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Policy Owner: Head of Housing General
Needs and Supported
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Safeguarding Policy

1. Introduction

- 1.1 The purpose of this policy is to protect children, young people, and adults at risk of harm or abuse who use any of Saha's services from harm. This includes the children of adults who use our services or who otherwise come into contact with our services.
- 1.2 It sets out the key overarching principles that guide our approach to safeguarding. This policy applies to anyone working on behalf of Saha, including senior managers and the board of trustees, paid employees, volunteers, sessional workers, agency workers and students.
- 1.3 Saha recognises that safeguarding children, young people, and adults at risk is a shared responsibility, with the need for a whole system approach that relies on effective joint working between statutory and non-statutory agencies, and professionals with different roles and expertise.
- 1.4 This Policy aims to ensure safe working practices which identify safeguarding concerns, and that appropriate action is taken in order to safeguard the wellbeing of children, young people and adults at risk, protect them from harm and respect their rights, wishes and feelings.
- 1.5 This policy underpins a safeguarding culture across Saha, which aims to deliver a person-centered, contextual approach to safeguarding, encompassing, behaviours, policy, procedures, and guidance alongside reporting, recording, monitoring, and reviewing practice to safeguard children, young people, and adults at risk.
- 1.6 It also aims to support a culture of positive risk taking that strikes a balance between safeguarding and encouraging personal growth through recognising an individual's right to make their own decisions and choices.
- 1.7 The key objectives of the policy are:
 - 1.7.1 To outline Saha's commitment to safeguarding children, young people, and adults at risk.
 - 1.7.2 To create an accountable structure for safeguarding within Saha that outlines key roles and support available including the identification of an organisational Safeguarding Lead.
 - 1.7.3 To create robust communication and escalation processes that complement the strategies and practices of Local Safeguarding Boards, Child Safeguarding Practice Review Panels, Rapid Review processes and Safeguarding Adults Boards strategies

- 1.7.4 Ensure training and continuing professional development for employees, so that they are competent to undertake their roles and responsibilities and understand those of other professionals and organisations in relation to safeguarding children, young people, and adults at risk.
- 1.7.5 Ensure safe working practices, including safe recruitment, vetting, and barring procedures.
- 1.7.6 Provide a framework for effective interagency working, including effective information sharing.

2. Scope

- 2.1 The scope of this policy is applicable to all services owned and managed by the Association. This policy applies to:
 - All board members.
 - All employees including relief workers and apprentices.
 - All customers and visitors to our services.
 - Volunteers, student placements, contractors and agency workers employed on behalf of the organisation.

3. Principles

- 3.1 The following 6 key principles underpin our approach to safeguarding. They are:
 - 3.1.1 Empowerment: Ensuring that people are supported and confident in making their own decisions and giving informed consent. Giving people choice and control over decisions.
 - 3.1.2 Prevention: It is better to act before harm occurs. Preventing neglect, harm or abuse is the primary objective of our approach and we will raise awareness, train our people, provide easily accessible information, and address any barriers so that people are able to ask for help.
 - 3.1.3 Proportionality: we will take a person-centred approach that is proportionate and least intrusive to the issue presented.
 - 3.1.4 Protection: We will provide support and representation for those in greatest need.
 - 3.1.5 Partnerships: we will create local solutions through services working with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse.
 - 3.1.6 Accountability: Safeguarding is everyone's business, and everyone is accountable for their actions when safeguarding vulnerable people. We will ensure accountability and transparency in delivering safeguarding practice.

4. Policy Statement

4.1 Statement on Safeguarding

Saha is committed to safeguarding and protecting from harm the children, young people and adults that may use or come into contact with our services. We believe that people should never experience abuse of any kind and we have a duty to promote the welfare of the people we work with and to carry out our work in a way that keeps them safe.

We understand that:

- Safeguarding is everyone's responsibility.
- The welfare of the people that we work with and of children in particular, is paramount in the work that we do and the decisions that we take.
- All people regardless of age, disability, gender reassignment, race, religion or belief, marital/civil partnership status, pregnancy or maternity, sex or sexual orientation have a right to protection from all types of harm or abuse.
- Some of the people we work with or who come into contact with our services are additionally vulnerable because of their life experiences, level of dependency or other issues.

What safeguarding means for people who use our services

Safeguarding children means:

- Protecting them from any type of abuse or neglect, preventing harm to their health or development.
- Improving their life chances by supporting them to grow up in circumstances that allow for safe and effective care.
- Taking action to enable them to achieve the best outcomes.

Safeguarding adults means:

- Protecting the health, wellbeing, and rights of adults at risk.
- Enabling them to live free from abuse and neglect.
- Working in partnership to prevent and reduce the risk and experience of abuse or neglect.
- Ensuring the wellbeing of individuals, respecting their views, wishes, feelings and beliefs.

Saha helps to safeguard people by:

- Implementing safeguarding policies and procedures that are reviewed on a regular basis and we ensure that all staff are aware of their roles and responsibilities in relation to safeguarding.
- Following safer recruitment practices when employing people who work with children, young people and adults at risk
- Having a knowledge and understanding of the local safeguarding structures in the areas where our services are based and by working collaboratively to

deliver multi-agency solutions, report concerns and share appropriate information.

- Using safer recruitment practices and providing effective safeguarding training to staff.
- Using information we receive to help us consider and address any risks to people who use our services.
- Referring any concerns to local councils and/or the police for further investigation.
- Monitoring any concerns to identify any patterns or trends.
- Ensuring that the environment and facilities where Saha residents, and where applicable their family members, live or receive our services are safe, appropriate, and meet their needs.
- Ensuring people know they will be believed and supported when they report a concern to us.

4.2 Roles and Responsibilities

- 4.2.1 Safeguarding in Saha is everyone's responsibility, however, there are some roles within the organisation that have specific responsibilities under this policy.
- 4.2.2 The Executive Director of Operations has overall responsibility for the implementation of the policy.
- 4.2.3 The Head of Housing (Supported and General Needs) will act as Saha's Safeguarding Lead.
- 4.2.4 Heads of Service are responsible for ensuring their area of the business is considering safeguarding as part of their remit.
- 4.2.5 The Head of People Services will ensure all employees, relief workers and volunteers are recruited in line with safer recruitment principles and that people in relevant posts undergo an enhanced DBS check in line with the DBS policy.
- 4.2.6 The Head of Asset Management will ensure that our buildings are safe and compliant with any health and safety regulations and that any contractors employed by Saha have agreed to and work within the Saha contractor's code of conduct and are aware of Saha's safeguarding policy and reporting procedure.
- 4.2.7 Regional Managers are responsible for ensuring services deliver a person-centred safeguarding approach and for reviewing all cases with service managers on a quarterly basis.
- 4.2.8 Regional Safeguarding Champions are front facing managers who have an expertise in safeguarding. They are the first point of call for any additional questions or advice in their region. They are responsible for coordinating awareness raising activities during Saha's annual safeguarding month and reviewing safeguarding trends on a quarterly basis.

4.2.9 Service Managers are responsible for delivering a service with a person-centred safeguarding culture and understanding the local safeguarding arrangements delivered through the local Safeguarding Boards in their area of operation.

4.2.10 People working in frontline roles directly with residents and service users play a key role in raising awareness, preventing abuse, and identifying any concerns. They must ensure they are familiar with the Local Authority Safeguarding procedures for the area in which they work.

4.2.11 Where we inspect services on behalf of other organisations through our Quality Assurance (QA) team, the Quality Reviewer is responsible for having awareness of the other organisations' policies and procedures.

4.2.12 All Saha employees, whatever their role are responsible for reporting and recording any safeguarding concerns in line with this policy document and associated guidance. This includes a responsibility to work closely with local authorities in order to share current information and effectively take part in multi-agency discussion.

4.3 Enabling reports of safeguarding concerns

4.3.1 Saha will ensure that safe, appropriate, accessible means of reporting safeguarding concerns are made available to all employees and the communities we work with.

4.4 Managing Disclosures and Concerns

4.4.1 Saha employees should not investigate concerns about individual children or vulnerable adults who are or may be being abused or who are at risk. However, we all have a responsibility to make sure that concerns about children and adults at risk are passed to the agency that can help them without delay.

4.4.2 If anyone is concerned that a child or vulnerable adult is at risk of being abused or neglected, they should not ignore their suspicions and should not assume that someone else will take action to protect that person.

4.4.3 We will respond to, record and risk assess all safeguarding concerns and incidents, working in partnership with, and referring to other agencies, as necessary as outlined in our Managing Safeguarding Disclosures and Concerns procedure.

4.5 Reporting and recording a Safeguarding Concern

4.5.1 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.

4.5.2 We will report safeguarding concerns and/or allegations of abuse to the Police/Local Authority safeguarding teams to investigate.

4.5.3 Concerns about children should be referred to the children's social care department of the local authority where the child lives. Similarly,

concerns about adults at risk should be referred to local authority adult services. Our processes for referrals are set out in Saha's safeguarding procedures and should be in line with the local authority relevant reporting process.

- 4.5.4 Anyone working for Saha who has concerns about the behaviour of a colleague must always raise this with their line manager or the Head of People Services as quickly as possible.
- 4.5.5 Any employee reporting concerns or complaints through formal whistleblowing channels (or if they request it) will be protected by Saha's Whistleblowing Policy.
- 4.5.6 We encourage any resident, member of the local community, employee, volunteer, contractors, and any other person carrying out business on behalf of Saha, to report anything they may consider to be a safeguarding concern.
- 4.5.7 Reports or concerns regarding safeguarding will be recorded as soon as possible after the event, situation, or disclosure in line with Saha's procedure for reporting safeguarding concerns.

4.6 Training

- 4.6.1 Saha is committed to ensuring that everyone who works for us understands their safeguarding responsibilities and keeps their knowledge up to date. All employees must complete an online safeguarding training package within 3 months of taking up post, and after that at a minimum of 3-yearly intervals.
- 4.6.2 All relevant frontline employees will receive mandatory training to ensure that they are fully aware of the key issues and responsibilities on safeguarding practice and creating a person-centred safeguarding culture.
- 4.6.3 All frontline employees will be expected to access relevant safeguarding training provided by their local authority.
- 4.6.4 As part of their induction all frontline employees will be expected to complete a safeguarding induction workbook. Utilising the principles of reflective practice, completion of this journal will guide people through Saha's expectations in relation to safeguarding practice and provide assurance this is understood and implemented by our teams.
- 4.6.5 Managers will be provided with training to enable them to facilitate reflective practice sessions as part of our learning culture.
- 4.6.6 All safeguarding champions will receive designated safeguarding officer training which will be refreshed every 3 years.
- 4.6.7 Refresher safeguarding training for relevant employees will take place at a maximum of three yearly intervals.
- 4.6.8 Records of training attended by employees will be held by the people services team who will monitor compliance with training expectations

4.7 Support and supervision for employees

- 4.7.1 Safeguarding will be on the agenda at all operational team meetings and supervision meetings held with employees.
- 4.7.2 Group and/or individual reflective practice sessions will be used to facilitate a learning culture in relation to safeguarding.
- 4.7.3 Employees will be provided with access to clinical supervision where this is required due to the nature of the services, they provide.

4.8 Allegations Made Against Saha employees

- 4.8.1 Allegations regarding the conduct of Saha employees that raise safeguarding concerns (including in their personal life), even those that appear less serious, will be investigated, and examined objectively in line with Saha's misconduct and disciplinary policies.
- 4.8.2 All allegations or complaints of this nature must be discussed with Saha's Safeguarding Lead, the Head of Services of the employee against whom the allegation has been made and the Head of People Services.
- 4.8.3 Reports of allegations against employees and actions taken as a result of these will also be made to the relevant local safeguarding team and reported to our parent, The Salvation Army for inclusion in their submission to the Charity Commission.

4.9 Sharing Information

- 4.9.1 Information sharing is essential for effective safeguarding and promoting the welfare of children, young people, and adults at risk.
- 4.9.2 Saha will always base our decisions on information sharing on considerations of the safety and well-being of the individual and others who may be affected by their actions.
- 4.9.3 We will ensure that any information shared is necessary for the purpose for which it is shared, is shared only with those individuals who need to have it, is accurate and up to-date, is shared in a timely fashion, and is shared securely.
- 4.9.4 Wherever possible, Saha will seek consent and be open and honest with the individual from the outset as to why, what, how and with whom, their information will be shared.
- 4.9.5 There may be some circumstances however, where it is not appropriate to seek consent, either because the individual cannot give consent, it is not reasonable to obtain consent, or because to gain consent would impact on the safety of a child, young person or adult at risk.
- 4.9.6 Where a decision to share information without consent is made, a record of what has been shared and with whom should be kept.
- 4.9.7 These principles of information sharing are outlined in the guidance and flow chart in Appendix B.

4.10 Working with Perpetrators & Alleged Perpetrators

- 4.10.1 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.
- 4.10.2 Where a perpetrator or alleged perpetrator is a customer or an employee/volunteer, an immediate risk assessment will be undertaken with appropriate actions implemented to ensure the continued safety of other customers, employees, volunteers and the wider local community. Where a perpetrator or alleged perpetrator is not a customer or employee/volunteer Saha will work with them and other agencies as appropriate to the situation.

4.11 Protection from Offenders

- 4.11.1 Occasions may arise where we may provide support and/or housing to people who have been convicted of safeguarding related offences. When these situations occur, we are committed to ensuring that any risk is measured and controlled appropriately and will work with appropriate agencies, such a local multi-agency protection panel or equivalent to ensure that we do this safely.

4.12 Prevent Duty

- 4.12.1 Saha is fully committed to safeguarding and promoting the welfare of all its customers and volunteers. We recognise that safeguarding against radicalisation and extremism is no different from safeguarding against any other vulnerability.
- 4.12.2 Saha expects all our employees, 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.
- 4.12.3 This statement reinforces our expectation that all staff and volunteers are fully engaged in being vigilant about safeguarding, radicalisation, and extremism.

4.13 Monitoring and Reporting

- 4.13.1 All reports of safeguarding concerns will be recorded on our on line reporting system 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
- 4.13.2 Saha will monitor safeguarding concerns and referrals on several levels:
- 4.13.3 Service Managers/Neighbourhood Managers will monitor reported cases on a weekly basis to ensure that relevant actions have been taken and appropriate support has been provided to those involved.

- 4.13.4 On a quarterly basis Regional Managers will discuss safeguarding cases with Service Managers and their Safeguarding Champion to consider any trends and learning that has arisen for their region.
- 4.13.5 On a quarterly basis the Safeguarding Champions will meet as a team with Saha's Safeguarding Lead and consider any trends and learning that has arisen across the organisation and identify any impact on practice or training requirements that need to be addressed.
- 4.13.6 Any concerns that meet the criteria for disclosure to the Charity Commission will be reported to our parent, TSA on a quarterly basis.
- 4.13.7 Reports identifying any trends and learning from safeguarding concerns will be reported to EMT, Operations Committee and to Board on a quarterly basis. These reports will consider the impact of equality and diversity information to ensure that people are not adversely affected as a result of any protected characteristics.
- 4.13.8 An annual safeguarding month will be held across Saha services in October of each year. During this week, Saha's Safeguarding Champions will co-ordinate a variety of activities across our services designed to raise awareness of safeguarding amongst our residents and service users and consider any barriers to reporting safeguarding concerns.
- 4.13.9 During safeguarding month, each service will undertake a self-assessment using Saha's annual safeguarding audit tool and any resulting action plans arising from these audits will be implemented by Regional Managers and monitored by Saha's Safeguarding Champions.
- 4.13.10 The learning from these reviews, audits and activities during safeguarding month will be used to influence the annual safeguarding policy review.

4.14 Agency Managed Services

- 4.14.1 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 as comparable as its own and that their approach is in line with Saha's as set out in this policy.

5. Data Protection and Equality Impact

In developing this policy we have carried out assessments to ensure that we have considered:

- Equality, Diversity and Inclusion
- Privacy and Data Protection

To request a copy of these full assessments, please contact the Business Assurance Team at business.assurance@saha.org.uk.

6. Further information

If you have any questions regarding this policy, please contact your line manager or the Business Assurance Team at business.assurance@saha.org.uk, who will direct your query to the relevant Policy owner.

Legislative and Regulatory Framework

The following legislation, regulatory standards and documents can be relied upon to inform this policy.

| Legal Framework | Regulatory Standard | Other documents |
|---|-------------------------------------|-------------------------------|
| The Care Act 2014 | Supported Accommodation Regulations | Safeguarding procedures |
| Safeguarding Vulnerable Groups Act 2006 | | Whistleblowing Policy |
| Health and Social Care Act 2012 | | Code of Conduct |
| Human Rights Act (1998) | | Disclosure and Barring Policy |
| Mental Capacity Act 2005 | | Lone Workers Policy |
| Data Protection Act 2018 | | Recruitment policy |
| Mental Health Act 2007 | | Data Protection Policy |
| The Public Interest Disclosure Act 1998 | | Risk Assessment Policy |
| The Equality Act 2010 | | Support Policy |
| Caldicott Principles 1997 | | |
| Working together to Safeguard Children 2018 | | |
| General Data Protection Regulations | | |
| Children and Families Act 2014 | | |

Document History Log

| Lead Reviewer | Date | | | Version | Approval | |
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| Head of Housing (GN&S) | Feb 2021 | | May 2022 | 1 | Board | May 2021 |
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| Equality Impact Assessment Summary | | | |
|------------------------------------|---|--------------------------|---|
| Protected characteristic | Impact (Positive, negative, neutral) | Protected characteristic | Impact (Positive, negative, neutral) |
| Age | Positive | Disability | Positive |
| Sex | Positive | Race | Positive |
| Religion of belief | Positive | Sexual orientation | Neutral |
| Gender reassignment | Neutral | Pregnancy / maternity | Neutral |
| Marriage / civil partnership | Neutral | | |

Definitions to Accompany the Safeguarding Policy.



1. **Child Protection:** Protecting a child from child abuse or neglect. Abuse or neglect need not have taken place; it is sufficient for a risk assessment to have identified a likelihood or risk of significant harm from abuse or neglect.
2. **Safeguarding:** This is a much wider concept than child protection and refers to promoting the welfare of children, young people, and adults at risk. It encompasses protecting from maltreatment, preventing impairment of their health or development, ensuring that they are growing up in circumstances consistent with the provision of safe and effective care; and taking action to enable all children, young people and adults at risk to have the best outcome. Child protection is part of this definition and refers to activities undertaken to prevent children suffering, or likely to suffer, significant harm.
3. **A 'child' is** defined as a person under the age of eighteen. The Children's Act 1989 (CA 1989) in conjunction with subsequent legislation including the Children's Act 2004, places a statutory duty on services to co-operate with local authorities in safeguarding children.
4. **An adult at risk** is any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and or support. The provisions for safeguarding adults at risk of abuse or neglect contained within the Care Act 2014, apply to an adult who meets the following three criteria:
 - has care and support needs (whether or not the authority is meeting any of those needs)
 - is experiencing, or is at risk of, abuse or neglect, and
 - as a result of those needs, is unable to protect himself or herself against the abuse or neglect or the risk of it.

An adult at risk may be someone who:

- has a physical disability and/or sensory impairment
- has a learning disability
- has mental health needs, including dementia or a personality disorder
- has an acquired brain injury
- is dependent on others to maintain their quality of life
- has a long term illness or condition
- the mental capacity to make particular decisions and is in need of care and support
- has alcohol or drug addiction
- is subject to domestic abuse

It is important to be clear that just because a person has a disability or is old or frail, they are not automatically 'at risk'. The extent to which someone is at risk will be determined by a range of factors including personal characteristics (e.g. mental

capacity, ability to communicate, degree of physical dependency) and factors associated with their situation (e.g. extent of support network, access to information).

5. Types of Abuse

This is not intended to be an exhaustive list but an illustrative guide into the sort of behaviour which could give rise to a safeguarding. What constitutes abuse or neglect can take many forms and the circumstances of the individual case should always be considered.

- **Physical Abuse:** including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
- **Domestic Abuse:** including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence. Incident or pattern of incidents of controlling, coercive or threatening behaviour by someone who is or has been an intimate partner or family member regardless of gender or sexuality, Female Genital Mutilation; forced marriage
- **Sexual Abuse:** including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
- **Psychological Abuse:** including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
- **Financial or Material Abuse:** including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.
- **Modern Slavery:** encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive, and force individuals into a life of abuse, servitude, and inhumane treatment.
- **Child Sexual Exploitation:** (CSE) is a type of sexual abuse. When a child or young person is exploited, they're given things, like gifts, drugs, money, status and affection, in exchange for performing sexual activities. Children and young people are often tricked into believing they're in a loving and consensual relationship. Abusers may use violence and intimidation to frighten or force a child or young person, making them feel as if they've no choice. They may lend them large sums of money they know can't be repaid or use financial abuse to control them. CSE can happen in person or online, children and young people who are exploited may also be used to 'find' or coerce others to join groups.
- **Grooming:** is when someone builds a relationship, trust and emotional connection with a child or young person so they can manipulate, exploit and abuse them. Children and young people who are groomed can be sexually abused, exploited or trafficked. Anybody can be a groomer, no matter their age, gender or race. Grooming can take place over a short or long period

of time – from weeks to years. Groomers may also build a relationship with the young person's family or friends to make them seem trustworthy or authoritative

- **Female Genital Mutilation (FGM):** FGM is when a female's genitals are deliberately cut, injured or changed for non-medical reasons. It's also known as 'female circumcision' or 'cutting' and by other terms, such as sunna, gudniin, halalays, tahur, megrez and khitan, among others. FGM is carried out for a number of cultural, religious and social reasons. Some families and communities believe that FGM will benefit the girl in some way, such as preparing them for marriage or childbirth. FGM is a form of child abuse and is a criminal offence in the UK. It is usually carried out on young girls between infancy and the age of around 15, most commonly before the onset of puberty
- **Criminal Exploitation:** Criminal exploitation is a form of modern slavery that sees victims being forced to work under the control of highly organised criminals in activities such as forced begging, shoplifting and pickpocketing, cannabis cultivation, drug dealing and financial exploitation. This type of exploitation can be particularly prevalent in the homeless sector, where traffickers are known to exploit vulnerable individuals by approaching them in homeless shelters, food banks and soup kitchens with a view to recruiting them to carry out short term work under the guise of cash in hand payment. In some cases the recruiter may use drugs and/or alcohol as a means of control over the victim.
- **Cuckooing:** Cuckooing is a practice where people take over a person's home and use the property to facilitate exploitation. It takes the name from cuckoos who take over the nests of other birds. There are different types of cuckooing including using the property to deal, store or take drugs, taking over the property for sex work or to financially abuse the tenant or simply as a place for them to live. Victims of cuckooing are often people who misuse substances such as drugs or alcohol, but may also be people with learning difficulties, mental health issues, physical disabilities or who are socially isolated
- **Discriminatory Abuse:** including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.
- **Organisational Abuse:** including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice because of the structure, policies, processes and practices within an organisation.
- **Neglect and Acts of Omission:** including ignoring medical, emotional, or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.
- **Self-neglect:** this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

Further guidance on the complex types of abuse can be found from The Social Care Institute of Excellence and employees are encouraged to be familiar with this guidance and other local resources.

6. **Collaborative Working:** Safeguarding requires working collaboratively for better outcomes for the individual. 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 person's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.

7. Safeguarding process / terminology

- **Safeguarding Concern:** the initial worry about a child, young person or adult at risk that is raised with the Local Authority and or statutory agencies.
- **Safeguarding Response:** is a response to a safeguarding concern that is appropriate to a person and their situation, but does not require a formal multi-agency enquiry. This may be an intervention, referral or even the provision of advice or information, but it is a safeguarding response because the person meets the criteria.
- **Child Protection conference:** is arranged to enable those Practitioners most involved with the child and family, and the family themselves, to assess all relevant information, and plan how best to safeguard and promote the welfare of the child who has suffered, or is at risk of, significant harm.
- **Child protection enquiry:** is carried out, under section 47 Children Act 1989, when there is reasonable cause to suspect that a child has suffered, or is at risk of, significant harm. The enquiry is carried out by Children's Social Care although both the Police and the NSPCC have powers to carry out such enquiries.
- **Child protection meeting:** A meeting arranged by Children's Social Care to consider how best to protect a child from harm.
- **Child Protection Plan:** A detailed inter-agency plan setting out what must be done to protect a child from further harm, to promote the child's health and development and if it is in the best interests of the child, to support the family to promote the child's welfare.
- **Core Assessment:** An in-depth assessment which addresses the central or most important aspects of the needs of the child and the capacity of his or her parents or caregivers to respond appropriately to these needs within the wider family and community context. It is to be undertaken where circumstances are complex and should be completed within a maximum of 35 working days.
- **Core Group:** A 'Team Around the Child', that is brought together once a child becomes subject to a child protection plan. Members of the core group are parents/carers and practitioners who are working with the child and/or family. They should meet on a regular basis. The child may also be a member subject

to age and level of understanding. A judgement has to be made about whether it is in the best interests of the child to attend the core group meetings.

- **Adult Safeguarding Enquiry:** the formal investigation of a safeguarding concern under Section 42 of the Care Act 2014. This places a duty on the Local Authority to make enquires or to cause enquiries to be made. This means that it may be more appropriate for the Local Authority to require others, such as Health partners or Care providers to make enquiries and report back to the Local Authority. Further information on the process of Safeguarding Enquiries can be found in Local Authority procedures.
- **Safeguarding Adults Reviews (SARs):** The purpose of the SAR is not to apportion blame or to hold people or organisations to account. However, referrals may be made to organisations that will do that such as: the criminal justice system, professional registration bodies and regulators. The Care Act 2014 requires Safeguarding Adults Boards to conduct a SAR when
 - An adult dies from known or suspected abuse or neglect, and there is a concern that the partner agencies could have worked together more effectively to protect the adult.
Or,
 - An adult experiences serious harm as a result of abuse or neglect and would have died but for intervention and suffers life-changing consequences as a result.
- **Radicalisation:** 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 ideology. Although several possible behavioural indicators are listed below, staff should use their professional judgement and discuss with their line Manager 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

Guidance for Information Sharing

- 1 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 employee 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.
- 2 Poor or non-existent information sharing is a factor repeatedly identified as an issue in Serious Case Reviews (SCRs) carried out following the death of or serious injury to, a child. In some situations, sharing information can be the difference between life and death. Fears about sharing information cannot be allowed to stand in the way of the need to safeguard and promote the welfare of children at risk of abuse or neglect. Everyone must take responsibility for sharing the information they hold, and cannot assume that someone else will pass on information, which may be critical to keeping a child safe.
- 3 Where possible information should be shared with consent, however 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.
- 4 Under the GDPR and Data Protection Act 2018 information may be shared without consent if, there is a lawful basis to do so, and the Data Protection Act 2018 includes 'safeguarding of children and individuals at risk' as a condition that allows practitioners to share information without consent if a person is unable to, cannot be reasonably expected to gain consent, or if to gain consent could place a child at risk, if the purpose of sharing the information is to keep a child or individual at risk safe from neglect or physical, emotional or mental harm, or if it is protecting their physical, mental, or emotional well-being.
- 5 Where we have concerns about a child's safety or welfare, this should be shared with the local authority children's social care, NSPCC and/or the police, in line with local procedures. Security of information sharing must always be considered and should be proportionate to the sensitivity of the information and the circumstances. If it is thought that a crime has been committed and/or a child is at immediate risk, the police should be notified immediately.
- 6 Sharing information in a timely and effective manner where there is a concern about a child can improve decision-making so that actions taken are in the best interests of the child. The GDPR and Data Protection Act 2018 are not a barrier to

sharing information, where the failure to do so would compromise the safety or well-being of a child. Similarly, human rights concerns, such as respecting the right to a private and family life does not prevent sharing where there are real safeguarding concerns.

7 If the safeguarding concern is about an adult and they refuse any intervention to support them with this, or they request 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
- Where employees 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

4. 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.

5. 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.
6. 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.
 7. 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.
 8. 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.
 9. 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.

Principles of information sharing.

The principles set out below are intended to help people share information between organisations. Employees should use their judgement when making decisions about what information to share and should follow Saha's procedures or consult with their manager if in doubt.

The most important consideration is whether sharing information is likely to support the safeguarding and protection of a child, young person or an adult at risk

Necessary and proportionate: When taking decisions about what information to share, you should consider how much information you need to release. Not sharing more data than is necessary to be of use is a key element of the GDPR and Data Protection Act 2018, and you should consider the impact of disclosing information on the information subject and any third parties. Information must be proportionate to the need and level of risk.

Relevant: Only information that is relevant to the purposes should be shared with those who need it. This allows others to do their job effectively and make informed decisions.

Adequate: Information should be adequate for its purpose. Information should be of the right quality to ensure that it can be understood and relied upon. Accurate Information should be accurate and up to date and should clearly distinguish between fact and opinion. If the information is historical then this should be explained.

Timely: Information should be shared in a timely fashion to reduce the risk of missed opportunities to offer support and protection to a child, young people or adult at risk. Timeliness is key in emergency situations and it may not be appropriate to seek consent for information sharing if it could cause delays and therefore place a child or young person at increased risk of harm. Practitioners should ensure that sufficient information is shared, as well as consider the urgency with which to share

Secure: Wherever possible, information should be shared in an appropriate, secure way. Employees must always follow Saha's policy on security for handling personal information.

Record: Information sharing decisions should be recorded, whether or not the decision is taken to share. If the decision is to share, reasons should be cited including what information has been shared and with whom, in line with Saha procedures. If the decision is not to share, it is good practice to record the reasons for this decision and discuss them with the person requesting the information. Storing this decision/information should be in line with Saha's data retention policy

Flowchart of when and how to share information

