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<h2>Safeguarding Children and Young People Policy</h2>	

1. Purpose or Aim

- 1.1. This policy outlines saha's framework for safeguarding assurance. This will be achieved through taking precautions to prevent abuse and neglect occurring, having effective systems to identify abuse and robust responses when abuse or suspected abuse or neglect is raised.
- 1.2. This policy forms part of the Association's safeguarding system which aims to encompass policy, procedures (both corporate and localised) and guidance (both internal and external) plus reporting, recording and reviewing methodologies that holistically aim to safeguard children at risk of abuse or neglect.
- 1.3. This policy details the Association's position to follow a child-centred approach to ensure effective safeguarding within saha services, schemes and premises, especially when working with children and young people who are experiencing, or at risk of, abuse and neglect. It enables the Association to deliver its mission to transform lives by living up to the corporate strategy vision to assist children and young people on their journey.

2. The following documentation can be relied on to supplement this policy:

2.1. Key Legislation

- The Children Act 1989 (2004) As amended by the Children and Social Work Act 2017
- Working together to safeguard Children 2018

- The Equality Act 2010
- Education Acts
- The United Nations Convention on the Rights of the Child (UNCRC) 1991
- Housing Act 2004
- Crime and Disorder Act 1998
- Prevent Duty' (Section 29 Counter – Terrorism and Security Act 2015)
- The Data Protection Act 1998
- Anti-social behaviour, crime and policing act 2014

2.2. Link to: [What to do if you are worried a child is being abused](#)

2.3. Associated Legislation, Guidance and Polices (Appendix A)

3. Introduction

3.1. This policy outlines Salvation Army Housing Association's (saha's) commitment to protecting children and young people at risk of abuse or neglect within its services and housing stock. The Association recognises that it has a moral obligation and legal duty of care to children and young people at risk of abuse or neglect across all of its services and will work with them, their families, carers and support networks to manage this.

4. Scope

4.1. This policy details the Association's commitment to safeguarding and protecting the welfare of those people saha comes into contact with, those who use its services and how the Association works in partnership with the child or young person, their family and other agencies as appropriate.

4.2. This policy applies to:

- All board members
- All staff & management
- All saha's customers and visitors to the Associations' services
- Volunteers, contractors and agency staff working for the Association

5. Objectives

- 5.1. To demonstrate a commitment to safeguarding and provide clear lines of accountability through defined roles and responsibilities within the Association.
- 5.2. To raise awareness of safeguarding responsibilities relating to children and young people at risk of abuse or neglect within the Association ,throughout the leadership, employees, contractors, agency workers, volunteers and other related stakeholders.
- 5.3. To provide a foundation for associated safeguarding procedures across all areas of the Association and promote a culture enabling individuals to confidently raise issues and concerns.
- 5.4. To ensure saha adheres with relevant legislation, and requirements of local Safeguarding Children Boards.
- 5.5. To outline saha's commitment to embedding Safeguarding within training, recruitment and human resource management.

6. Definitions

- 6.1. **Safeguarding** and promoting the welfare of children is defined for the purposes of this policy 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
 - Taking action to enable all children to have the best outcomes (*Working Together to Safeguard Children 2018*)
- 6.2. **Definition of a child:** The definition of a child is anyone under the age of 18.
- 6.3. **Definition of Type of Abuse:** the four main categories of abuse are: neglect, physical, sexual and emotional abuse.
- 6.4. For a full list of definitions and examples of types of abuse, please refer to Appendix B

7. Policy Statement:

- 7.1. **Saha will:**

- 7.1.1. Be committed to keeping safe those children and young people at risk of abuse or neglect that come to its attention;
- 7.1.2. Acknowledge its duty to act appropriately to allegations reports or suspicions of abuse and concerns for welfare;
- 7.1.3. Recognise the importance of having the appropriate and relevant procedures in place;
- 7.1.4. Promote good practice to prevent the occurrence of abuse, neglect, harm, significant harm, exploitation and coercion ;
- 7.1.5. Establish clear lines of accountability and governance within and across saha for the provision of services designed to safeguard and promote the welfare of children and young people;
- 7.1.6. Ensure that all relevant Managers, staff and volunteers undertake the appropriate training to equip them to carry out their responsibilities effectively and to keep this up to date by appropriate training as required;
- 7.1.7. Ensure that all Managers, staff and volunteers are made aware of their responsibilities for safeguarding and promoting the welfare of children and young people at risk of abuse or neglect;
- 7.1.8. Establish a culture of listening to and engaging in dialogue with children and young people - seeking their views in ways appropriate to their age and understanding, and taking account of these both in individual decisions and the establishment, development and improvement of services;
- 7.1.9. Recruit staff and volunteers safely, ensuring all necessary checks are made. This includes enhanced DBS checks where required and providing the necessary training when an appointment has been made.
- 7.1.10. Work with local safeguarding partners, in line with their Policy and Procedure's and be mindful of relevant guidance;
- 7.1.11. Act within the Association's confidentiality policy, usually gaining permission from customers before sharing information about them with another agency.

7.2. Prevent Duty

- 7.2.1. Saha is fully committed to safeguarding and promoting the welfare of all its customers and volunteers. The Association recognises that safeguarding against radicalisation and extremism is no different from safeguarding against any other vulnerability.
- 7.2.2. Saha expects all staff, customers and volunteers to uphold and promote the fundamental principles of human rights and British values and exemplify these in their practice, including: democracy;

the rule of law; individual liberty; mutual respect and tolerance of those with different faiths and beliefs.

- 7.2.3. This statement reinforces saha's expectation that all staff are fully engaged in being vigilant about safeguarding, radicalisation and extremism.

7.3. Communication & Delivery

- 7.3.1. This policy will be circulated to all relevant staff and volunteers and supported by appropriate training and awareness to ensure it is embedded throughout the organisation. Delivery will be via Safeguarding Champions by definition this will be Managers with responsibility of managing frontline staff and volunteers who are most likely to encounter safeguarding issues.

- 7.3.2. Staff and volunteers of the Association will record safeguarding concerns in accordance with Safeguarding Children and Young People procedures listed in Appendix A.

7.4. Training

- 7.4.1. Training provision will include:

- Induction training for all new staff;
- Mandatory training for all relevant frontline staff to ensure awareness of key issues and responsibilities;
- Refresher training for all staff including agency workers, and volunteers taking place at least three yearly;

- 7.4.2. Enhanced training on Safeguarding management practices and welfare promotion will be provided for all Safeguarding Champions and relevant Managers.

7.5. Recording Reports and Concerns

- 7.5.1. Where abuse occurs or is suspected or where there are welfare concerns, the guiding principles are the safety and well-being of the child or young person. Reports or concerns will be recorded as soon as possible after the event, situation or disclosure. Information recorded and/or appropriately shared will have a clear distinction between fact, opinion and hearsay.

7.6. Sharing Information

- 7.6.1. The overriding principle on the sharing of information is whether it is necessary to do so in the best interests of an individual(s) and to protect them from harm/abuse on a 'need to know basis'. The same applies if the information could prevent abuse occurring in the first place (please see the flow chart in Appendix C)

7.6.2. Information passed to Social Care Services and other relevant agencies must have a clear distinction between fact, opinion and hearsay. A full list of local authority safeguarding teams and contact details can be found in saha's safeguarding procedures

7.7. Partnership Working

7.7.1. Relevant Managers and Safeguarding Leads will endeavour to build local relevant partnerships that:

- a) Ensure effective working relationships with all key agencies;
- b) Maintain appropriateness of referrals being made to key agencies such as Children and Family Social Services and other agencies;
- c) Promote good practice with regards to safeguarding practice;
- d) Identify local and future training needs;
- e) Facilitate contact with harder to reach groups, ensuring saha's approach to safeguarding is widely circulated;

7.7.2. Situations do arise where the Association lets activity space to other groups and organisations to work with its customers and the wider community. When this occurs, the local Safeguarding Champion will ensure that organisations and groups either have their own suitable safeguarding provisions or agree to operate with the Association's policies, procedures and framework.

7.8. Child Death Reviews

7.8.1. saha acknowledges that it is the responsibility of the local safeguarding partners and child death review partners. In such cases, the Association will work with the relevant agencies to participate in such reviews. The Executive Director of Operations is responsible for co-ordinating review submissions and for reporting subsequent review recommendations to the Board.

7.9. Allegations Made Against Staff

7.9.1. Allegations regarding staff conduct (including in their personal life), even those that appear less serious, will be investigated and examined objectively by someone independent of the service concerned. All allegations or complaints logged must initially be sent to the line Manager (safeguarding champion) and the Head of Service of the alleged employee. Reports will also be made to local Children's safeguarding team.

7.10. Quality of practice

7.10.1. Concerns about quality of practice will be investigated by an appropriate Head of Service. All concerns must be highlighted to

the relevant Director. Significant concerns will be reported to the local safeguarding team.

7.11. Complaints

- 7.11.1. If there is a complaint about the service provision the customer or their advocate should be directed to saha's complaints procedure. . All Heads of Service have a duty to review complaints and customer feedback for any safeguarding implications. To act on those safeguarding concerns in line with saha policy, procedures and code of conduct.

7.12. Working with Perpetrators & Alleged Perpetrators

- 7.12.1. Saha is committed to working with perpetrators and alleged perpetrators as an integral part of managing safeguarding cases. However the needs of victims take priority.
- 7.12.2. Where a perpetrator or alleged perpetrator is a customer or member of staff/volunteer an immediate risk assessment will be undertaken, with appropriate actions implemented, to ensure the continued safety of other customers, staff, volunteers and the wider local community. Where a perpetrator or alleged perpetrator is not a customer or member of staff/volunteer the Association will work with them, and other agencies as appropriate to the situation.
- 7.12.3. If appropriate this will include Police intervention and actions such as court orders to protect the child. However, saha acknowledges that in many cases there may be positive aspects to the relationship between the parties and saha will endeavour to preserve and foster this whilst taking actions and interventions to ensure protection.

7.13. Protection from Offenders

- 7.13.1. Occasions may arise where the Association is asked to house individuals that have been convicted of offences against children. When these situations occur, saha is committed to ensuring that the risk is measured and controlled appropriately and will work with appropriate agencies, such as local multi-agency protection panel or equivalent. The safety of children is paramount and lettings will be sensitive to this need.

8. Modern Slavery

- 8.1. As an organisation working with some of the most vulnerable people in our society, saha is very aware of its responsibilities in ensuring that it maintains the highest ethical standards. In line with its Modern Slavery Statement which is published on the saha website and its obligations under the Modern Slavery Act 2015, saha has robust processes in place within its recruitment and procurement activities to make certain that Modern Slavery plays no part in our business or supply chain. All staff

have access to e-learning courses which will assist them in identifying and reporting potential issues of Modern Slavery within our client base.

9. Monitoring and Reporting

- 9.1. Managers will monitor concerns and referrals. Managers will undertake a regular review of cases to ensure effective outcomes and procedural compliance. Any identified barriers to effective multi-agency working will be addressed by Managers, as appropriate, with relevant agencies.
- 9.2. All reports will be recorded on the corporate database with managed access. Reporting will be designed to provide the appropriate levels of robust assurance throughout the management and governance. Any serious incidents will be brought to the attention of Senior Managers immediately, or in line with our serious / major incidents procedure.
- 9.3. Referrals and concerns will be subject to regular management assurance checks and saha carry out a scheduled audit of its services to ensure its policies and procedures are adhered to through our programme of internal audit. The outcome of the audit will provide learning outcomes for service improvement.

10. Implementation

- 10.1. saha will ensure that the implementation of this policy is proactively inclusive across all activities with particular attention towards the protected characteristics as defined in the Equality Act 2010 whilst also being mindful towards the inclusivity of other vulnerable and marginalised groups that may be affected.

11. Roles and Responsibilities.

- 11.1. Saha understands that it can come into contact with children and young people who are at risk of abuse or neglect and understands that it is the Association's role to:
 - a) Safeguard children and young people from abuse or neglect in its services through the establishment of a culture that does not tolerate abuse, neglect or exploitation
 - b) Strive to reduce avoidable risk and harm where possible in order to prevent abuse, neglect and exploitation from happening wherever possible
 - c) Ensure that children and young people receive services that actively promote their empowerment and well-being

- d) Recognise that children and young people who have protected characteristics are particularly vulnerable
- e) Work collaboratively with children, young people, their families and carers in a 'Child-Centred' way.
- f) Deal with incidents of abuse or suspected abuse in a sensitive and effective way.

11.2. General Responsibilities:

11.2.1. All staff, management, board members, volunteers and contractors of the Association are duty-bound to report any concerns relating to suspected or alleged abuse or neglect immediately to their line Manager, or other relevant member of staff as soon as practicably possible in line with safeguarding procedures.

11.2.2. Immediate action should be taken, ensuring that appropriate consideration is given to the sensitivities and legalities of sharing information (see Appendix C).

- a) Where opportunities arise, staff/volunteers should work proactively to raise awareness of safeguarding initiatives within the communities where we work, to reduce potential cases.
- b) Frontline staff and volunteers are key in identifying and preventing abuse and neglect, therefore they must also have an understanding of the child safeguarding policy and procedures of the Local Authority areas in which they operate, including emergency provisions.
- c) Breach of this policy may result in disciplinary action.

11.3. Specific Staff Responsibilities

11.3.1. The Executive Director of Operations is The Executive Lead on safeguarding and the promotion of welfare including the strategic implementation of this policy.

11.3.2. The Heads of Service are the operational lead on safeguarding and the promotion of welfare across saha's services, and collectively have the responsibility for the implementation of the safeguarding children and young people policy, managing the safeguarding data base register, lessons learnt and ensuring that suitable support and coaching is available to staff and volunteers handling safeguarding issues.

11.3.3. Managers have direct responsibilities for ensuring the policy is implemented effectively locally within their service, in conjunction with local safeguarding policies and procedures. Managers will act as Safeguarding Champions and will review all cases on a regular basis.

11.3.4. Where saha inspects services on behalf of other organisations through its Quality Assurance (QA) team, the Quality Reviewer is responsible for having awareness of the other organisations' policies and procedures relating to safeguarding practice.

11.3.5. Customers have a responsibility towards their community, and if they know abuse is taking place, or there are concerns regarding an individual, saha encourages reports of these to any member of its staff, the Association's Customer Services Centre (CSC), Local Authority, or the Police.

11.4. Designated Persons

11.4.1. A full list of designated persons is available in Appendix D

11.5. Agency Managed Services

11.5.1. Where saha engages Managing Agents to provide services on its behalf, the Association will work to ensure that they provide services that are at least comparable with its own and that their approach is in line with the approach as set out in this policy.

12. Policy Review

12.1. We will review the operation of this policy in consultation with our residents, staff and relevant stakeholders (where appropriate), in light of current best practice, amending the policy where required. This policy will be reviewed on an annual basis, unless required sooner due to legislative changes or major / significant findings arising from on-going safeguarding cases.

Appendix A Safeguarding Children and Young People.

Associated Policies, Procedures and guidance for the Safeguarding of Children and Young People

Policies

1. Safeguarding Adults Policy
2. Whistle Blowing Policy
3. Staff Personal Code of Conduct (i.e. Professional Boundaries)
4. Disclosure and Barring Checks (DBS) Policy
5. Lone Workers Policy
6. Recruitment Policy

Procedures

1. Safeguarding Adults Procedure
2. Safeguarding Children and Young People Procedure

Legislation for safeguarding children and young people

1. The Human Rights Act (1998)
2. Vulnerable Groups Act 2006 ;
3. Working together to safeguard children 2018
4. The Education Act 2002
5. The Mental Health Act 1983
6. The Public Disclosure Act 1998
7. The Mental Capacity Act 2005
8. Domestic Violence, Crimes and Victims Act 2004

Guidance for safeguarding children and young people.

1. What to do if you are worried a child is being abused Guidance
2. Disclosure and Barring Service (DBS) Workforce Guidance 2012 for safer recruitment (including Rehabilitation of Offenders (ROA) Act 1974 and ROA Exceptions Order and in the Police Act 1997)
3. Duty of Candour': (to provide to the service user and any other relevant person all necessary support and all relevant information' in the event that a 'reportable patient safety incident' occurs. A 'reportable patient safety incident' is one which could have or did result in moderate or severe harm or death.)
4. Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers

Appendix B to Safeguarding Children and Young People Safeguarding Policy

Further Definitions for safeguarding children and young people

Definitions

1. Safeguarding Children:

1.1 Protecting a child's or young person's right to live in safety, free from abuse and neglect. It involves people and organisations working together to prevent and stop both the risks and the experience of abuse or neglect, whilst at the same time making sure that the child's or young person's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that a child or young person sometimes has complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

2. Child:

2.1 For safeguarding purposes a child is anyone under 18 years of age regardless of circumstances, as defined by the Children's Act 1989. For those aged 18 or over please refer to the Safeguarding Adults Policy.

3. Defining Abuse:

3.1 Abuse is a form of maltreatment of a child or young person. Abuse or neglect of a child or young person can be caused by inflicting harm, or by failing to act to prevent harm. Children and young people can be abused in a family setting or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults, or another child or children. (Working Together 2015).

3.2 Abuse may consist of single or repeated acts.

In the context of saha's services, concerns for Children at Risk of abuse or neglect generally falls into two categories:

- a. General concerns around the overall safety and wellbeing of a child, or their family or immediate carer's ability to take care of them;
- b. Child protection concerns where a Child at Risk of abuse or neglect is suffering significant harm, or is at risk of suffering significant harm.
- c. Significant harm can be caused by one or more traumatic event(s) that may impact the independence, choice or wellbeing of a Child at Risk of abuse or neglect.

3.3 Abuse can occur in any relationship and may result in significant harm, or exploitation of, the person subjected to it. There are four types of abuse as defined by 'Working Together' (2018) which are as follows:

- a. Physical Abuse
- b. Emotional Abuse
- c. Sexual Abuse
- d. Neglect

3.4 Of particular relevance are the following forms that abuse may take:

3.4.1 Physical abuse:

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child or young person. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child or young person.

3.4.2 Emotional Abuse:

- a. Emotional abuse is the persistent emotional maltreatment of a child or young person such as to cause severe and persistent adverse effects on their emotional development.
- b. It may involve conveying to children or young people that they are worthless or unloved, inadequate or valued only in so far as they meet the needs of another person. It may include not giving the child or young person opportunities to express their views, deliberately silencing them or making fun of what they say or how they communicate.
- c. It may feature age or developmentally inappropriate expectations being imposed on children or young people. These may include interactions that are beyond the child or young person's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child or young person from participating in normal social interaction.
- d. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children or young people to frequently feel frightened or in danger, or the exploitation or corruption of children or young people.
- e. Some level of emotional abuse is involved in all types of maltreatment of a child or young person, although it may occur alone.

3.4.3 Sexual abuse

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

3.4.4 Child Sexual Exploitation:

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

3.4.5 Neglect

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- a. Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- b. Protect a child from physical and emotional harm or danger;
- c. Ensure adequate supervision (including the use of inadequate care-givers); or
- d. Ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

3.4.6 Domestic Violence and Abuse

This includes psychological, physical, sexual, financial and emotional abuse, forced marriage, Female Genital Mutilation (FGM) and so called 'honour' based violence. Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality.

- a. It is important to note that the definition includes young people aged 16 or over, therefore staff must be vigilant to domestic violence within young peoples' relationships and refer this as a child protection concern to the Line Manager.
- b. Living with domestic violence is a form of emotional abuse and is included in the definition of emotional abuse as, 'seeing or hearing ill treatment of another'. If staff are aware that a customer, learner, volunteer or service user is witnessing, hearing, living with or experiencing domestic violence, they should inform their Line Manager.

3.4.7 Teenage Relationship Abuse

Teenage relationship abuse consists of the same patterns of coercive and controlling behaviour as domestic abuse. These patterns might include some or all of the following sexual abuse, physical abuse, financial abuse, emotional abuse and psychological abuse.

3.4.8 Controlling Behaviour:

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

3.4.9 Coercive Behaviour:

An act or pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten their victim.

3.4.10 Peer on Peer Abuse

- a. Allegations of Abuse made against other children.
- b. Young people may behave in a harmful way to one another in a number of ways, which would be classified as peer on peer abuse. It is essential that our practice explores the many forms of peer on peer abuse and includes a planned and supportive response to the issues.
- c. Some behaviour may be dealt with through our Acceptable Behaviour procedure. However some allegations might be of such a serious nature that they become safeguarding concerns. These allegations are most likely to include physical abuse, emotional abuse, sexual abuse and sexual exploitation; however we are aware that the abuse may take any form. Specific safeguarding issues against another young person may include:
 - a)Physical abuse:
 - Pre-planned violence
 - Physical altercations
 - Forcing others to carry out violence
 - Forcing others to use drugs, alcohol or other substances
 - b)Emotional abuse:
 - Bullying
 - Threats and Intimidation
 - Blackmail/extortion
 - c)Sexual abuse:
 - Sexual assault
 - Indecent exposure
 - Indecent touching
 - Showing pornography to others
 - Forcing others to create/share/download indecent images
 - Sexting
 - d)Sexual exploitation:
 - Encouraging/enticing other children or young people to engage in inappropriate sexual behaviour
 - Photographing or videoing other children performing indecent acts
 - Sharing intimate images through social media
- d. Bullying is not defined as a form of abuse in 'Working Together' but there is clear evidence that it is abusive and will include at least one, if not two, three or all four of the defined categories of abuse.

3.4.11 Bullying

Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (e.g. hitting, kicking, theft), verbal (e.g. racist or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from the activities and social acceptance of their peer group). The damage inflicted by bullying can frequently be underestimated. It can cause considerable distress to children and young people to the extent that it affects their health and development or, at the extreme, causes them significant harm (including self-

harm). All settings in which children and young people are provided with services or are living away from home should have in place rigorously enforced anti-bullying strategies.

3.4.12 Hazing / Initiation

Hazing is a form of initiation ceremony which is used to induct newcomers into an organisation such as a school, sports team etc. There are a number of different forms, from relatively mild rituals to severe and sometimes violent ceremonies. The idea behind this practice is that it welcomes newcomers by subjecting them to a series of trials which promote a bond between them. After the hazing is over, the newcomers also have something in common with older members of the organisation, because they all experienced it as part of a rite of passage. Many rituals involve humiliation, embarrassment, abuse and harassment.

4. Private Fostering Arrangements or Suspected Private Fostering

4.1 Privately fostered service users under the age of 18 are those cared for by someone other than a parent or legal guardian e.g. step-parents, siblings, siblings of a parent and grandparents for 28 days or more. It should be noted that failure by a private foster carer or parent to notify a Local Authority of a private fostering arrangement is an offence. Any such cases should be referred to Children's Social Care.

5. Young Carers

5.1 In many families, children and young people contribute to family care and well-being as part of normal family life. A young carer is a child who is responsible for caring on a regular basis for an adult or sibling who has an illness or disability. Caring responsibilities can significantly impact on the young person's health and development. Saha staff should report any concerns to their Line Manager who will assess the situation and, if appropriate, refer to the safeguarding lead a young carer who is:

- a. Unlikely to achieve or maintain a reasonable standard of health or development because of caring responsibilities
- b. At serious risk of harm through abuse or neglect
- c. Providing intimate bodily care

6. Modern Slavery

6.1 Modern Slavery encompasses, human trafficking, forced labour, sham marriage 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.

7. Female Genital Mutilation FGM

7.1 It is illegal in the UK to subject a child to female genital mutilation (FGM) or to take a child abroad or to aid or abet someone to take a child out of the country to undergo the procedure – Female Genital Mutilation Act 2003, amended by the Serious Crime Act 2015. 'Working together to Safeguard Children, March 2015'.

8. Radicalisation

8.1 Radicalisation is the process by which individuals come to support terrorism or violent extremism. There is no typical profile for a person likely to become involved in extremism, or for a person who moves to adopt violence in support of their particular ideology. Although a number of possible behavioural indicators are listed below, staff should use their professional judgement and discuss with their line Manager or Safeguarding Champion if they have any concerns regarding:

- a. Use of inappropriate language
- b. Behavioural changes
- c. The expression of extremist views
- d. Possession of violent extremist literature including electronic material accessed via the internet and communication such as email and text messages
- e. Advocating violent actions and means
- f. Association with known extremists
- g. Seeking to recruit others to an extremist ideology

9. Self-Harm

9.1 Self-harm is a wide definition that includes eating disorders, self-injury, risk-taking behaviour and drug/alcohol misuse.

10. Spiritual Abuse:

10.1 Occurs when someone uses their power within a framework of spiritual belief or practice to satisfy their own needs at the expense of others. This could involve: a religious/group leader who has unhealthy power over individuals, or even a whole congregation, and/or an accepted doctrine of a religious /group that directly or indirectly controls and oppresses its members through peer pressure.

11. Organisational Abuse

11.1 Incidents of abuse may be one-off or multiple, and may affect one person or several. Patterns of harm may become evident over time. Repeated instances of poor care may be an indication of more serious problems and of organisational abuse. In order to see these patterns it is important that information is recorded and appropriately shared. Further guidance on the complex types of abuse can be found from The Social Care Institute of Excellence (SCIE) and all staff, volunteers and management are encouraged to be familiar with this guidance and other local resources.

This should not be seen as an exhaustive list.

Appendix C: Guidance for Information Sharing

Guidance for sharing information.

Frontline workers and volunteers should always share safeguarding concerns in line with Salvation Army Housing Association's (saha's) policy, usually with their line Manager or safeguarding lead in the first instance, except in emergency situations. As long as it does not increase the risk to the individual, the member of staff should explain to them that it is their duty to share their concern with their Manager. The safeguarding principle of proportionality should underpin decisions about sharing information without consent, and decisions should be made on a case-by-case basis.

Individuals may not give their consent to the sharing of safeguarding information for a number of reasons. For example, they may be frightened of reprisals, they may fear losing control, they may not trust Social Services or other partners, or they may fear that their relationship with the abuser will be damaged. Reassurance and appropriate support along with gentle persuasion may help to change their view on whether it is best to share information.

If a person refuses intervention to support them with a safeguarding concern, or requests that information about them is not shared with other safeguarding partners, their wishes should be respected. However, there are a number of circumstances where the practitioner can reasonably override such a decision, including:

- The person lacks the mental capacity to make that decision – this must be properly explored and recorded in line with the Mental Capacity Act 2005
- Other people are, or may be, at risk, including children
- Sharing the information could prevent a crime
- The alleged abuser has care and support needs and may also be at risk
- A serious crime has been committed
- Staff are implicated
- The person has the mental capacity to make that decision but they may be under duress or being coerced
- The risk is unreasonably high and meets the criteria for a multi-agency risk assessment conference referral
- A court order or other legal authority has requested the information

If none of the above apply and the decision is not to share safeguarding information with other safeguarding partners, or not to intervene to safeguard the person:

- Support the person to weigh up the risks and benefits of different options
- Ensure they are aware of the level of risk and possible outcomes
- Offer to arrange for them to have an advocate or peer supporter
- Offer support for them to build confidence and self-esteem if necessary
- Agree on and record the level of risk the person is taking
- Alert your Manager of the situation, as appropriate
- Record the reasons for not intervening or sharing information
- Regularly review the situation
- Try to build trust and use gentle persuasion to enable the person to better protect themselves.

If it is necessary to share information outside the organisation:

- Explore the reasons for the person's objections – what are they worried about?
- Explain the concern and why you think it is important to share the information
- Tell the person who you would like to share the information with and why
- Explain the benefits, to them or others, of sharing information – could they access better help and support?

- Discuss the consequences of not sharing the information – could someone come to harm?
- Reassure them that the information will not be shared with anyone who does not need to know
- Reassure them that they are not alone and that support is available to them.

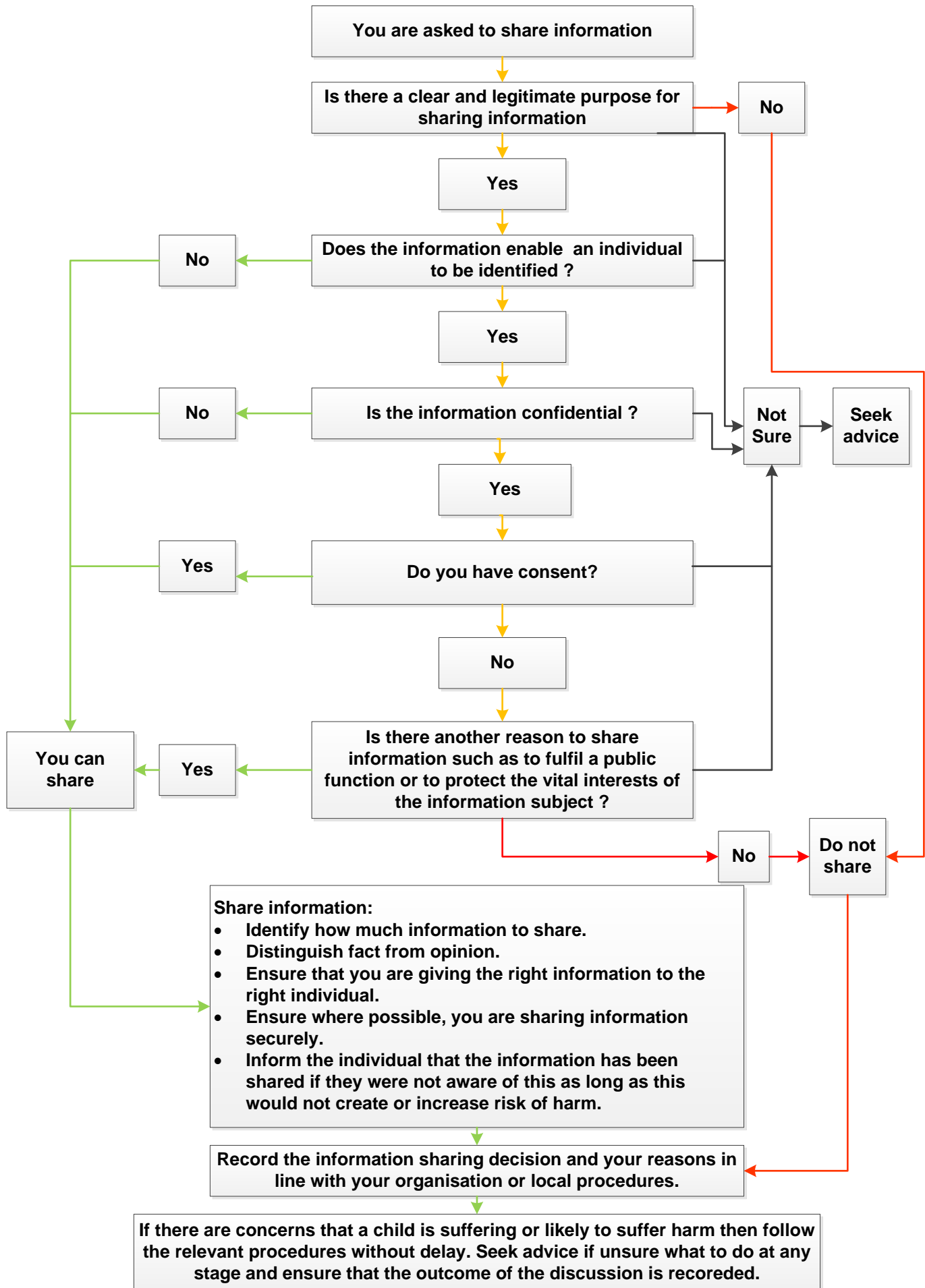
If the person cannot be persuaded to give their consent then, unless it is considered dangerous to do so, it should be explained to them that the information will be shared without consent. The reasons should be given and recorded.

If it is not clear that information should be shared outside the organisation, a conversation can be had with safeguarding partners in the Police or Local Authority without disclosing the identity of the person in the first instance. They can then advise on whether full disclosure is necessary without the consent of the person concerned.

It is very important that the risk of sharing information is also considered. In some cases, such as domestic violence or hate crime, it is possible that sharing information could increase the risk to the individual. Safeguarding partners need to work jointly to provide advice, support and protection to the individual in order to minimise the possibility of worsening the relationship or triggering retribution from the abuser.

Domestic abuse cases should be assessed following the CAADA-DASH risk assessment and referred to a multi-agency risk assessment conference where appropriate. Cases of domestic abuse should also be referred to local specialist domestic abuse services.

Flowchart of when and how to share information



Appendix D Safeguarding Children and Young People.

Specific Staff Responsibilities within Safeguarding Adults

1. The Executive Director of Operations is the Executive lead on Safeguarding and the promotion of welfare across our services.
2. The Heads of Service are the operational lead on safeguarding and the promotion of welfare across our services, and have the responsibility for the implementation of the safeguarding adults policy, managing the safeguarding data base register, lessons learnt and ensuring that suitable support and coaching is available to staff handling safeguarding issues.
3. Managers have direct responsibilities for ensuring the policy is implemented effective locally within their service, in conjunction with local safeguarding policies and procedures. Managers will act as Safeguarding Champions and will review all cases monthly.
4. Quality Reviewers, have a responsibility for being aware of other organisations’ policies and procedures relating to safeguarding practice where saha’s Quality Assurance (QA) team conducts inspections of services on behalf of other organisations.
5. Residents/Customers: Customers have a responsibility for their community, and if they know abuse is taking place, or there are concerns regarding an individual in or around saha services, then we encourage these to be reported to any member of staff they feel comfortable with, our Customer Services Centre, local Social Services Team, or the Police.
6. The Executive Director of Operations and all Heads Of Service have the responsibility for co-ordinating information from all services within the organisation in response to Statutory and Non Statutory Safeguarding Enquiry, child death reviews or other requests from local safeguarding partners .
7. The Designated Named Person(s) for Safeguarding Adults are:

Name	Designation	Safeguarding Role
Ann McLoughlin	Executive Director of Operations	EMT Lead
Sean Hughes	Head of Care and Support	SMT Operational Lead
Stephen Bate	Head of Customer Services	SMT Operational Lead
Andrew Smith	Head of Property Services	SMT Operational Lead

John McFarlane	Head of Capital Projects	SMT Operation Lead
Post Vacant	Head of Health and Safety	SMT Operation Lead
Leon Jones	Interim Manager ICT	SMT Operational Lead
Joanne Holland	Head of Assurance	SMT Operational Lead
Mobo Quadri	Head of HR and OD	SMT Operational Lead
Post Vacant	Head of Transformation	SMT Operational Lead
Zafar Raja	Head of Finance	SMT Operational Lead

8. They should be contacted for support and advice on implementing safeguarding policies and procedures.
9. In addition to this all Managers will act as safeguarding champions, staff should initially report any safeguarding concerns to their line manager.

Document History Log

Lead Reviewer	Date			Version	Approval	
	Created	Revised	Expiry		By	Date
K Venables	19/04/2012			1.0	Mon Com	19/04/2012
P Latham		31/10/2012		1.1	Management Review	31/10/2012
P Latham		28/10/2013	11/2014	1.2	Management Review	08/11/2013
Vina Mistry	draft	30/10/2014	11/2015	1.3		
P Latham	draft	25/02/2015	02/2016	1.4		
P Latham		18/03/2015	03/2016	1.5	EMT	23/03/2015
A Patel		01/09/2015	01/2017	1.6	EMT	26/01/2016
A Patel			April 2017	1.7	Management - Policy Extension	11/11/2016
M Aherne		02/03/2017 Social Enterprise Review		1.8		
Head of Housing Projects & Safeguarding Lead	Full review and reformat	August 2017		2.	Gov and Hr Committee	08.03.2018 5.1a
Head of Housing Projects & Safeguarding Lead	Management Review	July 2019	July 2020	3.	EMT Board	23/07/2019 25/07/19
Equalities Monitoring Form						
Name of Policy: Safeguarding Children Policy			Carried out by: Head of Housing Projects & Safeguarding Lead		Date: July 2019	
Protected characteristics	Impact <i>(Positive, Negative, Neutral)</i>	Protected characteristics	Impact <i>(Positive, Negative, Neutral)</i>			
Age	Positive	Disability	Positive			
Sex (gender)	Neutral	Race	Positive			
Religion or Belief	Positive	Sexual Orientation	Neutral			
Marriage / Civil Partnerships	Neutral	Pregnancy / Maternity	Neutral			
Gender Reassignment	Neutral					
If Negative impact is identified, please complete The Full EMF, including mitigations of risks section, and return to Business Assurance Team.						
Privacy Impact Assessment Form						
Privacy Data Impacting Policy:		Timescales for Retaining Data:		Notes:		
This Policy is to be reviewed annually						
Independent Management Reviews		Permanently		Due to being recorded in board minutes		
Any tenancy details		Up to 6 Years				
Documentation, correspondence and information provided by other agencies relating to special needs of current tenants		While tenancy continues		Information held on 'need to know' basis. Medical and Social Services records liable to be confidential. To be returned or passed to subsequent agency at end of tenancy, or destroyed.		

Records relating to offenders, ex-offenders and persons subject to cautions	No time scale guidance	Information held on 'need to know' basis. Police sourced records may be confidential. To be dealt with as required by police
Supporting people – subsidy claims / support plans / single assessments including supporting information	Duration of tenancy	
ASB case files and associated documents	5 years or until end of legal action	