
Safeguarding Policy



Catholic Care
Caritas Leeds



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The Charity

Catholic Care supports, assists and cares for those who are particularly vulnerable because of their age, physical or mental ability, ill health or are dealing with issues that create barriers to learning or integration into the community. We do this in a variety of settings: schools, care homes for children and adults, family homes, community groups, supported living for adults at risk and extra care for older people.

Policy Statement

Safeguarding is a fundamental part of Catholic Care's work and this commitment is reflected in our policies and the values of our organisation, which inform and support all of our safeguarding activity.

Our Values

Our values are what drive everything we do. They help us to make decisions about what we do, how we do it, and who we do it for:

Care

We aim to deliver the highest standards of care to anyone who is disadvantaged, vulnerable or marginalised, regardless of their faith. By making their interests our priority, we seek to enrich their lives, meet their needs and support their independence.

Compassion

We offer understanding and empathy, and work in partnership to improve the physical, spiritual and emotional well-being of the people we encounter.

Community

We believe in encouraging individuals to value each other and by, empowering people, to act together for the common good. As a result, we aim to establish a sense of community and family that promotes feelings of belonging and self-worth.

Dignity

Each and every person has the right to enjoy freedom, choice and respect. We take care to create services that reflect people's preferences and respect their privacy and dignity at all times – so they each receive the personalised support that they need to enjoy rich and independent lives.

Equality

As a charity that celebrates diversity and values relationships built upon mutual respect, we strive to offer inclusive services, without discrimination. This means that anyone in need can access our services and everyone is guaranteed a warm welcome.

Justice

We aim to be fair and just in all our dealings with people, from those using our services every day to our employees and volunteers. We also believe in open and honest working practices, and we aim to make a positive difference to those around us.

Our Safeguarding Principles

Everyone's responsibility - Everyone at Catholic Care has a responsibility to keep children and adults who need care and support safe from abuse and neglect.

Prevention – We will put sensible measures in place to prevent abuse, including the use of safe recruitment practices, promoting safe working practice and raising awareness of safeguarding.

Protection – We will provide policy, procedures, information and training to enable all Catholic Care staff and volunteers to identify and respond appropriately to concerns about abuse.

It is the duty of all employees, trustees and volunteers to follow this policy. Failure to comply will be addressed without delay and may result in disciplinary action and ultimately dismissal.

Our Trustees have a responsibility to ensure the necessary steps are taken to safeguard children and adults at risk. They also have a duty to manage risks within the Charity. This policy has been approved and endorsed by the Board of Trustees.

Legal Framework

This policy has been drawn up on the basis of law and guidance that seeks to protect children and adults at risk, namely:

- Children Act 1989 and 2004
- The Mental Health Act 1983 & 2007
- The Mental Health Act Code of Practice 2015
- United Nations Convention of the Rights of the Child 1991
- GDPR 2018
- The Human Rights Act 1998
- The Police Act 1997
- Care standards Act 2014
- Mental Capacity Act 2005
- Safeguarding Vulnerable Groups Act 2006
- Safer Working Practice 2018
- Protection of Freedoms Act 2012
- Working together to Safeguard Children 2020
- Care Act 2014 The Health and Care Act 2022 revoked Schedule 3 and amended Section 74 of the Care Act 2014 on 1 July 2022. This means that certain parts of the 'Care and support statutory guidance' are out of date and are in the process of being updated to reflect the relevant statutory changes.
- Children & Families Act 2014
- Care and support statutory guidance 2018
- Guidance for safer working practice for those working with children and young people in education settings February 2022

Our Roles and Responsibilities

Everyone in Catholic Care has a responsibility for safeguarding and must:

- Familiarise themselves with this policy and the procedures that support it;
- Know what to do and follow the procedures after a safeguarding concern has been raised; and
- Ensure their behaviour always reflects the principles and values of this policy.

Our Trustees have a duty of care to the Charity, which includes taking the necessary steps to safeguard those at risk from abuse, managing risk and protecting the reputation of Catholic Care.

As such, our Trustees are responsible for overseeing this Safeguarding Policy's implementation and effectiveness.

The Director is accountable to Trustees for safeguarding within the Charity and will ensure a clear framework for the management accountability for safeguarding is in operation.

The Senior Management Team is accountable to the Director for safeguarding within their services, for giving leadership on safeguarding as a corporate issue and ensuring it is integral to their service plans. Safeguarding is a standard agenda item at their monthly management meetings. Safeguarding is also a standard agenda item at staff/team meetings.

The Head of Care will stay abreast of developments on safeguarding best practice, advise on changes to policy and practice, and co-ordinate safeguarding audits and reporting, and lessons learnt.

Senior Managers provide advice and support to staff unsure about how to proceed with a particular case, and take designated safeguarding responsibility for the safe delivery, quality and effectiveness of their services.

The Designated Safeguarding Lead for Catholic Care is Rachel Wilkinson. In addition to her role as Head of Care, she is the lead role in the charity. Her duties also include raising awareness within the Charity of issues relating to the welfare of children and adults at risk. She also has responsibility for ensuring all new staff are aware of the Safeguarding Policy.

Addendum A – Definitions

Child:

In England a child is defined as any person under the age of 18, whether living with their families, in state care or living independently.

Safeguarding Children:

In England, protecting children at risk is defined as:

- Protecting children from abuse and 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 outcomes.

Adult at Risk:

In England an adult at risk is defined as a person aged 18 or over whom:

- Has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- Is experiencing, or at risk of, abuse or neglect; and
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

An adult at risk could be a member of the public (including but not limited to someone who benefits from services or activities we have funded or contracted out to others), someone we fund or contract with, or a member of staff. Whoever they are, any concerns should be shared in accordance with this policy.

Safeguarding Adults:

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult'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 adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

Abuse:

Abuse is a form of mistreatment by one individual that causes harm to another person. The range of abuse includes physical abuse, emotional abuse, neglect, sexual abuse and child sexual exploitation. Abuse may consist of single or repeated acts.

A full list of abuse and definitions can be found in Addendum B.

Addendum B – Definitions of Abuse

Physical Abuse:

A form of abuse that may involve hitting, shaking, throwing, poisoning, burning, scalding, suffocating or, otherwise causing physical harm to a child or adult at risk. Physical harm may also be caused when a parent or carer fabricates the symptoms or deliberately induces illness in a child or adult at risk. Involuntary isolation or confinement. The inappropriate application of techniques or treatments.

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 is aware of what is happening. The activities may involve physical, 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 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. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Adult - without consent because:

- a person has capacity and does not want to give it;
- a person lacks capacity and is therefore unable to give it;
- a person feels coerced into activity because the other person is in a position of trust, power or authority.

Emotional Abuse:

This is the persistent emotional maltreatment of a child/adult such as to cause severe and persistent adverse effects on their emotional development. It may involve conveying to the child/adult that they are worthless or unloved, inadequate, or valued only insofar as they met the needs of another person. It may include not giving them opportunities to express their views, deliberately silencing them or making fun of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on them. They may include interactions that are beyond their developmental capability, as well as overprotection and limitation of exploration and learning, or preventing them participating in normal social interaction. It may involve seeing or hearing the ill treatment of another. It may involve serious bullying (including cyber bullying), causing them to frequently feel frightened or in danger, or the exploitation or maltreatment of a child/adult. Some level of emotional abuse is involved in all types of maltreatment of a child/adult, though it may occur alone.

Neglect:

Is the persistent failure to meet a child's/adult's physical and/or psychological needs, likely to result in the serious impairment of the child's/adult's health or development. Neglect may occur during pregnancy as a result of maternal substance misuse.

Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;

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- Ensure adequate supervision (including the use of inadequate care-givers);
 - Ensure access to appropriate medical care or treatment;
 - It may also include neglect of, or unresponsiveness to, a child's/adult's basic emotional needs. Under or over use of medication, failure to provide adequate or reasonable standard of support that could be reasonably expected to be provided, failure to adhere to other relevant standards of care and professional codes of conduct.

Contextual Safeguarding

Contextual safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. It recognises that the different relationships young people form – in their neighbourhoods, through their networks, at school and online – can feature violence and abuse.

Because young people are vulnerable to abuse in a range of contexts, responding to contextual safeguarding concerns means working with children's social care, and other relevant partners, to collectively assess the risks for young people and plan suitable interventions.

Where employees are concerned about contextual safeguarding factors for a child or young person (or group of children or young people) they must speak with the designated Safeguarding Lead and provide information about what they know.

Financial Abuse:

Including theft, fraud, exploitation, pressure in connection with Wills property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Discriminatory Abuse:

Means treating someone unfairly or differently because of their ethnicity, gender, cultural background, religion, beliefs, physical or sensory impairment, sexual orientation, or age.

Organisational Abuse:

occurs when a health/care/housing or other service routinely neglects individuals and/or violates their rights.

Modern Day Slavery:

Slavery, human trafficking, forced labour and domestic servitude.

Self Neglect:

Covers a wide range of neglecting to care for one's personal hygiene, health or surroundings, and includes behaviour such as hoarding.

Other specific safeguarding issues that staff are made aware of through training/ induction include:

- Child Sexual/Criminal Exploitation (CSE/CCE) including County lines (using vulnerable children to distribute drugs)
- Bullying including cyber bullying
- Domestic Abuse
- Female Genital Mutilation (FGM)
- Forced marriage • Violence against women and girls (VAWG)
- Gangs and youth violence • Radicalisation
- Honour based violence

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- Peer on peer abuse
 - Children with family members in prison
 - Homelessness
 - So, called “honour based” violence
 - Sexual violence and sexual harassment between children

Government’s ‘Prevent’ Strategy

Prevent is about safeguarding people and communities from the threat of terrorism. Prevent is 1 of the 4 elements of CONTEST, the Government’s counter-terrorism strategy. It aims to stop people becoming terrorists or supporting terrorism:
<https://www.gov.uk/government/publications/individuals-at-risk-of-being-drawn-into-serious-and-organised-crime-a-prevent-guide>

Serious organised crime is a threat to our national security and to our local communities. It affects all of us and includes: trafficking and dealing in drugs, people, weapons and counterfeit goods; sophisticated theft and robbery; fraud; money laundering and other forms of financial crime; and cyber-crime. It also includes Modern Day Slavery and child sexual exploitation. Law enforcement estimates that over 39,000 people are engaged in serious and organised crime in this country, operating in more than 5,800 groups. The UK Government estimates that the social and economic cost of organised crime is at least £24 billion each year and likely to be very much more. Government, law enforcement and partners, both locally and nationally, work together to tackle this threat. A new national law enforcement organisation, the National Crime Agency (NCA), was launched in 2013 to lead the fight to cut serious and organised crime. At the same time the Government published a new strategy which aims to substantially reduce the level of serious and organised crime affecting the UK and its interests.

The Strategy has 4 objectives:

PURSUE: prosecuting and disrupting people engaged in serious and organised criminality;

PREVENT: preventing people from engaging in serious and organised crime;

PROTECT: increasing protection against serious and organised crime;

PREPARE: reducing the impact of this criminality where it takes place. All Catholic Care staff and volunteers are actively encouraged to undertake the e-learning training:

<https://www.elearning.prevent.homeoffice.gov.uk> Dealing with Allegations of Abuse and Reporting Concerns in Relation to Adults Working with Children and Adults at Risk

All Catholic Care staff and volunteers are actively encouraged to undertake the e-learning training: <https://www.elearning.prevent.homeoffice.gov.uk>

Reporting and Responding to Allegations

(See Appendices for Procedures within each Service)

All concerns and allegations of abuse will be taken seriously by trustees, staff and volunteers and responded to appropriately - this may require:

- a referral to Social Care;
- a referral to the Local Authority Designated Officer (LADO) for allegations against staff, trustees and volunteers;
- and, in emergencies a referral may be made to the Police.

Where a disclosure has been made, staff should let the child/adult at risk know the position regarding their role and what action they will have to take as a result. Each setting has their own way of informing the child or adult at risk of the process. Clear boundaries of confidentiality will be communicated to all. All personal information regarding a child/ adult at risk will be kept confidential.

The processes outlined below details the stages involved in raising and reporting safeguarding concerns about children and adults at risk.

Action to take if you are in direct contact with the person raising the concern, for instance through a telephone call, receipt of a complaint or a meeting face to face.

- Stop other activity and focus on what you are being told, or have just seen. Responding to suspicion of abuse takes immediate priority.
- Do not promise confidentiality or agree to 'keep it a secret'. Explain clearly to the person raising the concern that you need to pass on the concern to someone who can help. You can express support and reassurance to the person giving you the information, particularly if it is a child.
- Avoid asking leading questions like 'Did they do X to you?' but confine yourself to open questions like 'Can you tell me what happened?'
- If talking with a child then work at their pace – do not rush them.
- Avoid expressing opinions or emotions.
- Ask only what you need to know to gather factual details. You do not need full details but do need sufficient information for an informed referral including: details of the concern or allegation and if possible name, date of birth and address of the individual concerned.
- Take notes of what has been said, what you have heard or seen – if it is not possible to take notes at the time, do so immediately afterwards. Keep the notes taken at the time, without amendment, omission or addition, whatever subsequent reports may be written. The notes should be dated, signed and kept in a secure place. Include the date, time and location of the alleged incident and names of the individuals involved.
- Do not investigate the case yourself.
- Do not, at this stage, tell the person who is the subject of an allegation or suspicion what you have been told. Whilst it is good practice to seek permission to make subsequent referrals to outside agencies, this should only be actioned if there are assurances that it will not place an individual at any increased risk. It is also important to ensure that any discussions with the family do not jeopardise any subsequent investigations or enquiries.
- Refer all concerns to the Senior Manager of your service in the first instance, who will discuss next steps and if the case needs to be referred on to the police or Social Services. In an emergency situation, where a child or adult at risk is in immediate

danger, or where a criminal act has been witnessed, call 999 or the relevant Social Services Department.

- Take actions to ensure your own safety (if required) and in an emergency dial 999. Refer to the lone working policy for further details on how to keep yourself safe.

If you are not in direct contact with the person raising the concern, for instance if you have received a letter, email or have identified a concern on social media.

- Stop other activity and focus on what you are being told. Responding to suspicion of abuse takes immediate priority.
- Retain any written records including emails and letters.
- Refer all concerns to the Designated Safeguarding Lead, who will discuss next steps and if the case needs to be referred on to the police or Social Services.

Where staff receive an allegation against someone from another organisation, this should be reported directly to the LADO. Staff who become aware of an allegation about a person from another agency should report this to their agency's Safeguarding Lead without delay who should in turn inform the LADO straight away. The LADO should be consulted on all allegations that appear to meet the criteria, within one working day. This should take place before any investigations commence. In less serious cases, police and CSC may not need to be involved but the LADO will provide an objective view.

Reporting Concerns Outside of Normal Working Hours

All safeguarding concerns should be reported to the Designated Safeguarding Lead. The Safeguarding Lead will discuss the concerns and decide next steps. If the concerns are identified outside of normal office hours and the Safeguarding Lead or Director are unavailable, decide whether there is an immediate risk to the child or adult at risk. In an emergency situation, where an individual is in immediate danger, or where a criminal act has been witnessed, call 999 or the relevant Social Services Department (numbers are listed below). This will usually be via the main switchboard number of the local authority. Inform the Safeguarding Lead and your line manager of your concerns and actions as soon as practicable.

Contact Details for Social Care:

Leeds:

Children's Social Care 0113 3760336 Working hours or 0113 5350600 outside of working hours

Adults Social Care 0113 -3780644 Working hours or 0113 3780644 outside of working hours

Wakefield:

Children's and Adults Social Care Access Point 0845 8503503

Bradford:

Children's Social Care 01274 435600

Adults Social Care 01274 - 435400

Kirklees:

Children's Social Care 01484 456848

Adults Social Care 01484 414933

Calderdale:

Children's and Adults Social Care Access Point 01422 88000

North Yorkshire: Children's and Adults Social Care Access Point 01609 780780

First Aid and Medical Treatment

If a child or adult at risk requires first aid or any form of medical attention then the following good practice should be followed:

- Where applicable, be aware of any pre-existing medical conditions, medicines being taken by participants or existing injuries and treatment required. This information should be obtained on admission to the service and stored on individual files.
- Where possible, ensure access to medical advice and/or assistance is available.
- Only those with a current, recognised First Aid qualification should respond to any injuries.
- Where possible any course of action should be discussed with the child/ adult at risk, in language that they understand, and their permission sought before any action is taken. An assessment of Capacity may need to be undertaken or Parental Consent sought if deemed appropriate.
- In more serious cases, assistance must be obtained from a medically qualified professional as soon as possible.
- All actions are recorded.
- All staff are aware of their own specific responsibilities within their own setting.

Transportation of Children and Adults at Risk

It is a requirement that vehicles are correctly insured and all reasonable safety measures are taken, e.g. seat belts are working. Employees have a responsibility to inform the Charity should they be convicted of any driving offence. When using Charity vehicles, a disclaimer must be signed and copies of driving licences kept on personnel files. Always plan and prepare a detailed programme of the journey and method of transport, give details of the route, anticipated time length and ensure copies with contact details are available for other staff members:

- Parental consent is obtained where necessary
- Risk assessments determine the staff ratio
- There is a requirement for all staff to hold business car insurance when using their own vehicles.

Use of the Internet and Other Technology Including Photography and Mobile Phones

Always ensure that you obtain the relevant permission prior to using any media equipment or other device to take pictures. Permission must be in written form. They will not be used on publicity materials including websites (only with permission). Names of service users should not be placed with photographs on display (only with permission). On occasion staff will use their personal mobile phones to take pictures of services to record memories and experiences. When this happens the photographs must be downloaded immediately on return to the office and immediately deleted from the personal mobile phone. Addresses of our services will not be displayed with images of the service unless appropriate to do so.

Report any unauthorised taking of images to your manager immediately.

Use of Contractors Reasonable

Care should be taken to ensure that contractors doing work on behalf of the Charity are monitored appropriately. Where there is potential for contact with children or adults at risk, they should have their own equivalent Children and Adult at Risk Policy/Procedure or, failing this, it is the responsibility of the manager who is using the services of the contractor to ensure that they comply with the terms of the Charity's Policy and Procedure.

All written records will be kept in a secure area for a specific time as identified in data protection guidelines.

Complaints Procedure

The Charity has a Complaints Procedure available to all staff, volunteers, trustees and service users. Service users can also refer to the Complaints Policy of their Local Authority and their regulatory body where appropriate.

Recruitment and Training

We will implement safe recruitment practices to ensure that all staff, volunteers and the Board of Trustees are suitable and legally able to act in their positions and that Disclosure and Barring Service checks are sought where a role is eligible. It is appropriate that a safeguarding question will be asked at all interviews. Inductions of new staff will include discussions of the Safeguarding Policy (and confirmation of understanding). The policy will be updated at least annually and disseminated to all paid staff and volunteers.

All paid staff, volunteers and the Board of Trustees are required to complete a Safeguarding Course every 3 years and the Designated Safeguarding Lead is required to complete training every 2 years. Staff are therefore expected to have a sound understanding of safeguarding concerns, including potential abuse and neglect of children and adults at risk, which may come to light in the workplace as well as in the settings which we visit and are based. At whatever level we identify risks we will highlight them and seek to ensure that appropriate steps are taken to safeguard the individuals concerned.

We recognise that the involvement in situations where there is a risk or actual harm can be stressful for staff concerned. The mechanisms in place to support staff include:

- debriefing support for paid staff and volunteers, so they can reflect on issues dealt with.
- seeking further support as appropriate.

Sharing of Policies

Safeguarding Policies and Procedures are shared with adults at risk through regular service user meetings. Safeguarding Policies and Procedures are shared with children/young people through regular children's/young people's meetings.

Monitoring

These procedures will be reviewed on at least an annual basis by the Policies Working Group, Senior Management Team reporting to the Trustees to assess its effectiveness and any need for amendment to reflect new legislation/good practice issues.

Appendices:

Safeguarding Procedures for each Service within the Organisation:

Safeguarding Procedures: Children's Residential Homes

Safeguarding Procedures: Schools, Children & Family Wellbeing Service

Safeguarding Procedures: Adult Services

Safeguarding Procedures: Community Sponsorship Group

Flow Chart:

Process within all Catholic Care Services for Dealing with Safeguarding Concerns

Diagram of Typically Abusive Injuries

Cause for Concern Form

Safeguarding Policy

Harrison Crescent

Introduction

Safeguarding is the process of protecting children/young people from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables children/young people to have optimum life chances and enter adulthood successfully.

Statement of Principles

Harrison Crescent is committed to practices that protect children/young people from harm. The legal definition of a child is that “a child is a child until their eighteenth birthday”. Harrison Crescent recognises and accepts its responsibilities to develop the awareness of the issues that may cause children/young people harm.

Harrison Crescent will at all times work to appropriate Government Guidance and all Local Safeguarding Children Board Policies and Procedures.

Statement about Working with Children and Young People

Harrison Crescent is committed to:

- updating and reviewing these policies and procedures on a regular basis
- multi-disciplinary working
- recruiting all staff and volunteers in an equal opportunity way and ensuring that full checks (including DBS) and references are undertaken before a person starts work
- providing all our staff with formal child protection training on induction and at intervals of at least every three years including regular updates to safeguarding good practice
- ensuring a designated person is available at all times to co-ordinate all child protection and other protection concerns
- include a code of behaviour within this policy

Definitions of Abuse

Physical Abuse

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

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child/young person such as to cause severe and persistent adverse effects on the child's/young person's emotional development. It may involve conveying to children/young people that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child/young person opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children/young people. These may include interactions that are beyond the child's/young person's developmental capability, as well as overprotection and limitation of exploration

and learning, or preventing the child/young person participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber-bullying), causing children/young people frequently to feel frightened or in danger, or the exploitation or corruption of children/young people. Some level of emotional abuse is involved in all types of maltreatment of a child/young person, though it may occur alone.

Sexual Abuse

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/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/young people in looking at, or in the production/sharing of, sexual images, watching sexual activities, encouraging children/young people to behave in sexually inappropriate ways, or grooming a child/young person 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/young people.

Neglect

Neglect is the persistent failure to meet a child's/young person's basic physical and/or psychological needs, likely to result in the serious impairment of the child's/young person'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:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Recognising Abuse

When working with children/young people we get to know them well and build up a relationship. From this position it becomes more likely that the skilled professional will recognise the sign and symptoms of abuse. There are many of these and may include the following:

- Injuries. particularly injuries with no or inconsistent explanations. Medical problems.
- Pregnancy. Sexually transmitted illnesses.
- Lack of physical development. Failure to thrive.
- Social emotional delays. Speech disorders.
- Self harm and suicide attempts.
- Sadness. Anger. Depression. Guilt. Confusion. Fear. Worry.
- Lack of trust.
- Lack of self-esteem.
- Inappropriate sexualised behaviour/sexualised knowledge.
- Frightened appearance. Running away.
- Enuresis/encopresis.
- Tiredness. Becoming withdrawn.
- Acting out behaviour. Aggression. Extreme passivity.
- Inconsistent/bizarre behaviour.
- Abusive towards others.

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- Poor attachments.
 - Poor relationship building. Poor social functioning.
 - Mental health issues and personality disorders. Stress
 - Bullying.
 - Substance misuse.
 - Poor educational achievement.
 - Unkempt appearance.
 - Over protected child
 - Eating disorders. Loss of appetite. Over eating.
 - Personality changes.
 - Talking about having a secret.
 - Covering up. Unhappy to undress.
 - Not seeking medical help.

Signs and symptoms are only clues as to what has happened and need to build up a picture. Just because a child/young person exhibits some of these does not mean they have been abused. Some signs and symptoms are more indicative of one category of abuse rather than another. It will be important for all staff to record any information which may be a sign or symptom of abuse.

Suspicious or Allegations of Abuse. Referring. Reporting.

All suspicions or allegations of child abuse should be recorded as accurately as possible if involving a disclosure of abuse in the exact language of the person giving the disclosure.

All suspicions should be passed directly to the nominated child protection person or their deputy within the home. The designated person will judge whether they meet the significant harm or likely significant harm criteria and, if they do, or there is any doubt, pass these on to the relevant Safeguarding Service as soon as possible and follow this up with a written copy within 24 hours.

Suspicious and allegations of child abuse should be passed to the Safeguarding Team in the area where the alleged abuse has taken place.

Children/young people with non-accidental injuries will require medical attention. This should be arranged through the Safeguarding Service. Staff should use a body map to record injuries that can be seen without asking the child/ young person to remove any clothes. If children/young people tell staff about abuse they will often only give partial or disjointed information, often they will give information over time and sometimes it will not be easy to understand. Staff should record the information as soon as possible and, in the words, it has been given to them without any attempt to summarise or put into their own words. Staff should follow a few simple dos and don'ts:

- Stay calm. Act as though it is OK to talk about anything.
- Take what they say seriously. Be concerned and sensitive.
- Keep an open mind. Children/young people sometimes find it difficult to describe events accurately if they are outside their experience.
- Do not stop children/young people talking unless there is a clear reason.
- Do reassure children/young people you will help them.
- Do not agree to keep secrets. You have to pass this information on. You can reassure children/young people that the information will be dealt with very carefully.

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- Do not ask any closed, direct or leading questions.
 - You may ask a few very general questions if you feel it is necessary.
 - Do not promise the child/young person anything you cannot deliver. You cannot say you will stop them seeing someone or remove the child/young person from home.
 - Do reassure the child/young person that others will also work to keep them safe.

Staff should contact the emergency services if they feel a child/young person is at immediate risk of significant harm from another person.

All concern's involving Harrison Crescent's young people will be reported to the young person's social worker or team leader.

Allegations Against Staff (Including Allegations Against Managers)

If any staff member has or receives an allegation against any member of the Charity they should pass this straight to the nominated person (see above). The nominated person will then judge this against the current Government Guidance and, if required, make a referral to the appropriate Local Authority Designated Officer (LADO). All allegations against staff members even if they contain child protection issues must be referred to the LADO. In the event the allegation is against the nominated person the information should be passed to the Senior Manager.

Staffing Issues

All staff paid and unpaid are subject to the Safe Recruitment Policy and Procedures (see policy). Staff are recruited in line with the Safe Recruitment Policy and Procedures. All staff are to complete an annual enhanced DBS check. All serious disciplinary issues will be reported to Ofsted and if required to the DBS.

Visitors

All visitors to the home and its grounds will be asked for relevant ID. Staff who are concerned or suspicious about ID should contact the employing organisation for further checks. All visitors should sign in and out of the home's Visitors' Book. Any visitor who is not known, or who is not wanted, should be prevented from entering the home and should be asked to leave. Staff should report any concerns to the Registered Manager and they will judge whether to contact the Police or other relevant body.

Staff Training, Supervision and Support

Staff will receive a full induction, ongoing training and regular supervision as well as appropriate support as laid out in the Charity's policies.

Raising a Concern (Whistle Blowing)

Staff are encouraged at all times to report any concerns they may have to the nominated person by the (Whistle Blowing) Raising A Concern Policy (see policy). Concerns about the nominated person should be passed to the Senior Manager. Concerns about the Senior Manager should be passed to the Director. Concerns about the Director should be passed to Ofsted.

Complaints

All complaints about anything to do with the Charity, from any person within or outside the Charity, should be dealt with by using the Complaints Policy and Procedure, (see policy).

Health and Safety

There is a separate Health and Safety Policy (see policy).

Risk Assessments

Harrison Crescent will have a completed risk assessment signed by the Registered Manager for the following areas.

- All children/young people will have been risk assessed and this will be on their file.
- All activities other than every day activities.
- All supervised trips and holidays away from the home.
- Any other out of the ordinary activity such as building work or refurbishment, etc.

Risk assessments that involve residents or staff taking part in activities which are sub contracted to other organisations should include checks on their organisation staff qualifications, risk assessments and insurance details.

Safeguarding and Challenging Behaviour

The home does deal with children/young people with a range of challenging behaviour. Staff are given training and support to deal with these issues. Any physical intervention used under these circumstances should be reported to the Registered Manager immediately. Harrison Crescent has guidelines for consequences which describe appropriate and inappropriate consequences. It is normally expected that staff will deal with challenging behaviours of children/young people themselves within the home environment. However, in situations where they are unable to safely contain violent or dangerous behaviour, they should call the Police for assistance. Children/young people who bring dangerous implements or weapons back that they will not hand over might also mean that staff have to use the Police to intervene in order to maintain safety.

Notifications

Staff should be familiar with the Children's Homes Regulations notifications requirement contained Schedule 5 and act upon these.

Care Planning

The Charity has a policy of having a Care Plan for every resident which outlines the care package. These are updated regularly and are in line with the Quality Standards.

Vulnerable Groups

The Charity is committed to its Equality and Diversity Policy.

Working with Families

Any staff visits to meet the families of residents would be risk assessed.

Absences

Young people/children who are absent without permission must be reported missing using the Missing from Home Protocol in line with their Placement Plan. Children/young people missing from the home are extremely vulnerable and this situation must be taken seriously and acted upon.

Bullying

The Home has a Countering Bullying Policy and the Charity has an Anti-Social Behaviour Policy which includes bullying (see policy). The policy outlines a zero-tolerance approach to bullying.

Safe Working Practices /Code of Behaviour

1. Lone Working

Lone working is required at the home. However, staff should not spend excessive amounts of time alone with young people/children away from others. Meetings with individual children/young people should be avoided or take place within sight of others. If privacy is required, the door must remain open and other staff must be aware of the meeting. When on duty alone staff must not have individual meetings with children/young people. All individual meetings must be recorded in the relevant files.

2. Physical Contact with Children/Young People

Staff should give physical contact when appropriate and if the young person/child is happy for the contact or has given permission. Appropriate contact might be to comfort a distressed young person/child or to give medical attention, or as a friendly and caring gesture. Contact such as this should be recorded if it is significant in any way. Play fighting or any contact designed to provoke a reaction would not be appropriate. No sexual contact is allowed. No contact is allowed to punish or chastise a young person/child in any way. Hugging may be appropriate from time to time. Kissing may only be appropriate if culturally appropriate. Young people/children should be encouraged to look after their own personal hygiene.

3. Contact with Young People Away from the Workplace

Staff should not give young people/children details of their home address or telephone numbers or allow young people/children to visit their home. Staff should not meet young people/children out of work hours, except for organised and sanctioned activities. Staff should not take young people/children in a car alone without the Registered Manager's permission. Staff should not store young people's/children's numbers on their personal mobile phone. Staff should not talk to young people/children via personal social network sites or email. Staff should not allow young people/children to use their personal social network sites.

4. Staff Sharing Personal Information

Staff should not share any personal information of a sexual nature with young people/children or any other information that may be seen to cross appropriate professional boundaries.

5. Role Modelling

Staff should not show favouritism or develop "special" relationships with young people/children. Staff should allow young people/children to have privacy in their rooms and only enter after knocking and being asked to enter. Time spent in a young person's/child's room should be recorded. Staff should be sensitive to the needs of young people/children at all times. Staff should talk to young people/children about sex and sexuality when appropriate and record this. Staff should refer young people/children to appropriate agencies for more in-depth information about sex and sexual health issues. Staff should dress in a modest fashion and should present themselves as clean and smart. Staff should never leave young people/children alone in the home and should never give out any keys to them, apart from their own bedroom key. No alcohol or illegal substances are allowed in the home unless the Registered Manager allows a small quantity of alcohol for the purpose of an appropriate celebration. Staff should not consume alcohol or recreational drugs in the 12 hours prior to working. Staff should avoid inappropriate practical jokes and food fights. Staff should not take photographs of young people/children on any of their personal equipment. No photographs of young people/children should be taken with them being inappropriately dressed. Staff should not allow any 18-certificate material into the home and should not access any on the home's computers. Staff should not use any inappropriate

language or allow any inappropriate language to go unchallenged. Staff on call should not drink alcohol. Staff receiving inappropriate attention from any young person/child should record this.

6. Loans and Gifts

Staff should not give any personal loans or gifts to young people/children. Staff should discourage young people/children or their families from giving gifts to them. If a gift is received it should be declared as soon as is possible to the Registered Manager and may have to be returned. See Gift Policy.

7. Use of Authority

Staff should use their authority with care and good professional judgment. Staff should recognise that as adults we are in a position of considerable power over often vulnerable children/young people and should act with respect and consideration at all times.

8. Door Alarms

The home is fitted with door alarms to alert staff when children/young people leave their bedrooms at night.

Conduct of Staff

Staff will be made aware of the work of the Disclosure and Barring Services (DBS) at induction. They will be made aware of the requirement for managers to report to DBS and situations where staff are dismissed because of a harm issue. Staff need to understand that if their behaviour away from work causes a risk to any children/young people (including their own), or harm to any children/young people, then the Charity will take appropriate action to discipline or dismiss the member of staff. See Professional Boundaries Policy.

Safeguarding Procedures

Schools, Children & Family Wellbeing Service

All staff within the Schools, Children & Family Wellbeing Service have contact with children, young people and families in the community and through schools covering a large geographical area served by many different Local Authorities (see contact details below). These Safeguarding Policies and Procedures are used by Catholic Care's school-based staff. However, each school has their own Safeguarding Policy and Procedures and any referrals made from within the school will be via their own individual procedures.

When Catholic Care's staff working in the schools receive information that indicates "there are reasons to suspect that a child is suffering/is likely to suffer significant harm" (1), they must ensure that the information is shared with the statutory services, e.g. Police or Social Care, who have a duty to undertake assessments and investigations where there are definite child protection concerns (2). The staff member will initially discuss their concerns with the designated person in school prior to a referral being made to the Police or Social Care. The staff member also supports and assists their schools on matters relating to safeguarding.

If appropriate the staff member will liaise with the Social Care Team within their own geographical area and any role for them then be identified and agreed with all parties involved. Regular feedback on work undertaken will be shared with the Social Care Team and the staff member's role will be reviewed regularly. All safeguarding issues are discussed in supervision with the Line Manager.

A central database, located on the Cloud, collates details of all individual cases involving Safeguarding.

Contact Details for Social Care

Leeds: Children's Social Care 0113 3760336 Working hours or 0113 5350600 outside of working hours
<https://www.leeds.gov.uk/children-and-families/keeping-children-safe>

Bradford: Children's Social Care 01274 435600
<https://www.bradford.gov.uk/children-young-people-and-families/safeguarding-children/safeguarding-children/>

Calderdale: Children's Access Point 01422 88000
<https://safeguarding.calderdale.gov.uk/children-and-young-people/>

Kirklees: Children's Social Care 01484 456848
<https://www.kirkleessafeguardingchildren.co.uk/>

North Yorkshire: Children's Access Point 01609 780780
<https://www.northyorks.gov.uk/safeguarding-children>

Wakefield: Children's Access Point 0845 8503503
<https://www.wakefield.gov.uk/schools-and-children/safeguarding>

(1) Children Act 1989 Section 27 (2) Working Together to Safeguard Children HMSO 2019

Safeguarding Procedures

Adult Services

We aim to provide resources for people that are safe and secure and free from abuse of any kind. We adhere to national standards on safeguarding adults which give evidence on how to protect adults at risk from abuse.

At Catholic Care we take all allegations seriously and our policy and procedures ensure that we have prompt methods for alerting, reporting, investigating and managing their protection.

Service users need to feel they are being properly protected, listened to and that the outcome is just. They should not feel they are under threat of retribution or made to feel they should withdraw their allegation.

What should you do if you suspect, or if you have witnessed an adult at risk being abused?

- The person should be listened to and taken seriously. If an individual discloses abuse to you then you need to inform them that you have to pass this information on in accordance with these procedures.
- Only ask the individual, suspected of being abused or disclosing to you, sufficient questions to determine whether something has happened. These questions should be asked in a safe and private setting.
- If you think the person may be at immediate risk of harm you should contact the Police without delay.
- Contact your Line Manager as soon as possible and within one working day, where there is an immediate risk to someone your Manager should be contacted straight away. Your Manager will take your concerns seriously; tell them you have concerns that might be adult abuse. A decision will then be made as to whether the situation needs to be raised as a safeguarding issue.
- If you feel that your Line Manager is not taking your concerns seriously, you may contact the Service Manager or Director direct or use the Charity's Raising a Concern (Whistle Blowing) Procedure.
- Ensure that the individual and/or others are not in immediate danger. If they are in danger discuss what immediate action is needed with your Line Manager.
- Local Adult Protection Procedures will be followed. A social worker may be appointed to undertake the investigation. It will be your Line Manager or the Service Manager of your service who will contact the relevant others:

Bradford: www.bradford.gov.uk

Calderdale: www.calderdale.gov.uk

Kirklees: www.kirklees.gov.uk

Leeds: www.safeguarding.adults@leeds.gov.uk

North Yorkshire: www.northyorks.gov.uk

Care Quality Commission (CQC)

Care Manager / Social Worker / Care Co-ordinator

Contracts Compliance

- The log sheet should be completed immediately on notification from any source. Where comments include 'under investigation', an update will be required once the investigation is completed.
- **Keep written records at all times.** An incident form should also be completed. This should include what happened, to whom it happened, where and when (date and time). Also record details of any suspected perpetrator; being mindful of confidentiality. Records should be signed and dated.
- The victim will be offered support both from Catholic Care and external agencies as appropriate. They must not feel abandoned or rejected by staff.
- The person accused of abuse will also be offered support as appropriate.
- If appropriate an attempt will be made at reconciliation between the parties concerned.

There will be an annual review of the effectiveness of safeguarding and protection from abuse policies and procedures and their implementation. This policy and procedure review will seek to identify and address disincentives to reporting concerns.

Websites of the Relevant Authorities

Wakefield Council

<https://www.wakefield.gov.uk/health-care-and-advice/adults-and-older-people-services/safeguarding/safeguarding>

North Yorkshire County Council

<https://www.northyorks.gov.uk/safeguarding-vulnerable-adults>

Kirklees Council

<https://www.kirklees.gov.uk/beta/adult-protection/report-abuse.aspx>

Calderdale Council

<https://www.calderdale.gov.uk/v2/residents/health-and-social-care/safeguard-adults>

Bradford City Council

<https://www.bradford.gov.uk/adult-social-care/adult-abuse/report-adult-abuse/>

Leeds City Council

<https://www.leeds.gov.uk/adult-social-care/worried-about-someone/tell-us-about-a-vulnerable-person>

Safeguarding Procedures

Community Sponsorship

Dealing with Allegations of Abuse and Reporting Concerns

The people we care for and support need to feel they are properly protected, listened to and that the outcome is just. They should not feel they are under threat of retribution or made to feel they should withdraw their allegation.

At Catholic Care, we take all allegations seriously and our policy and procedures ensure that we have prompt methods of alerting, reporting, investigating and managing such allegations.

What should you do if you suspect or, if you have witnessed a child or an adult at risk of being abused?

- The person should be listened to and taken seriously. If an individual discloses abuse to you then you need to inform them that you have to pass this information on in accordance with these procedures.
- Only ask the individual, suspected of being abused or disclosing to you, sufficient questions to determine whether something has happened. These questions should be asked in a safe and private setting.
- If you think the person may be at immediate risk of harm you should contact the Police without delay.
- Contact Catholic Care's Safeguarding Lead, Rachel Wilkinson, as soon as possible and within one working day where there is an immediate risk to someone. Your appointed Community Sponsorship Group Safeguarding Lead should also be contacted straight away. Your concerns will be taken seriously; tell them you have concerns that might be child or adult abuse. A decision will then be made as to whether the situation needs to be raised as a safeguarding issue.
- If you feel that Catholic Care's Safeguarding Lead is not taking your concerns seriously, you may contact Catholic Care's Director direct or use the Charity's Raising a Concern (Whistle Blowing) Procedure.
- Ensure that the individual and/or others are not in immediate danger. If they are in danger discuss what immediate action is needed with your Line Manager.
- Local Adult or Child Protection Procedures will be followed. A social worker may be appointed to undertake the investigation. It will be Catholic Care's Safeguarding Lead who will contact the relevant others.:

Additional information and guidance on safeguarding can be found through the following:-

Catholic Care Designated Lead:

Rachel Wilkinson
rachel.wilkinson@catholic-care.org.uk
Tel: 0113 3885400
Mobile: 07739 975008

Local Police Safer Neighbourhood Team:

Please contact the local Police Inspector
for your area

Refugee Council Volunteer Co-ordinator for your area.

The Local Authority for your area.

Catholic Safeguarding Advisory Service:
www.csas.uk.net
e-learning

- The log sheet should be completed immediately on notification from any source. Where comments include 'under investigation', an update will be required once the investigation is completed.
- **Keep written records at all times.** An incident form should also be completed. This should include what happened, to whom it happened, where and when (date and time). Also record details of any suspected perpetrator; being mindful of confidentiality. Records should be signed and dated.
- The victim will be offered support both from Catholic Care and external agencies as appropriate. They must not feel abandoned or rejected by staff.
- The person accused of abuse will also be offered support as appropriate.
- If appropriate an attempt will be made at reconciliation between the parties concerned.

There will be an annual review of the effectiveness of safeguarding and protection from abuse policies and procedures and their implementation. This policy and procedure review will seek to identify and address disincentives to reporting concerns.

SAFER RECRUITMENT PROCEDURE

Expectations of Volunteers

We expect all Catholic Care volunteers to work within the Charity's values; treat colleagues and the people we care for and support the way they want to be treated; to create an attitude of respect and dignity for all and, to remember that working as a team depends on trust which has to be built through open and honest communication.

General Statement

Catholic Care will seek to comply with these general principles:

- Ensuring there is an accurate role description and person specification in place which clearly states the main duties and responsibilities of the post.
- By way of an application form obtain and check comprehensive information from applicants, taking up and satisfactorily resolving any discrepancies or anomalies.
- Obtain and verify 2 character references to help assess an applicant's suitability to work.
- Have a face to face interview that explores the candidate's suitability for the post.
- Verify the successful applicant's identity.
- Undertake a disclosure and barring check via DBS as appropriate.

When is a DBS appropriate?

A DBS is required where hands on support, including befriending, is provided to the family. This can only be requested by the Project Lead. Any family support must be under the direction of the Project Lead, Family Welfare and Education Leads only.

An Enhanced DBS check with barred check list is required for child workforce only. The adults arriving through Community Sponsorship do not require the volunteers to have an Enhanced DBS check with barred list for adult workforce., unless the adult is elderly, ill or disabled and receive care. However, if the support provided by the volunteers to the adults as described above does not extend beyond teaching, advising or guiding, and is less

frequent than one support visit per week or four per month, then an Enhanced DBS is not required.

Roles requiring Enhanced DBS check with barred list for child workforce only:

- Family Support
- Project Lead
- Family Welfare Lead
- Safeguarding Lead / Team
- Education Lead / Team

Roles requiring basic check only:

- Chair of Meetings
- Secretary
- Finance Lead
- Fundraising Lead
- Finance & Fundraising Team
- Accommodation Lead / Team
- Employment and Benefits Lead / Team

Training

All volunteers will receive comprehensive training before the refugee family arrives including:-

Cultural Training	}	via
How to be a Community Sponsor	}	RESET UK

Level 1 Safeguarding Training - provided by Catholic Care on a face to face basis.

Catholic Safeguarding Advisory Service Safeguarding Training - available as e-learning

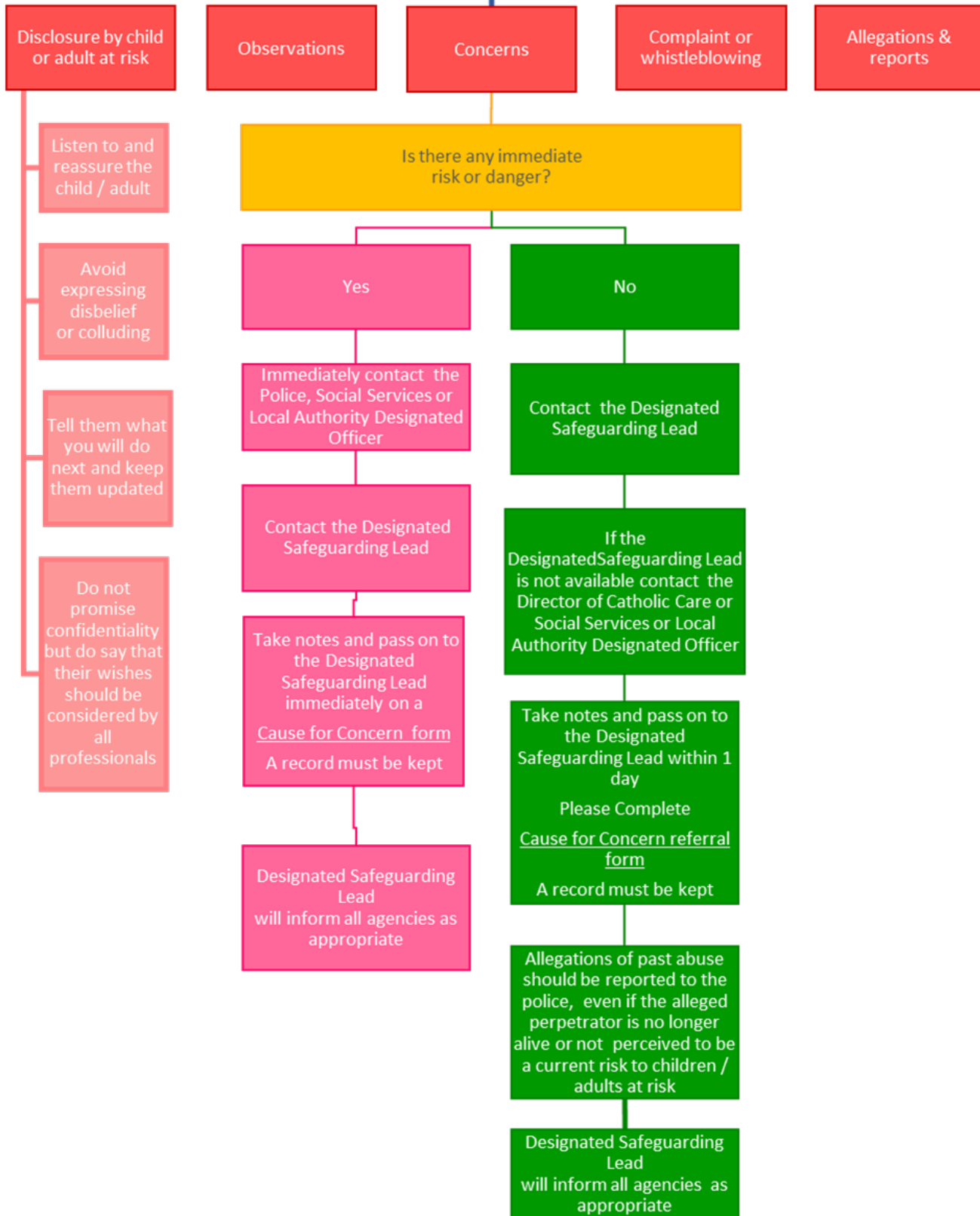
Induction Training - provided by Catholic Care

Lone Working

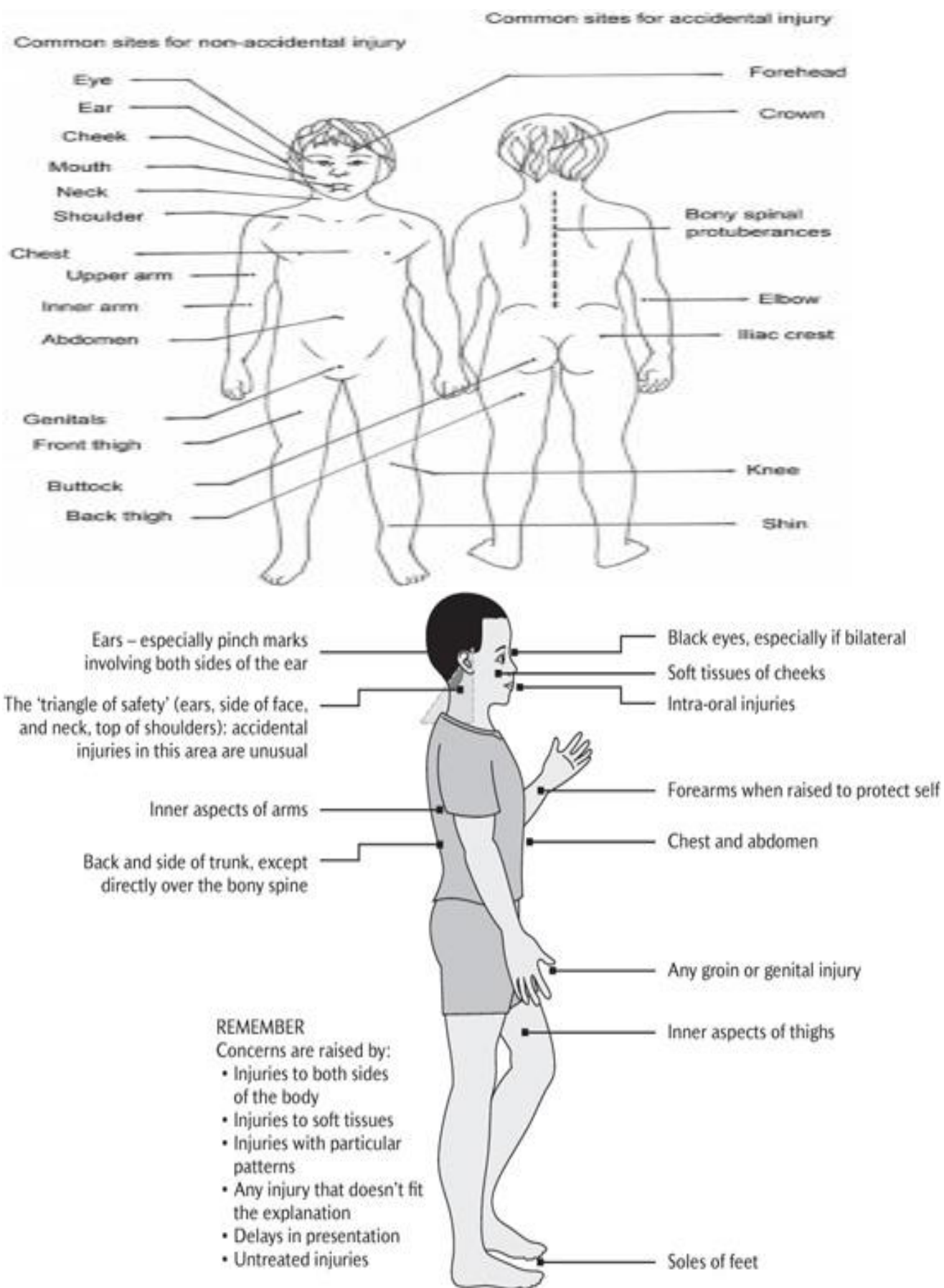
At the outset volunteers are not permitted to lone work when in contact with the family and must always work in pairs. After a minimum period of at least 2 months this can be reviewed and risk assessments undertaken which will include detailed feedback from the group, review of daily reporting logs and any other ongoing engagement between the Lead Sponsor and the group. If experience to date suggests that the No Lone Working Policy is clearly the right one for that particular family then it should continue. This applies to all face to face contact with the family including welfare, befriending, ESOL and driving the family members around to appointments, etc.

Allegation of harm of a child or adult at risk including:

- ❖ inappropriate behaviour
- ❖ possible harm caused to a child or adult at risk, or
- ❖ possible crime committed against a child or adult at risk



Typical Abusive Injuries



Cause for Concern Form

This form should be completed when there is cause for concern and given to your Designated Safeguarding Lead as soon as possible.

Details of Adult/Child:	
Name:	
Date of Birth:	
Setting:	

Details of the person reporting concerns:	
Full Name:	
Post and Setting:	

Do these concerns relate to a specific incident/disclosure? If YES, complete Section A.
If NO, omit Section A and move straight to Section B.

Section A:	
Date & time of incident/disclosure:	
Location of incident/disclosure:	
Date this form was completed:	
Other persons present:	

Section B:	
Details of concern/disclosure/incident: (What was said, observed, reported)	
Action taken: (What did you do following the incident/disclosure/concern?)	

Any other relevant information:

Signed:

Date:

For completion by the Designated Safeguarding Lead (DSL)

DSL response:

Action taken by DSL:

Rationale for decision making/actions taken:

Outcome of action taken by DSL:

Follow up action by DSL:

Feedback given to person reporting the concerns:

Checklist for DSL:

- ✓ Concern described in sufficient detail?
- ✓ Distinguished between fact, opinion and hearsay?
- ✓ Child's/Adult's own words used? (Swear words, insults or intimate vocabulary should be written down verbatim).
- ✓ Jargon free?
- ✓ Free from discrimination/stereotyping or assumptions?
- ✓ Concern recorded and passed to DSL in a timely manner?

	Created by:	Date Approved:	Review Due:
September 2014	Safeguarding Lead	3.3.15.	2024
Dates Reviewed: 04/15; 03/16; 07/17; 07/17; 11/17; 09/18; 01/19; 04/19; 07/19; 10/20; 10/21; 10/22; 01/23;			