, coercion, the abuse of power or the abuse of someone’s vulnerability. The Modern Slavery Act 2015 unified and simplified previous legislation, giving law enforcement agencies new powers, increasing sentencing and protection for survivors. It requires organisations, including Councils, to take steps to ensure that there is no slavery or human trafficking in their own operations or their supply chains, and to publish an annual Modern Slavery Transparency Statement to provide assurance of this.

For more information, refer to the **Flow Chart on the Loop**.

## **10. Hate Crime and Mate Crime**

- 10.1 Crimes committed because of someone’s disability, gender identity, race, religion / belief, or sexual orientation are hate crimes. Hate crimes include: threatening behaviour, assault, robbery, damage to property, inciting others to commit hate crimes, and harassment. Hate crimes must be reported to the police. Mate crime is a form of crime in which a perpetrator befriends a vulnerable person with the intention of then exploiting them financially, physically or sexually.
- 10.2 The Council is committed to reducing Hate and Mate Crime, identified as a priority of Norfolk Community Safety Partnership. The Norfolk Community Safety Partnership’s Priorities are:
- Domestic abuse & sexual offences



- Preventing Extremism & Radicalisation
- County Lines

For more information, refer to the **Flow Chart on the Loop**

## 11. Recognising Potential Abuse

11.1 Even though staff, councillors, volunteers, contractors and consultants may have limited contact with children and adults with needs for care and support as part of their duties, everyone must be aware of the potential indicators of abuse and know about what to do if you have concerns. Recognising abuse is not easy. Everyone is unique. It is difficult to predict how behaviour may change as a result of abuse. In all forms of abuse, there are elements of emotional abuse. Some people are subjected to more than one form of abuse at any one time.

11.2 Listed below are some physical and behavioural indicators that may be commonly seen in children, young people and adults who are abused. Everyone will exhibit some of these indicators at some time. You may see one, none or several of these, but remember they are only an **indication** and not **confirmation or proof** that abuse is taking place. It is not your responsibility to decide whether or not abuse has taken place or if a child, young person or adult is at significant risk. But you must act if you have concerns and pass on the information.

### 11.3 Child abuse or maltreatment is:

All forms of:

- Physical ill treatment
- Sexual abuse
- Emotional ill treatment
- Neglect
- Discriminatory abuse

Abuse may consist of actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power.

### 11.4 Adult abuse or maltreatment is:

All forms of:

- Physical abuse
- Sexual abuse
- Emotional or psychological abuse
- Financial or material abuse
- Self-neglect or acts of omission
- Neglect by others
- Institutional abuse
- Discriminatory abuse

Abuse may consist of a single act or repeated acts. It can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

### **11.5 Physical Abuse:**

Hitting, slapping, pushing, kicking, misuse of medication, being locked in a room, inappropriate sanctions, force-feeding, inappropriate methods of restraint, and unlawfully depriving a person of their liberty.

- Unexplained injury or injury that is not consistent with the explanation given
- Unexplained fractures/repeated admissions to hospitals
- Flinching when approached/being unwilling to cooperate with personal care
- Bruising suggesting systematic injury, in the shape of objects or finger marks

### **11.6 Emotional or Psychological Abuse:**

Includes threats of harm or abandonment, deprivation of contact, humiliation, rejection, blaming, controlling, intimidation, coercion, indifference, harassment, verbal abuse (including shouting or swearing), and isolation or withdrawal from services or support, unexplained injury or injury not consistent with the explanation given

- Untypical ambivalence, deference, passivity, resignation
- Person appears anxious or withdrawn, especially in the presence of the alleged abuser
- Person exhibits low self-esteem
- Untypical changes in behaviour (e.g. incontinence, sleep disturbance)

### **11.7 Sexual Abuse:**

Forcing or enticing a person to take part in sexual activities, whether or not they are aware of or consent to what is happening. May involve penetrative or non-penetrative contact and/or looking at or being involved in pornography or prostitution.

- Inappropriate sexual behaviour
- Promiscuity
- Sudden changes in behaviour
- Running away from home (Children who go missing)
- Emotional withdrawal through lack of trust in adults
- Unexplained money or gifts
- Inappropriate sexually explicit drawings or stories
- Bedwetting or soiling
- Overeating or anorexia
- Sleep disturbances
- Secrets which cannot be told
- Substance/drug misuse

### **11.8 Financial Abuse:**

Theft, fraud, exploitation, pressure in connection with wills or property and misappropriation of property or benefits. It also includes withholding of money or unauthorised or improper use of a person's money or property. Staff borrowing money or objects from a service user is also considered financial abuse and will be dealt with through the Council's disciplinary process.

- Lack of money, especially after benefit day
- Inadequately explained withdrawals from accounts

- Disparity between assets/income and living conditions
- Disappearance of bank statements, other documents or valuables
- Loans or credit being taken out

#### **11.9 Discriminatory neglect:**

May be a factor within any of the other categories of abuse and is motivated by oppressive and discriminatory attitudes towards a person based on their disability, race, gender, religion or belief, cultural background, sexual orientation or appearance

- Unequal treatment
- Verbal abuse
- Inappropriate use of language
- Slurs
- Harassment
- Deliberate exclusion
- Assumptions based on stereo typical ideas held about one aspect of a person

#### **11.10 Neglect:**

Self-neglect and neglect by others can be characterised as not responding to a person's basic needs. Those who self-neglect often live in extreme conditions of squalor and can have a tendency to hoard.

- Has inadequate heating and/or lighting
- Poor physical condition / appearance (e.g. ulcers, pressure sores, soiled/wet clothing)
- Is malnourished, has sudden or continuous weight loss and/or is dehydrated
- Cannot access / refuses appropriate medication or medical care
- Is not afforded appropriate privacy or dignity
- Person and/or a carer has inconsistent or reluctant contact with health and social services
- Callers/visitors are refused access
- Is exposed to unacceptable risk

#### **11.11 Cultural Abuse**

There is an increased incidence and awareness of the need to be alert to cultural abuse. There are a number of different issues under this heading:

**11.12 Honour-Based Violence** is a crime, and referral to the police must always be considered. It has or may have been committed when families feel that dishonour has been brought to them, often but not always by a young female relative. The victims and the violence are often committed with a degree of collusion from family members and the community. Many victims do contact the police or other organisations but others are isolated and controlled so they cannot to seek help.

**11.13 Female Genital Mutilation (FGM)** involves procedures that intentionally alter or injure female genital organs for non-medical reasons, with health benefit but significant physical, mental and emotional harm. The Female Genital Mutilation Act, introduced in 2003 and effective from March 2004, makes it illegal to practice FGM in the UK or to take girls who are British nationals or permanent UK residents abroad for FGM, whether or not it is lawful in another country. It makes it illegal to aid, abet, counsel or

procure the carrying out of FGM abroad. It also places a legal duty on individual staff to report all incidents to the Police. It includes breast ironing. Staff should follow the flowchart on the Loop for how to do this.

- 11.14 Forced Marriage** describes a marriage in which one or both of the parties is married without their consent or against their will. This differs from an arranged marriage, in which both parties consent to the assistance of their parents or a third party in identifying a spouse. Where there is concern that an adult at risk is being forced into a marriage they do not or cannot consent to, there will be an overlap between action taken under the forced marriage provisions and the Safeguarding Adults process. Action will be co-ordinated with the Police and other relevant organisations but the Police must always be contacted in the first instance as urgent action may be needed.

## **12. Equality**

- 12.1 Everyone, regardless of background, should be given the same level of support and protection. Regard should always be given to a person's religion or belief.
- 12.2 People with disabilities, migrant adults and children, unaccompanied asylum-seeking children (UASC), victims of trafficking, domestic abuse and bullying may have additional care needs and this should be remembered when considering the behavioural indicators.

## **13. Mental Capacity**

- 13.1 The Mental Capacity Act (MCA) 2005 requires an assumption that all adults and all young people aged 16 or over have full legal capacity to make decisions unless it can be shown that they lack capacity to make a decision for themselves at the time that the decision needs to be made. Individuals must be given all appropriate help and support to enable them to make their own decisions or to maximise their participation in any decision-making process. Unwise decisions do not necessarily indicate lack of capacity.
- 13.2 Any decision made, or action taken, on behalf of someone who lacks the capacity to make the decision or act for themselves must be made in their best interests. An individual's mental capacity must be considered at each stage of the process. More information can be found in the Safeguarding Adults Guidance and Procedures.

## **14. Professional Curiosity and Respectful Uncertainty**

- 14.1 Always exercise professional curiosity. This is the ability to ask proactive questions rather than making assumptions or reaching conclusions not based on assessment of history and current circumstances. Never be frightened to ask the obvious question to look beneath the surface rather than accepting everything at face value.
- 14.2 Professional curiosity is much more likely if practitioners:
- have good quality training to help them develop
  - have access to good management, support and supervision to review challenging and potentially upsetting situations

- have time to review the lived experience of children and families and undertake regular assessment to ensure new information and developments are reflected
  - have capacity to keep 'working away' to find what might have happened.
- 14.3 Always exercise **respectful uncertainty** considering and where necessary challenging the responses. People do not always tell the truth, sometimes to deny a situation to avoid detection or because they are afraid.
- 14.4 Always consider and record the specific circumstances and wider context: does the person have mental capacity, are others at risk, is there an emerging pattern, have others witnessed this, what is the role of family members and/or paid staff?
- 14.5 Always try to speak to individual family members separately. When that is not possible, and particularly when a person is not being allowed to be seen alone, be particularly alert: for example, when someone:
- waits for her/his partner to speak first
  - glances at her/his partner each time (s)he speaks, checking her/his reaction
  - smoothes over any conflict
  - speaks for most of the time stopping others speaking
  - sends clear signals by eye / body movement, facial expression or verbally, to warn the other person
  - has a range of complaints about the other person, which (s)he does not deny.
- 14.6 Always, as soon as possible, make a factual record of everything that has happened, was said and was seen. Also record whether the issue was referred on or not, and the reasons in either case. Records must be accurate, legible, dated and reflect the author of the record.
- 14.7 If you are not sure how to proceed or if the situation is urgent, make referral to the Designated Safeguarding Officer for your service or your manager. Keep a record of who you speak to and their response.

## 15. Inter-Agency Disputes, Escalation Policies & Challenge Logs

- 15.1 If you are concerned about or unhappy with the decisions or action / lack of action of another agency when referring a case or securing their involvement in supporting an individual, this can be escalated by the Designated Safeguarding Officer or their Deputy. The NSCP and NSAB's Escalation Policies and Protocols require Designated Safeguarding Officers in all agencies to act on issues which are escalated to them by partners, challenging their own staff regarding the concerns raised and seeking assurance about the appropriateness of decisions and actions.
- 15.2 The NSCP and NSAB maintain records of any challenges made, to identify issues which might require additional local guidance to provide clarification for the future.

## 16. Confidentiality, Information Sharing and Consent

- 16.1 Personal information held by professionals and agencies is subject to a legal duty of confidentiality. Information would normally only be disclosed to third parties, including other organisations, with the consent of the subject of the information. In most cases you will ask for and receive their consent to share. However, in some situations, there may be times when it is necessary to disclose information without the subject's consent. If staff are unsure about what action to take they should discuss with a DSO.
- 16.2 You cannot promise someone that you will keep their situation totally confidential. You should always make them aware at the earliest opportunity that you may need to share information with others in order to safeguard and support them. You should always seek their consent to share information, but there will be some limited circumstances where this is not possible or not appropriate. However, consent may not be needed for a referral, for example if the person lacks mental capacity.
- 16.3 You should make every effort to maintain confidentiality for all concerned in an incident by sharing information appropriately and only on a "need to know" basis. Do not discuss allegations or concerns inappropriately as this could damage the individual, their family and any resulting investigation.
- 16.4 Confidential information should always be stored securely with access limited to the Early Help Hub Manager, the designated safeguarding officer, the DSL or deputy DSL, in line with data protection laws e.g. paper records in a lockable drawer, electronic data in a secure folder and/or password protected. If sending emails in relation to a safeguarding issue, these should only be sent to a Designated Safeguarding officer, the DSL or deputy DSL and emails should be marked confidential without personal details in the subject line.
- 16.5 Sharing information appropriately with other agencies protects people and prevents harm. Information sharing is key to delivering better, more efficient public services that are co-ordinated around the needs of the individual. It is vital to enable early intervention and prevention work, for safeguarding and promoting wellbeing and for wider public protection, to improve outcomes for all.
- 16.6 Knowing when and how to share information is not always easy but it is important to get it right. People need to be confident that their personal information is kept safe and secure and that their individual privacy is considered and safeguarded. It is essential to share information appropriately and confidently.
- 16.7 You must be aware of and adhere to information sharing protocols and data protection regulations, always recording who information has been shared with and on what basis.
- 16.8 Deciding 'Who needs to know' and 'What needs to be known' should be done on a case by case basis in line with agency policies and national legislation.

### **Before you share information, ask yourself the following questions:**

- Do I have the person's permission to disclose personal information?

### **If not:**

- Do I have the legal power to disclose this information?

- Is there a duty to protect the wider public interest, are other people at risk?
- Am I proposing to share information with due regard to common and statute law?
- Where a child is experiencing abuse or harm caused by their parent / carer (e.g. fabricated or induced illness), the parent's consent should not be sought.
- Preventing serious harm; including through prevention, detention and prosecution of a serious crime.
- Providing urgent medical treatment
- Implementing specific actions required by the Care Act 2014.

If a child over 16 or an adult lacks capacity to consent to sharing information, then any information disclosed must comply with the Mental Capacity Act and Data Protection Act 2018.

**Sharing information that may be in the public interest includes:**

- When there is reasonable cause to believe someone is suffering, or is at risk of suffering serious harm
- To prevent the person from harming someone else
- To promote the wellbeing of the person
- Detecting crime
- Apprehending offenders
- Maintaining public safety.

- 16.9 The Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.

There are **Seven Golden Rules for Information Sharing**

Be open and honest	Be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will or could be shared and seek their agreement, unless it is unsafe or inappropriate to do so.
Seek advice	If you are in any doubt, seek advice from the Designated Safeguarding Officer, their Deputy or the Data Protection officer, without disclosing the identity of the person if possible.
Share with consent	Where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts of the case. Seek advice if you are not sure.
Consider safety and well-being	Base your information sharing decisions on considerations of the safety and wellbeing of the person and others who may be affected by their actions.
Necessary, proportionate	Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those who need to have it, is accurate and up-to-date, is shared in a timely fashion and is shared securely.
Keep a record	Keep accurate records of your concerns, your decision and the reasons for it, whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.



- 16.10 Enquiries from those involved in an incident or from their families or carers should be dealt with by the case officer or their line manager. Always be cautious about sharing information with family members where this may put other relatives at risk. You may need consent to share even within families.
- 16.11 Where councillors refer cases to officers, they should seek the person's consent, if possible in writing. Officers cannot share information with councillors without the consent of the person involved.
- 16.12 The Council does not disclose details about individuals or incidents to the public or to the media. Such enquiries should be directed to the Communications Team .
- 16.13 Enquiries from the general public regarding this policy or any specific incident should be referred to the Designated Safeguarding Lead.

## 17. Record Keeping

- 17.1 Records must always be made with great care. They will almost always be open to inspection by others, including those about whom they are made; they may be required as evidence in case reviews of legal proceedings.
- 17.2 Good records are factual, accurate, legible, comprehensive and made as soon after the incident as possible. They include direct evidence, such as the words used by individuals themselves, and specific information, such as the exact location of an injury (e.g. bruising 'on the left lower forearm just above the wrist', rather than 'on the arm'). Diagrams which explain family relationships, layouts of locations, or locations of injuries are helpful.

When making records, do not:

- Make value judgements about those involved
- Criticise those involved for their behaviours, attitudes, beliefs or actions
- Use jargon, slang, derogatory or negative language about victims or perpetrators
- Use abbreviations which are not explained
- Speculate or make assumptions about someone's explanations or actions. Speculating makes assumptions; professional curiosity teases out concerns and prevents assumptions being made.

Always record:

- The date and time of the incident
- The person's name, address and date of birth
- The nature of the allegation or incident and, if possible, the name, address, date of birth or any others involved, including the employer of anyone alleged to have caused the harm.
- Factual observations: visible injuries, the person's behaviour / physical / emotional state, etc.
- Exactly what they said, using their own words, and exactly what you said.
- **Their consent to share the information.**



- All actions you took: who you spoke to and all resulting actions so far. Include names, addresses and telephone numbers wherever possible.
  - **Electronically sign and date your record or store on E-CINS .**
  - Consider whether the person needs adding to the Council's Warning Marker system. If you feel that staff, councillors, volunteers, contractors or consultants may be at risk of harm from the person, seek advice from the Health and Safety Officer.
- 17.3 For **every** safeguarding incident, email a brief anonymised summary of the issue and all action taken to the Designated Safeguarding Officer for your service.
- 17.4 Staff without IT access should telephone the Designated Safeguarding Officer for their service.

## **18. Photography and Pornography**

- 18.1 Data protection legislation applies to photographic and film materials. People have a right to privacy. Some people have used children and young persons' activities and events as an opportunity to take inappropriate photographs or video footage of children and young people.
- 18.2 Staff, councillors, volunteers, contractors and consultants should not take photographs or video of children involved in Council or community based activities to which they are invited unless they have sought and received consent for this. Where material is produced by or for the Council, the consent of those appearing in any pictures should always be sought. Details of such materials should be listed on each service's information retention schedules and kept / destroyed in line with these.
- 18.3 Where members of the public may expect to take photographs (e.g. birthday parties, sports competitions, etc.), staff, councillors, volunteers, contractors and consultants and anyone working for and/or on behalf of the Council should be vigilant at all times. In such cases, a respectful request to provide identification and contact details should be made. Always report any activity you deem to be inappropriate at the earliest opportunity to staff attending the event, to the manager of the service or event, to the Designated Safeguarding Officer or to the Police. This is a judgement call balancing the protection of individuals and the expectations of the customer.

## **19. Recruitment, Induction and Training, Supervision and Appraisal**

### **19.1 Recruitment**

- 19.2 The Council takes all reasonable steps to ensure that unsuitable people are prevented from working with children, young people and adults at risk, through safer recruitment and verification processes.

Pre-selection checks for all relevant posts include:

- Completion of an application form and a criminal records self-disclosure.
- Where appropriate, consent to check with the Disclosure and Barring Service (DBS) for previous convictions.
- Receipt of 2 references for the 3 years prior to the application and, if there has been a period of unemployment, references from a character referee

- Substantiation of identity and qualifications.
- Eligibility to work in the UK checks

- 19.3 Where an employee changes role internally, they will go through a recruitment process which includes completion of the application form. A DBS check will be undertaken for the new role if this is a requirement of the role, before confirming the appointment.
- 19.4 All anomalies are investigated and if this identifies concerns which cannot be resolved, the offer of employment is withdrawn.
- 19.5 Managers appointing agency staff must always check that the agency has carried out appropriate checks.
- 19.6 DBS standard, enhanced and enhanced with barred list checks are undertaken for all staff whose role involves working with children young people and adults at risk as part of their normal duties, where this falls within the definition of 'regulated activity' under the Safeguarding Vulnerable Groups Act 2006, as amended by the Protection of Freedoms Act 2012. Other staff may be checked through the Basic Disclosure process where their role is not covered by DBS but it is felt to be necessary. The Council does not accept checks by previous employers or for other current activities. The list of checks completed, and those due, is held by the HR team. There is a 3-year programme of DBS renewal checks for those staff that require this as part of their role.
- 19.7 Councillors are not employees. Legislation states that DBS checks for councillors are not required unless they hold a specific role in relation to children and adults. Councillors are bound by the Council's Code of Conduct and the requirements of the Constitution. They are required to abide by this policy at all times.
- 19.8 The Council takes care that contractors and consultants working on its behalf are recruited, informed and monitored appropriately. Contractors and consultants sourced through frameworks through GYBC (South Norfolk Procurement Hub) Procurement have already provided evidence of safeguarding compliance.
- 19.9 Managers using the services of any contractor or consultant in areas where they or their staff may come into contact with children or adults with needs of care and support, must check that they have their own Safeguarding Policy or can demonstrate that they will comply with this policy, confirming in writing that they will do so, and that appropriate DBS checks are in place.

#### **19.10 Induction and Training**

- 19.11 Appropriate induction and training enables staff to understand their roles and responsibilities, develop good practice and act confidently. It encourages reporting of good and poor practice, concerns or allegations of abuse. It supports the personal development and wellbeing of staff involved in dealing with cases.
- 19.12 All new and existing staff are required to read this Policy and Procedures; all managers must check that all new and existing staff have done so. Those staff without computer access receive a hard copy.
- 19.13 Managers must clarify specific role-related expectations regarding safeguarding at induction with new staff, and with existing staff who have regular contact with children, young people and adults with needs for care and support in supervision and appraisal.

This gives the opportunity for clarification and support to be sought and provided, giving everyone assurance of compliance with the Council's legal duties.

- 19.14 Discussing specific cases as they occur, through regular supervision, Team Meetings and annual appraisals enable ongoing training needs to be identified and met for individuals and teams.
- 19.15 Managers will agree a timeframe for completing the minimum required safeguarding training for the role.
- 19.16 Training for councillors is included in the Councillor Induction Programme following an election and regularly after that point.
- 19.17 Compliance with completing training will be audited by the Safeguarding Officer from time to time to monitor compliance.

#### **19.18 Supervision and Appraisal**

- 19.19 People work best when they are well informed, trained and supported. Supervision should improve the quality of practice, support the development of integrated working and ensure continuing professional development. Effective supervision involves regular face-to-face discussion with skilled managers, including reflective practice, to enable staff to work confidently and competently with difficult and sensitive situations.

This includes:

- Ensuring that service users receive a quality service
  - Enabling understanding and implementation of policies and procedures
  - Supporting staff to be clear about their responsibilities and accountabilities
  - Giving staff opportunities to reflect on, analyse and evaluate practice
  - Giving staff opportunities to discuss best practice and safeguarding concerns
  - Providing personal support when dealing with difficult cases.
  -
- 19.20 Staff leading on dealing directly with complex or distressing cases, involved in case reviews or court cases, etc will need and should receive appropriate support from their manager or a Designated Safeguarding Officer. This may include regular and ad hoc de-briefs, and opportunities to seek external support for their wellbeing if required.
- 19.21 Appraisals should always include discussion of the safeguarding responsibilities of the role and training and development needs of staff who have regular contact with children, young people and adults with needs for care and support. To support personal development and professional competence, manager can identify good practice through:
  - Direct observation of the activity or service
  - Undertaking case file audits, where appropriate
  - Reviewing service user's feedback on the activities or services.
- 19.22 Team Meetings should also include regular agenda items to share safeguarding information, concerns and best practice.

## **20. Support to Staff Experiencing Abuse**

- 20.1 Members of staff who experience domestic abuse, or know someone who is, can seek advice. Support is also available from the employer assistance scheme. Where staff feel comfortable disclosing they are experiencing domestic abuse, they can discuss this with their manager or a colleague or Human Resources to ensure they receive support.

## **21. Safe Working Practices**

- 21.1 The following guidelines promote positive, safe working practices. They give examples of care which should be taken by staff, councillors, volunteers and contractors working with children, young people and adults with needs for care and support. Following these promotes the safety and wellbeing of children, young people and adults with needs for care and support and reduces the risk of allegations against those working with them.

- 21.2 Staff, councillors, volunteers or contractors should where possible and practical:

- Avoid situations where you and an individual are alone and unobserved.
- Ensure that children or young people are not left unattended. For example, it is the parents / carers responsibility to supervise any children in their care whilst visiting Council offices, or when an employee, councillor, volunteer or contractor is carrying out a home visit.
- Show official identification when carrying out home visits
- Respect the individual and provide a safe and positive environment.
- Respect the rights, dignity and worth of every person and treat everyone equally within the context of the activity.
- If someone is accidentally injured as a result of an employee, councillor or volunteer's actions; seems distressed in any way; seems to be sexually aroused by your actions; misunderstands or misinterprets something you have done; report this as soon as possible to the service Safeguarding Officer and make a written record.
- If someone shows any signs or symptoms that give you cause for concern you must act appropriately, be professionally curious, and follow the procedures outlined in appendices of this policy

Staff, councillors, volunteers or contractors should not:

- Take children or adults with needs for care and support alone on a car journey, however short.
- Take children or adults with needs for care and support to their own home or any other location where they will be alone with you.
- Arrange to meet children or adult with needs for care and support outside an organised activity or as part of the day to day delivery of the Council's activities.
- Agree to 'look after' or be left in sole charge of children or adults with needs for care and support even for short periods of time during the course of your duties.

Staff, councillors and volunteers should **never**:

- Engage in rough physical games including horseplay.
- Engage in sexually provocative games.
- Allow or engage in inappropriate touching of any form.
- Allow anyone to use inappropriate language unchallenged, or use it yourself.
- Make sexually suggestive comments about or to a child or adult, even in fun.
- Let any allegation a child or adult makes be ignored or go unrecorded.
- Do things of a personal nature for children or adults that they can do for themselves, e.g. assist with changing.
- Enter areas designated only for the opposite sex without appropriate warning (e.g. cleaning staff for toilets etc.).
- Take a child or adult to the toilet, unless this is an emergency and a second, same-sex member of staff is present.
- Use a mobile phone, camera or other recording device in any changing area or other single sex location such as toilets. Exceptions to this may arise, for example, where a photographic record of vandalism to a changing room is required. In such circumstances customers should be temporarily excluded from the location.

## **22. Responding to allegations and/or abuse and neglect by employees**

- 22.1 If abuse or neglect is alleged or found to be carried out by an employee, the Council will **always** act. The Designated Safeguarding Lead will notify and seek advice from the Local Authority Designated Officer (LADO) if children are involved, and will alert and work with other agencies to ensure that the complainant is protected and their wellbeing supported. The Designated Safeguarding Lead will notify the Chief Executive and, in the case of a councillor, the Council Leader, and will contact the Police and any other agency as appropriate. An allegation about the Designated Safeguarding Lead must be reported to the Chief Executive.
- 22.2 The Council's Code of Conduct and Disciplinary Policies are clear that the Council will always act quickly, if necessary moving the person to other appropriate duties or suspending them to enable a thorough investigation. The employee will be made aware of their rights under employment legislation and Council policy and any potential internal disciplinary procedures, and also provided with appropriate support internally and externally. A disciplinary investigation, and potentially a hearing, may follow and may result in informal or formal measures which may include dismissal and possibly referral to the Disclosure and Barring Service.
- 22.3 The Council will investigate unless there is compelling reason why this is inappropriate e.g. there is a serious conflict of interest, or concerns have been raised about noneffective past enquiries, or there are serious, multiple concerns, or a matter requires investigation by the police. In such cases, the Council will seek an external person or agency to investigate (in line with NSAB guidelines, provided that they have had appropriate training).
- 22.4 If an employee is dismissed or redeployed to a non-regulated activity following a safeguarding incident, or a person leaves their role (resignation, retirement) to avoid a disciplinary hearing when it is likely they would have been dismissed, the Council will always refer the case to the Disclosure and Barring Service.

## 23. Complaints and Whistle Blowing

- 23.1 All staff, councillors, volunteers, contractors and consultants should use the Council's Corporate Feedback and Whistle Blowing Policies if they are concerned about how a safeguarding issue has been dealt with.

## 24. Audit and Quality Assurance

- 24.1 As a statutory agency, the Council is subject to a number of internal and external audits and quality assurance mechanisms to ensure compliance and effective practices in each of the areas covered by this policy and associated procedures. All audit recommendations will be integrated into a safeguarding action plan. Regular reports are made to the Council's Management Team and Leader of the Council.

## 25. Monitoring and Review

- 25.1 This Policy and its Procedures are fully reviewed every three years and signed off by the **Policy and Resources Committee**. If any changes are needed in the interim e.g. resulting from changes to the law, national or local guidance, then the Policy and/or its procedures will be amended by the Designated Safeguarding Lead, agreed by Management Team and signed off by the Chief Executive, with the decision recorded and published via a Decision Notice. All staff, councillors, volunteers, key contractors or consultants will be notified of any changes.