



Gaddum Policy Front Sheet

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Aim

It is always unacceptable for a child or young person to experience abuse of any kind, and Gaddum recognises its responsibility to safeguard the welfare of all children and young people. The aim of this policy is to ensure that Gaddum safeguards the welfare of all children and young people by:

- Providing a safe environment for children
- Identifying children who are suffering or likely to suffer significant harm
- Identifying instances where there are grounds for concern about a child's welfare and taking appropriate action to ensure children are kept safe both within Gaddum services and at home
- Ensuring the safety and best interests of the child always come first, and all staff and volunteers are required by law to share information or concerns they have concerning the welfare of children
- Minimising the risk of unsuitable people working with children
- Promoting safe practice and challenging poor and unsafe practice
- Contributing to effective partnership working between all those involved in working with children and families

This policy supplements local procedures of the relevant Safeguarding Partnerships, as we recognise that each Local Authority will have differing services with slight differences. Where there are changes in statutory, legislative or good practice guidance Gaddum safeguarding policy will be reviewed and updated.

Scope of this policy

Safeguarding is everyone's responsibility and all Gaddum employees, volunteers and students must comply with this policy at all times. It applies to anyone who comes into any contact with children, including through working with adults who may be parents and caregivers. When dealing with cases of domestic abuse, the consideration of the welfare of children must be paramount.

This policy encompasses not only children and families who use our services, but also young people employed by Gaddum, or volunteering or on student/work placements in any of our services.

Legislative framework

All professionals working with children should be familiar with the core standards set out in [Working Together to Safeguard Children](#) (HM Government, July 2018)

Definitions

A **child** is anyone from pre-birth up to 18 years whatever their circumstances (including independent living, further education, in hospital, in custody, in the armed forces).

The term 'child' is used throughout this document to refer to both children and young people.

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If you have concerns about anyone above these ages who has care and support needs please refer to Gaddum's Safeguarding Adults at Risk Policy and Mental Capacity Act Policy.

Parent is used throughout this document to refer to parents and carers, i.e. birth parents, adoptive parents, foster parents, residential care staff, legal guardians and others acting in a parenting role.

Safeguarding is defined by Working Together to Safeguard Children (HM Government, July 2018), as:

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

Child protection is part of safeguarding and promoting children's welfare. It is activity which is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Significant harm can be understood as the severity of ill-treatment which may include the degree and extent of physical or emotional harm, the duration and frequency of abuse and neglect and the extent of premeditation. Sometimes a single traumatic event may constitute significant harm e.g. violent assault, suffocation and poisoning. More often, significant harm is a compilation of significant events both acute and long standing, which interrupt, change or damage the child's physical and psychological development. What constitutes significant harm can only be decided on a case-by-case basis.

Decisions about significant harm are complex and should be informed by a careful assessment of the child's circumstances, including discussions between the statutory agencies and the child and family where appropriate. Gaddum plays a key role in this process, this policy sets out the responsibilities staff, volunteers and students.

Children in need if they are considered to be unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for them services by a local authority. Furthermore, a child is considered in need if their health or development is likely to be significantly impaired, or further impaired, without the provision of such services. Finally, children with disabilities are considered to be in need¹.

Private fostering is when a child or young person (aged under 16, or under 18 if disabled) stays with (or there is for them intention to stay with) someone other than a parent or close relative for a period of 28 days or more². The person could be extended

¹ S17,10, Children Act 1989 <http://www.legislation.gov.uk/ukpga/1989/41/section/17>

²S66, Part IX, Children Act 1989 <http://www.legislation.gov.uk/ukpga/1989/41/section/66>

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family (e.g. a cousin or great aunt), a family friend or another non-relative. Close relatives (where private fostering does not apply) are defined as:

- Grandparents
- Siblings
- Uncles / aunts (full blood / half blood or by marriage)
- Step parents.

Private foster carers are required to inform the local authority of the arrangement in advance and again when the arrangement begins. Those providing private fostering situations do not often self identify as this, and therefore private fostering arrangements are identified by professionals providing care and support to them.

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Types of Abuse

Child abuse is maltreatment of a child. Someone may abuse a child either by directly inflicting harm, or by failing to act to prevent harm. Child abuse occurs in family, institutional and community settings. Children may be abused by an adult or adults, or by another child or children. The majority of abuse is perpetrated by someone known to the child, including parents, other relatives and families' friends. Abuse by strangers is much less common.

The four types of abuse are described below, along with signs and indicators for each type. Recognising abuse is not straightforward and it is not your responsibility to decide whether or not a child has been or is at risk of being abused. However, you do have a responsibility to act on concerns, to enable appropriate investigations to take place and actions to be taken to protect children.

If in any doubt, always seek advice using the safeguarding escalation procedures which are available in the Policies and Procedure electronic folders *and* in Appendix 1.

If in doubt, call your line manager.

Neglect and Abuse

Abuse is about the misuse of the power and control that one person has over another. In determining whether or not abuse has taken place, it is important to remember that **intent** is not the issue.

The definition of abuse is based not on whether the perpetrator intended harm to be caused but rather on whether harm was caused, and on the impact of the harm (or risk of harm) on the individual.

Failing to act to prevent harm being caused to a person you have responsibility for, or acting in a way that results in harm to a person who legitimately relies on you, both constitute abuse.

Physical abuse

Including hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.

Sexual abuse

Including rape 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, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

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Exploitation

Either opportunistically or premeditated, unfairly manipulating someone for profit or personal gain.

Financial or material abuse

Including theft, fraud, exploitation, coercion in relation to an adult's financial affairs or arrangements, such as connection with wills, property, inheritance or financial transactions, or the misuse of property, possessions or benefits.

Neglect and acts of omission

Including ignoring medical 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.

Discriminatory abuse

Including discrimination on grounds of race, gender and gender identity, disability, sexual orientation, religion, and other forms of harassment, slurs or similar treatment.

Institutional abuse

Including neglect and poor care practice within an institution or specific care setting like a hospital or care home, for example. This may range from isolated incidents to continuing ill-treatment.

Domestic Abuse

Domestic abuse describes negative behaviours that one person exhibits over another within families or relationships. These patterns of behaviour can include threats, put-downs, isolation, violence and control. Sometimes domestic abuse can be called domestic violence.

Domestic abuse can take different forms, including:

- Physical abuse: pushing, hitting, punching, kicking, choking and using weapons.
- Sexual abuse: forcing or pressuring someone to have sex (rape), unwanted sexual activity, touching, groping someone or making them watch pornography.
- Financial abuse: taking money, controlling finances, not letting someone work.
- Emotional abuse / coercive control: making someone repeatedly feel bad or scared, stalking, blackmailing, constantly checking up on someone, playing mind games. Coercive control is now a criminal offence under the Serious Crime Act 2015.
- Digital / online abuse: using technology to further isolate, humiliate or control someone.
- Honour-based violence and forced marriage.

If a child or young person under the age of 18 witnesses (including hearing it from another room) when domestic abuse occurs this is a safeguarding issue and an alert must be made.

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Other Types of Abuse

Female genital mutilation (FGM)

Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person.

Victims of FGM are likely to come from a community that is known to practise FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.

From October 2015, the new 'mandatory reporting' duty for professionals requires them to notify the police if they discover that an act of FGM appears to have been carried out on a girl who is under 18 (either if they have visually confirmed it or it has been verbally disclosed by an affected girl).

Some of the following signs may be indicators of Female genital mutilation

- A female child in a family where other females have undergone FGM
- The family is from a nation, region or community in which FGM is practised
- The family makes preparations for the child to take a holiday, planning an absence from school
- The child talks of a special ceremony that is going to happen
- Sudden or repeated failure to attend or engage with health services.

Child Sexual exploitation

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups.

What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyber-bullying and grooming.

Some of the following signs may be indicators of Child sexual exploitation

Social – Going missing from home or care or school,
Estranged from the family
Being collected from home/school in unknown cars
Secretive mobile phone use
Being friends with significantly older people
Becoming involved in crime e.g. stealing

Physical

Physical injuries, drug misuse, sexually transmitted infections, poor mental health self-harm, change in physical appearance

However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

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Radicalisation and Extremism

Radicalisation

Radicalisation refers to the process whereby a person comes to support terrorism and forms of extremism leading to terrorism

Extremism

Extremism is defined by the Government in the Prevent Strategy as 'a Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.'

Gaddum seeks to protect children and young people against the messages of all violent Radicalisation and extremism

The prevent duty can be downloaded at:

<https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty>

Some of the following signs may be indicators of Radicalisation and extremism

- Identity crisis
- Personal Crisis
- Personal circumstances
- Unmet Aspirations-Perceptions of injustice; feeling of failure
- Criminality
- Use of inappropriate language
- Possession or accessing violent extremist literature
- Behavioural changes
- The expression of extremist views;

Children who witness Domestic abuse

Parents or carers may underestimate the effects of domestic abuse on their children, but children witnessing abuse is recognised as significant harm in law

Some of the following signs may be indicators of domestic abuse.

- Children who are withdrawn
Anxious,clingy,depressed,
- Problems sleeping,
- soils clothes,
- aggressive behaviour.

Child Trafficking

Child trafficking is the recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered trafficking in human beings(council of Europe ratified by the UK government in 2008)

Some of the following signs may be indicators of Child trafficking

- Spends a lot of time doing household chores
- Not registered with a GP or school
- Has no access to their parents or guardians
- Isn't sure what country, city or town they're in.

Forced Marriage

Forced marriage (FM) where one or both parties do not agree to the marriage and where fear/coercion/duress or force is a factor.

Forcing someone to marry is a criminal offence (under the crime and Policing act 2014) and something that can lead to lifelong suffering for the victim from physical abuse, sexual abuse and servitude

Forcing children to marry is child abuse.

Some of the following signs may be indicators of Forced Marriage

The factors below collectively or individually may be an indication that a person fears that they may be forced to marry, or that a forced marriage has already taken place.

- Education- truancy from school, extended periods of unauthorised absence for sickness or overseas family commitments, history of other siblings missing education and marrying early.
- Health – self harm, attempted suicide, eating disorders, depression isolation.

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Peer Abuse and bullying (including cyber bullying).

A definition of Bullying is 'behaviour by an individual or group usually repeated over time, that intentionally hurts another individual or group physically or emotionally.'

There are many different types of cyber bullying including:

- Harrassment
- Denigration
- Flaming
- Impersonation
- Outing and trickery
- Cyber stalking
- Exclusion
- Blackmail and grooming
- Spreading rumours
- Threatening behaviour

Peer abuse can also take the form of sexual abuse (see earlier section on sexual abuse)

Some of the following signs may be indicators of peer abuse and bullying

- Children or young people may- be reluctant to attend school
- Not wanting to leave the house
- Have unexplained cuts and bruises
- Become withdrawn/ lack confidence
- Change in appetite increase/ decrease or chaning appearance to try to fit in
- Low self esteem
- Become withdrawn
- Reluctance to let parents or other family members anywhere near mobiles/ laptops etc
- Friends disappearing or being excluded from social events
- Change in personality
- Fresh marks on skin which could indicate self harm and dressing differently e.g. wearing long sleeved clothing in summer

Children Missing from Home

Children who go missing from home are vulnerable to abuse and violence, and need to be safeguarded

Some of the following signs may be indicators of Children going missing from home

Children go missing for a number of reasons, but in general, the factors preceding missing episodes are:

- Arguments and conflicts (whether at home or in a placement)
- Poor family relationships
- Abuse and neglect
- Boundaries and control

Immediate risks-

No means of support or legitimate incomes leading to high risk activities

Becoming a victim of abuse.

Missing out on schooling and education

Increased vulnerability

Fabricated, fictitious or induced illness (used to be known as Munchausen's by proxy)

This is a rare form of child abuse. It occurs when a parent or carer exaggerates or deliberately causes symptoms of illness in a child.

Some of the following signs may be indicators of fabricated illness

- symptoms only appear when the parent or carer is present
- the only person claiming to notice symptoms is the parent or carer
- the affected child has an inexplicably poor response to medication or other treatment
- if one particular health problem is resolved, the parent or carer may then begin reporting a new set of symptoms

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- the child's alleged symptoms don't seem plausible – for example, a child who has supposedly lost a lot of blood but doesn't become unwell
- the parent or carer has a history of frequently changing GPs or visiting different hospitals for treatment, particularly if their views about the child's treatment are challenged by medical staff
- the child's daily activities are being limited far beyond what you would usually expect as a result of having a certain condition – for example, they never go to school or have to wear leg braces even though they can walk properly
- the parent or carer has good medical knowledge or a medical background
- the parent or carer doesn't seem too worried about the child's health, despite being very attentive
- the parent or carer develops close and friendly relationships with healthcare staff, but may become abusive or argumentative if their own views about what's wrong with the child are challenged
- one parent (commonly the father) has little or no involvement in the care of the child
- the parent or carer encourages medical staff to perform often painful tests and procedures on the child (tests that most parents would only agree to if they were persuaded that it was absolutely necessary)

Finally, a child who is being abused may experience more than one type of abuse but **it is not your responsibility to investigate any of this**. For further information regarding the types of abuse go to your local area safeguarding board website. This is currently different for each Local Authority (see Appendix 2)

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What to do if you are concerned about a child

There are immediate steps we all must take if concerned about the welfare of a child:

- Follow the Safeguarding Escalation Flow Chart (Appendix 1, each office site, in Safeguarding folder on Policies & Procedures)
- Speak to your line manager or a colleague if you are concerned but not sure they have been addressed by the Safeguarding Escalation Flow Chart.
- In the case of an emergency contact 999 immediately and then speak with your line manager.

Staff, volunteers and students may be concerned about a child for a variety of reasons.

Children making disclosures of abuse

If a child makes a disclosure to you, you **should**:

- Stay calm and try not to show shock
- Listen carefully rather than question directly
- Be sympathetic
- Be aware of the possibility that medical evidence might be needed
- Tell the child that you are treating this information seriously
- Assure them that what has happened is not their fault
- Make sure they are not at immediate risk of further abuse – if they are, then consider informing the emergency services
- Make a record of the disclosure using the safeguarding internal reporting form.

If a child makes a disclosure to you, you **should not**:

- Press the child for more details
- Stop someone who is freely recalling significant events – they may not tell you again
- Promise to keep secrets – you should explain that the information will only be shared with those who need to know
- Make promises you cannot keep (e.g. ‘this will not happen to you again’)
- Contact the alleged abuser
- Be judgemental (e.g. asking why they did not run away)
- Pass on information to anyone who does not need to know.

Remember that where there are any concerns that a child may have been and / or may be at risk of abuse, the child’s needs must always come first and the priority must always be to safeguard the child.

Procedure for raising concerns and reporting

Gaddum’s services operate across a number of GM local authorities. Each local authority has their own Local Safeguarding Partnerships procedures. Please see Appendix 2 for information on how to raise a safeguarding across localities.

Once a report is made to Children’s Social Care, next steps are to be agreed to follow up the outcome of the report. The follow up actions are to be agreed with the worker,

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line manager and DSL. In most instances the worker will be the point of contact for follow up activity, but if the Local Authority fail to act the DSL will become the lead.

Internal Governance

Internal safeguarding forms are logged and stored centrally. Gaddum's Quality and Governance panel meet on a quarterly basis to review all safeguarding incidents for the previous quarter. This enables DSL's to identify trends in reporting, potential training gaps, and review the outcomes of safeguarding alerts.

Referrals to Children's Social Care

Referrals to Children's Social Care should only be made when a child requires the intervention of statutory services to undertake an assessment of need under **Section 17** (child in need) or **Section 47** (child in need of protection) of **The Children Act 1989**.

Under Section 17 Children's Social Care must, so far as is consistent with this duty, promote the upbringing of children in need by their families, through the provision of a range and level of services appropriate to a child's needs. It will often be the case that these children will have multiple needs and their families will be known to a range of practitioners and agencies. Concerns regarding the children's welfare may not be immediate or life threatening. Section 17 referrals can usually only be completed without the consent of the parent or guardians if assessments and / or intervention have been refused by the family, or have been unsuccessful, and there are accumulating concerns regarding the children's welfare. Ideally there should be evidence of robust early intervention prior to a S17 referral, but this may not always be the case depending on parental consent and/or the nature of the concerns.

Section 47 requires Children's Social Care to make enquiries to enable it to decide whether action is required to safeguard and promote the wellbeing of the child. The purpose is to determine whether the child is suffering, or likely to suffer significant harm and to assess whether action is required to safeguard and promote the child's welfare.

Children's Social Care act as the lead agency responsible for undertaking a Section 47 enquiry. There is a statutory duty on other agencies, such as police, health and education to assist Children's Social Care to carry out their duties and responsibilities under Section 47.

Gaining parental consent before making a referral to Children's Social Care is good practice. Where consent is not gained, an informed judgement must be made as to whether gaining consent will place the child at increased risk of harm. If this is the case, then the referral must state that consent has not been obtained, and provide the rationale for this.

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Always follow Gaddum's Safeguarding Escalation Process when you have concerns. In the case of an emergency call 999 immediately and contact a senior manager afterwards.

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When does a safeguarding concern become an incident?

There may be times when a safeguarding concern is deemed to be a Serious and Untoward Incident (SUI).

An incident

An incident is defined as an event that caused harm or had the potential to cause harm to clients/children, volunteers or staff or members of the public. This could include verbal or physical aggression or a breach of policy or procedure (such as confidentiality or data protection), whether by accident or intentionally.

An SUI is 'something out of the ordinary or unexpected, with the potential to cause serious harm. This may be because it involves a large number of service users, it involves poor professional or managerial judgement, a service has failed, a service user has died under unusual circumstances or there is a perception that any of these has occurred.

Under such circumstances then both Safeguarding and SUI reporting processes must be followed in parallel and adhered to. If you require any guidance or support you must speak to your line manager.

Local procedures

As already described, each service holds local versions of the reporting concerns flowchart, containing local variations to procedures (relating to local Safeguarding Partnerships procedures) and local Children's Services contact details. All staff and volunteers will receive induction and training on local procedures, as well as group procedures, as part of their mandatory induction.

Child Safeguarding Practice Reviews (SPR's)

Local Authority Children Boards always undertake a safeguarding practice review when a child or young person dies (including death by suicide) and abuse or neglect is known or suspected to be a factor in their death or they suffer significant harm.

The purpose of the safeguarding practice review is to:

- Find out if there are any lessons to be learnt from the case about how local professionals and agencies work together to safeguard and promote the welfare of children and young people.
- Identify what those lessons are, how they will be acted on and what is expected to change as a result of the SPR
- Improve inter-agency working to better safeguard and promote the welfare of children and young people.

If required Gaddum would provide an individual agency report for a SPR and will cooperate fully with implementing outcomes of the review including reviewing policy, practice and procedures as required.

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Safeguarding accountability, roles and responsibilities

Safeguarding is everyone's responsibility, and all Gaddum employees, volunteers and students must comply with these policies and procedures at all times.

Gaddum has a clear and singular safeguarding escalation process that covers both children and adults. It must be followed at all times and, if an employee, volunteer or student is in doubt – they must speak to their line manager or next safeguarding escalation lead.

It is the responsibility of every employee and volunteer to follow the procedures within this policy if they are concerned about a child. All safeguarding issues should be recorded and reported through the safeguarding reporting procedures for Gaddum.

Strategic Leadership responsibility for safeguarding across Gaddum rests with Ben Whalley, Head of Operations.

Gaddum has a Quality & Governance Subcommittee. It oversees the risk management system and ensures services are delivered safely and to a high standard.

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Safeguarding Tiers and Contact Details

Your primary safeguarding contact is your service area lead. If your service lead is not available use the safeguarding tiers below:

The Tier 1 Safeguarding Leads are:

Lauren Edwards

Jennifer Mackay

Telephone: 07931 961 262

Telephone: 07766 198 360

Email: lauren.edwards@gaddum.org.uk

Email: Jennifer.Mackay@gaddum.org.uk

In the absence of Tier 1 Leads, the Tier 2 Lead is:

Ben Whalley

Telephone: 07891 214 544

Email: ben.whalley@gaddum.org.uk

In the absence of the Tier 2 Lead, the Tier 3 lead is:

Sam Palmer

Telephone: 07584 519 464

Email: sam.palmer@gaddum.org.uk

In the absence of the Tier 3 Lead, the Tier 4 lead is:

Lynne Stafford

Telephone: 07729 125 010

Email: lynne.stafford@gaddum.org.uk

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Key principles

Integrated working Multi-agency working

Agencies and professionals need to work together to provide a seamless and comprehensive service to children and young people. Detailed guidelines for sharing information are contained within this policy. These are supported by local flowcharts which include local variations to procedures and local contact details.

Gaddum staff have a duty to participate in multi-agency processes. This duty applies regardless of whether or not a Gaddum member of staff is the lead for the case.

Shared responsibility

Safeguarding and promoting the welfare of children and young people is everyone's business. If anyone suspects a child is being abused or at risk of being abused, then they have a legal duty to report it. Detailed procedures for reporting abuse or concerns are set out in a flowchart within this document and supported by local flowcharts which include local variations to procedures and local contact details. These details are displayed within each service staff office.

Safe working practices

We all have a duty to ensure that the services we deliver keep children and young people safe, and Gaddum has a range of frameworks in place to support staff to achieve this. These include:

- Health and Safety Policy
- Risk Management Policy
- Information Governance Framework

Safer recruitment

Safer recruitment is ensured through the rigorous application of the following policies and procedures:

- Recruitment Policy (which includes safer recruitment)
- Employment of ex-offenders policy statement

Risk assessment

Gaddum's Health and Safety Policy and Risk Management ensure all our work is thoroughly risk assessed and carried out in a safe manner.

Informing parents

Parents will normally be informed if a concern is raised about their child. However, if the safety of the child or any other party would be compromised by informing the parents (for example if they are suspected of being the abuser or being involved or complicit in the abuse), parents will not be informed.

Sharing information

Sharing information is an essential part of effective safeguarding practice. It allows multiple staff and / or agencies to build a complete picture of a situation where one

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individual or agency would be unable to do so. Often it is only when information from a number of sources is shared that it becomes clear that a child is suffering or at risk of suffering harm. This then enables early intervention and prevention work to be carried out. Information which you might need to share could include information about:

- Children and their health, development and exposure to possible significant harm
- Parents who may not be able to care adequately and safely for children
- Individuals who may present a risk to children

Confidential information may be shared with the consent of the person who provided it or to whom it relates. Confidential information may also be shared without consent under the following circumstances:

- If there is evidence or reasonable cause to believe that a child is suffering or at risk of suffering significant harm, or of causing significant harm to another child or serious harm to an adult
- A person has been deemed to lack mental capacity and it is in their best interests to make an alert.
- To prevent significant harm to children.

Where the obligation to uphold a person's right to privacy has been overridden for the purposes of safeguarding the rationale for how this decision has been made must be recorded on Gaddum's internal safeguarding form. Support in making this decision should be sought via the DSL, unless it is an emergency or a crime is being committed.

Induction, training and one to ones

Induction

All Gaddum staff and volunteers receive a mandatory induction. The mandatory induction covers policies and procedures including this one and Safeguarding Adults Policy. The mandatory induction also includes local information specific to the service, including local variations to safeguarding procedures, such as the reporting concerns flowchart.

Training

All Gaddum staff and volunteers receive a policy briefing on induction into the charity. Staff and volunteers have mandatory training assigned to their post. For relevant posts this includes the appropriate level of safeguarding training required to fulfil their role. Safeguarding training is refreshed every three years for relevant staff and volunteers.

Staff and volunteers in roles involving direct and indirect contact with children, young people and families will receive additional safeguarding training through their Local Safeguarding Partnership training programme at the level appropriate for their role.

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One to Ones

All staff receive regular one to ones in accordance with our One to One Policy. The frequency of one to one is determined by the role: for staff with extensive contact with clients it will be at least every 4-6 weeks. Safeguarding is a mandatory agenda item in all One to One sessions.

This provides an opportunity to raise concerns and identify solutions to issues arising, although staff should be clear that they can and should speak to their line manager about safeguarding issues at any time and should not wait for a One to One to do so. The One to One session also provides an opportunity to reflect on safeguarding practice and identify ways to improve individual performance in this area.

Allegations against staff and volunteers

Please refer to the Duty of Candour policy and the LADO & PiPoT Policy.

Mobile devices and equipment

Gaddum recognises that staff, volunteers and visitors may wish to have their personal mobile phones with them for use in case of emergency. However, in recognition of the potential for personal mobile phones and cameras to be used inappropriately and breach safeguarding, personal mobile phones are not to be used during client contacts unless in emergency situations and no Gaddum device can be used at that moment in time.

Information technology is an essential part of all our lives: staff, volunteers and service users. The technology is of great benefit to us all, however, if misused, children, young people and vulnerable adults can be actually or potentially harmed. We have clear guidance for appropriate use of digital technology: for information please refer to the Internet and Social Media Policy.

Equipment owned by the charity

Gaddum provides mobile phones, cameras and recording equipment (where appropriate) for the use of staff, volunteers and students within the course of their work with children and vulnerable adults. The following rules are in place for use of this equipment:

- Equipment remains the property of the setting at all times and should not be taken off the premises except during outings
- Equipment must only be used for work related purposes
- Only equipment owned by the setting may be used for work related purposes
- Equipment may be used to take appropriate and relevant images and recordings of children, for example observations, images for learning journals, recording special events
- Equipment should only be used when two or more staff members are present

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- Equipment must not be used to record injuries on a child for safeguarding concerns
- Images and recordings must be used in accordance with the Data Protection Act 2008.

For additional guidance please see Gaddum's IT & Device Policy.

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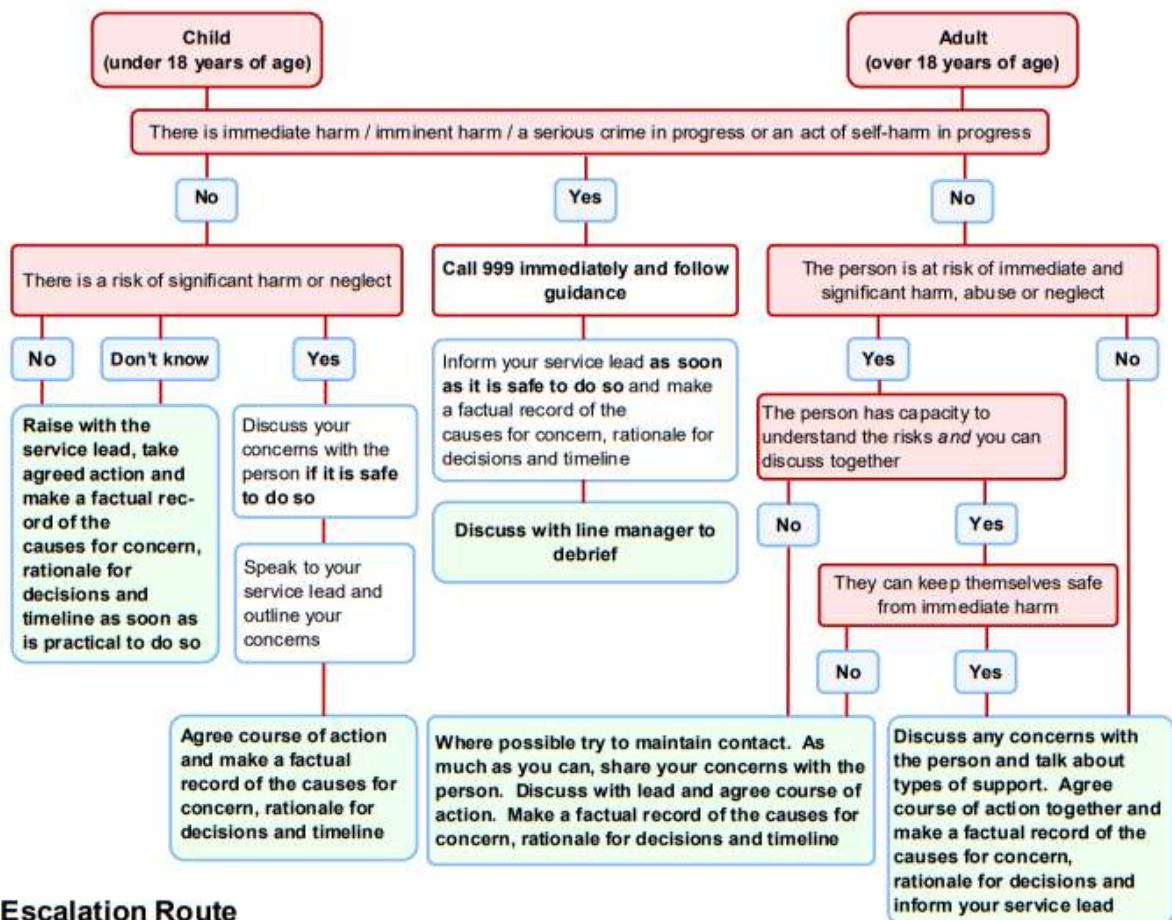
Appendix 1: Safeguarding Escalation Flow Chart

Gaddum Safeguarding and Wellbeing Concerns

Recognise, Respond, Record

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- ⇒ Follow this flowchart for concerns around safeguarding.
- ⇒ **If you are unsure about anything, do not be afraid to ask your line manager (or the next safeguarding lead for support).**
- ⇒ For issues raised by professionals in other organisations, **report and record**, but advise them to follow their own processes.
- ⇒ No one is expected to make decisions around safeguarding on their own, **discuss, decide and debrief!** For who to contact, see the list at the bottom of this chart.



Escalation Route

| Service Lead | Assistant Head of Service | Head of Service | Head of Development | Chief Executive |
|------------------------------------|--|---|---|---|
| Tier 1 Your service lead | Tier 2 If they are unavailable, contact your assistant head of service. If they are not available, contact the other assistant head of service | Tier 3 If they are unavailable, contact the Head of Service | Tier 4 If they are unavailable, contact Head of Dev. & Innovation | Tier 5 If they are unavailable, contact the Chief Executive |
| Service Manager* | Lauren Edwards m: 07931 961 262 Jenny Mackay m: 07871 907 813 | Ben Whalley m: 07891 214 544 | Sam Palmer m: 07584 519 464 | Lynne Stafford m: 07729 125 010 |

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Appendix 2: Local Authority Safeguarding Boards Manchester

Children: [Manchester Safeguarding Partnership - CYP](#)

Adults: [Manchester Safeguarding Partnership - Adults](#)

Salford

Children: [Professionals | Salford Safeguarding Children Partnership](#)

Adults: [Safeguarding forms | Salford Safeguarding Adults Board](#)

Heywood, Middleton & Rochdale

Children: [Rochdale Safeguarding Partnership - CYP](#)

Adults: [Rochdale Safeguarding Partnership - Adults](#)

Stockport

Children: [Stockport Safeguarding Partnership - CYP](#)

Adults: [Stockport Safeguarding Partnership - Adults](#)

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Appendix 3: Descriptions of Training levels in induction and refresher training

Level 1

For those in contact with children and young people and with adults who are parents and carers. These people are in a position to identify concerns about the maltreatment of children, including those that may arise from the use of the Common Assessment Framework (CAF)/ Early Help Assessment. Therefore, as a minimum they need introductory training on how to work together to safeguard and promote the welfare of children.

Level 2

The target audiences for these courses are those who work regularly with children and young people and with adults who are carers and who need a higher minimum level of expertise: a fuller understanding of how to work together to identify and assess concerns and to plan, undertake and review interventions.

Level 3

The target audiences for these courses are those with a particular responsibility for safeguarding children who need to have a thorough understanding of working together to safeguard and promote the welfare of children, including in complex and/or serious cases.

Level 4

The target audience for these courses are those with responsibility for assessing risk in safeguarding cases, and managing complex work.

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Appendix 4: Gaddum Safeguarding Children Statement

Gaddum believes that everyone in our society has a right to live their life free from harm and abuse and that freedom of choice and self-autonomy is a fundamental human right.

The Safeguarding of Children and Young People is a vital part of our work with the children and adults with whom we have contact. Having safeguards in place and being aware of the needs of our service users not only promotes and protects their welfare but also enhances the confidence of trustees, staff, volunteers, parents/carers, Local Authorities, Health Authorities and the general public in our work. We all have a duty of care to those we work with.

Because of the nature of our work, staff working for Gaddum are particularly well placed to identify situations where children and adults may be at risk.

At Gaddum we are guided by the principles set out in ***Working Together to Safeguard Children 2018***, which describes what children have said they want from safeguarding systems:

- Vigilance: to have adults notice when things are troubling them
- Understanding and action: to understand what is happening, be heard and understood, and have that understanding acted upon
- Stability: to be able to develop an on-going stable relationship of trust with those helping them
- Respect: to be treated with the expectation that they are competent rather than not
- Information and engagement: to be informed about and involved in procedures, decisions, concerns and plans
- Explanation: to be informed of the outcome of assessments and decisions and given reasons when their views have not met with a positive response
- Support: to be provided with support in their own right as well as a member of their family
- Advocacy: to be provided with advocacy to assist them in putting forward their views.

Children should be made aware that it is their right to be safe from abuse. They should be given clear information on where to go for help if they need it.

This child centred approach is in keeping with Gaddum's ethos of putting the service user at the heart of everything we do. This helps us to ensure safeguarding in our day-to-day practice.