



# SAFEGUARDING POLICY & PROCEDURE

Lead responsibility for this document is

**Designated Safeguarding Officer (DSO)  
HEAD OF OPERATIONS**

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| <b>Version Control:</b>     | 2.0   |
| <b>Summary of changes:</b>  | Full review to ensure accordance with good practice guidance, prevailing legislation, and statutory frameworks, further to new Designated Safeguarding Officer in post.<br>Summary of changes: <ul style="list-style-type: none"><li>• Updated DSO details</li><li>• Removed hyperlinks that were not working</li><li>• Amended Continuous Renewal Clause and review date to ensure annual review and review when DSP changes</li><li>• Training requirements</li><li>• Updated contact information for external safeguarding reporting</li></ul> |
| <b>Policy Owner:</b>        | Head of Operations  |
| <b>Date of last Review:</b> | February 2022, November 2022, March 2023, October 2023  |
| <b>Next Review date:</b>    | March 2024  |

## 1. Policy Statement

The Kaleidoscope Plus Group (KPG) has a duty of care and is committed to safeguarding and promoting the welfare of children, young people and adults who access our services. We prioritise the provision of a safe and secure environment in which children, young people and adults can thrive and develop and where all aspects of their welfare will be protected. This commitment is demonstrated by the inclusion of safeguarding as a priority within all our policies and procedures. We follow the [six principles of safeguarding](#):

- **Empowerment** - People being supported and encouraged to make their own decisions and informed consent.
- **Protection** – Support and representation for those in greatest need.
- **Prevention** – It is better to take action before harm occurs.
- **Proportionality** – The least intrusive response appropriate to the risk presented.
- **Partnership** – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse.
- **Accountability** – Accountability and transparency in safeguarding practice.

KPG employs a person-centred perspective in which there is a culture of active listening that focuses on achieving outcomes for the child, young person, or adult. Any concerns regarding service users are discussed with them first and their agreement to any action is always sought. Safeguarding decisions must take account of the ability of the individual(s) concerned to give informed consent to any actions proposed and should comply with the Mental Capacity Act 2005 and the Amendment to the Mental Capacity Act 2019.

However, consent is not required if deemed to be in the best interest of the child, young person, or adult, for example, a service user at significant increased risk of harm, suspecting sexual abuse, or fabricating illness. Where there is concern about a potential safeguarding issue, we make all necessary enquiries to make an informed and justifiable decision, in line with the requirements of the Care Act 2014. Moreover, wherever required, we assist partner local authorities in any enquiries around safeguarding issues, wherever it is reasonable and practicable to do so.

Service users are fully supported by our employees and/or external agencies through any process deemed necessary for their health and wellbeing, within the confines of our Confidentiality Policy, which can be found on our internal DMS system. They are helped to keep themselves safe from abuse, including bullying, homophobic behaviour, racism, and sexism.

They are informed of our Data Protection Policy and of their right to be consulted about the disclosure of personal information and the limits of this right. A copy of the Data Protection Policy is available to all service users, with employees always available for discussion.

Information is always provided in a format and language that can be easily understood by service users. We also have a management forum, Team Talks, where we discuss procedures and updates to policy.

## 2. Scope of Policy

We view the function of safeguarding children, young people, and adults as the responsibility of all. Consequently, this policy and procedure applies to: all employees, including sessional workers; volunteers; board and committee members; student placements; agency workers; trainees; and those working for bodies on our behalf.

### 3. Definitions

The definition is taken from the Safeguarding Partnership Board

Abuse is about the misuse of power and control that one person has over another. Where there is dependency, there is a possibility of abuse or neglect unless adequate safeguards are put in place.

Intent is not an issue at the point of deciding whether an act or a failure to act is abuse; it is the impact of the act on the person and the harm or risk of harm to that individual.

### 4. Legislation and Guidance

The following policies, guidance and legislation is relevant to this policy:

- The Children Act 1989, 2004 <https://www.legislation.gov.uk/ukpga/1989/41>
- The Protection of Children Act 1999 <https://www.legislation.gov.uk/ukpga/1999/14/contents>
- Safeguarding Vulnerable Groups Act 2006  
[http://www.legislation.gov.uk/ukpga/2006/47/pdfs/ukpga\\_20060047\\_en.pdf](http://www.legislation.gov.uk/ukpga/2006/47/pdfs/ukpga_20060047_en.pdf)
- The Care Act 2014 <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>
- Human Rights Act 1998 <https://www.legislation.gov.uk/ukpga/1998/42/contents>
- Public Interest Disclosure Act 1988 <https://www.gov.uk/government/publications/the-public-interest-disclosure-act>
- Offences against the Person Act 1861 <http://www.legislation.gov.uk/ukpga/Vict/24-25/100/contents>
- Criminal Justice and Court Services Act 2000 <https://www.legislation.gov.uk/ukpga/2000/43/contents>
- The Sexual Offences Act 2003 [http://www.legislation.gov.uk/ukpga/2003/42/pdfs/ukpga\\_20030042\\_en.pdf](http://www.legislation.gov.uk/ukpga/2003/42/pdfs/ukpga_20030042_en.pdf)
- Mental Capacity Act 2005 <https://www.gov.uk/government/collections/mental-capacity-act-making-decisions>
- The Disability Discrimination Act 1995 <http://www.legislation.gov.uk/ukpga/1995/50/contents>
- The Police Act 1997 Part V <http://www.legislation.gov.uk/ukpga/1997/50/part/V>
- Protection of Freedoms Act 2012 <http://www.legislation.gov.uk/ukpga/2012/9/contents/enacted>
- The Data Protection Act 2018 <http://www.legislation.gov.uk/ukpga/2018/12/contents/enacted>

### 5. General Principles

The Below outlines 'Working Together to Safeguard Children' (2015)

Section 11 of the Children Act 2004 places a duty upon a Local Authority and other named organisations to ensure that, in discharging their function, they have prioritised safeguarding and the welfare of children. KPG complies with the statutory guidance<sup>1</sup> as contracted providers of services for children and families. Our arrangements reflect the importance of safeguarding to us and promoting the welfare of children as specified by the guidance.

Furthermore, the scope of this safeguarding policy goes beyond the remit of the above legislation to cover all our services including young people and adults. This document sets out our policy in relation to child protection and safeguarding young people and adults at risk.

KPG is a charity, and a limited company and operates a registered care home. We provide a range of services to children, young people, and adults.

Due to the age range and the different levels of vulnerability of the people that we work with, three different areas are covered in our approach to safeguarding:

- Child protection (under 18-year-olds) and under 21 if in the 'looked-after' community
- Protection of adults at risk (18 and over)
- Other vulnerable young people (18 and over)

We work across several Local Safeguarding Board areas, each of whom have their own procedure manuals and referral processes which need to be followed by organisations working with children, young people, and adults. Consequently, we recognise the importance of always operating within a multi-agency framework, including the need to share information with partner agencies with the consent of the individual

concerned.

We aim to be consistent with the requirements of each of these safeguarding boards in developing our own internal safeguarding policies and procedures. Reference must be made to the appropriate Safeguarding Board manual in cases where it is felt a referral should be made to Children or Adult Services or their equivalent. In addition, referrals must be made through the process outlined in these documents and comply with any specific requirements outlined in the manuals/ procedures, including those specifically concerned with information sharing.

We are committed to multi-agency working to safeguard and protect children, young people, and adults, including appropriate and effective information sharing and/or multi-agency assessment through initiatives such as: the Common Assessment Framework (CAF), the Family Common Assessment Framework;(fCAF); and Local Safeguarding Board Information protocols. We also work closely with other organisations, when necessary, to address any barriers to an effective approach to safeguarding.

Where a referral to Children's Services is not required but it is evident that a child and/or young person needs a range of support, we contribute to, and as appropriate, lead on CAF fCAF activity to support their safeguarding and wellbeing.

Employees in addition to the above are to refer to the Professional Boundaries Policy, which outlines GDR, conflict of interest, staff wellbeing.

\*Policy note - All staff have a duty of care to one another any acts that directly conflict with the above, may lead to disciplinary action.

## **6. Roles and Responsibilities**

It is the responsibility of all our employees to report any discovered or suspected abuse.

Our Designated Safeguarding Officer is:

**Faye Brecknock, Head of Operations**  
**07813722499**  
[faye.brecknock@kaleidoscopeplus.org.uk](mailto:faye.brecknock@kaleidoscopeplus.org.uk)

Our Designated Safeguarding Deputies are:

**Vicki Fox, Training and Community Engagement Officer**  
**07786515091**  
[vicki.fox@kaleidoscopeplus.org.uk](mailto:vicki.fox@kaleidoscopeplus.org.uk)

**Kevin Whitehouse, Support Services Manager**  
**07970040301**  
[Kevin.whitehouse@kaleidoscopeplus.org.uk](mailto:Kevin.whitehouse@kaleidoscopeplus.org.uk)

If you have concerns regarding someone who works with a child including foster carers and volunteers these should be reported to the Local Authority Designated Officer (LADO) – you are required to familiarise yourself with the process and who to contact. You can do this here: <https://www.sandwellcsp.org.uk/key-safeguarding-issues/allegations-against-stafflado/>

## **Training Requirements**

All employees and volunteers receive mandatory training on safeguarding via the eLearning Portal, Me Learning online training system. All employees and volunteers receive Level 1 and Level 2 safeguarding

training. Employees who have any contact with service users and clients are also required to undertake Level 3 safeguarding adults and children training via this portal.

Safeguarding training is mandatory at induction, and then all undertake regular updates.

All employees eligible for Level 3 training are also required to undertake training via Sandwell Safeguarding Adults Board and Children's Safeguarding Partnership. KPG's People and Culture Team monitor compliance of training completion for all employees. <https://training.sandwellscb.org.uk/>

Please see Appendix A for safeguarding training requirements.

## **7. Communication**

This policy will be communicated effectively to all employees via a range of different media avenues and can be produced in other formats where needed. The policy can be accessed from the KPG Document Management System on demand by all staff.

## **8. Policy Responsibility**

The Designated Safeguarding Officer (DSO) is responsible for ensuring this policy is implemented and monitored.

## **9. Continuous Renewal Clause**

This procedure will be reviewed annually by the organisation to ensure it is in accordance with good practice guidance, prevailing legislation, and statutory frameworks. However, this policy may be assessed before that time as necessary – such as:

- if there are changes in Designated Safeguarding Officer
- if it becomes ineffective
- to reflect substantial changes in practice
- following inspection, as recommended by auditors
- or changes required by law

## **10. Version Control**

This document can only be considered valid when viewed on the KPG Document Management System. If this document has been printed or saved to another location, you must check that the version number on your copy matches that of the document online.

## **Our Corporate Code of Practice**

### **11. Safer Recruitment**

At KPG, we are committed to protecting the welfare of adults at risk and children who use our services. Our safer recruitment practices are key to creating a safe environment for all staff and service users, these are outlined in section 12. These procedures, in addition to our existing hiring process are vital to prevent abuse, mistreatment, and harm.

### **12. Recruitment and selection**

All employees, working directly with children, adults at risk or providing front line services, including volunteers will:

- have clear roles, responsibilities and accountabilities identified for them, captured within job descriptions and person specifications, including a specific mention of safeguarding children, young people, and adults.
- be properly selected through a systematic selection process designed to assess the applicant's suitability and to work with children, young people, and adults at risk. This is done through a robust monitoring process, where applications must disclose unspent criminal convictions or restrictions to whom they can work with.
- Be required to answer questions at interview about their suitability to work with children, young people and adults at risk.
- have been subject to our shortlisting procedures, including the seeking of two references, one to be most recent employer. If an applicant has no work history, references from a school/college/university/social worker would be sought.
- undergo a DBS check, appropriate to the role and will not be employed until this has cleared. Their details are held on Breathe & the DMS. Any changes in regulations in relation to vetting and barring are implemented when required.

Additional information:

- There may be times where there is a need for more frequent updates of a DBS check for staff or volunteers within the 3-year normal update period. This may be initiated due to change in role where there is change in the age of the clients worked with (from adults to children) or disciplinary action.
- All staff are under an obligation to update KPG with information that may be relevant to their DBS status such as current/new criminal convictions or police investigations.
- When recruiting front-line employees or volunteers who have recently resided overseas, employees must ensure that a copy of a recent DBS check (or equivalent) from the country or countries of residence is obtained.
- When the resultant DBS check is positive i.e., cautions, reprimands or any relevant non-convictions, a decision on the suitability for the candidate to be recruited will be made by the DSO in partnership with the Leadership Team after an assessment of risk.
- All staff are directed to this policy and must read within the first 48 hours of employment.

### **13. Induction and Training**

Employees and volunteers who have contact with children, young people, and adults at risk as part of their role will:

- receive training on our safeguarding policies and procedures including recognising and responding to safeguarding issues in their local induction programme.
- are subject to a defined probationary period.

- as part of the approach to employees' development, and through our training programme, receive specific training on safeguarding; child protection; CAF (Common Assessment Framework); and promoting the welfare of children, young people and adults at the required level including the DSO
- have all their safeguarding training recorded and evaluated.
- participate in learning and development training, including all aspects of safeguarding, which is mandatory
- have regular supervision which is recorded and includes safeguarding if relevant to their function.

#### **14. Positive Disclosure & Barring Service Check**

A positive DBS is one where offences have been identified. In cases of a positive DBS the following procedures will be followed:

- The HR Department is responsible for compliance with the DBS, with the DSO leading on any investigation
- Any investigation includes a risk assessment of the individual and work activity to ensure the safety of children and vulnerable adults.
- The DSO is responsible for informing the Local Authority of any positive checks, when necessary, and the person is removed from duties and is responsible for investigation
- The operation of a similar process for existing employees with investigations being processed within the framework of the Disciplinary procedure.
- The DSO may consult with and seek the guidance of the relevant LADO
- The DSO decides whether the applicant can be or remain employed, acting as a volunteer or an external contractor.
- All employees are fully aware of the need to disclose if they are living in the same household where another person is living who is disqualified<sup>2</sup>
- Any individual in post who receives a positive disclosure is removed from duties if they have access to children or vulnerable adults

#### **15. Assessment and Referrals Procedures**

We minimise potential situations of abuse of children, young people, and adults at risk through our assessment and referrals procedures. We conduct comprehensive needs and risk assessments for each of our referrals that covers safeguarding issues. We provide support or care plans that are tailored to individual service users; with their progress being monitored on a regular basis. We also ensure that all our service users have a named case worker, where possible, who works in partnership with them to develop and review their support or care plan. We participate in multi-agency assessment procedures including the CAF.

#### **16. New Developments**

We recognise the need to safeguard and promote the welfare of children, young people, and adults in:

- new service developments
- the refurbishment of existing buildings
- the design and construction of new buildings.

We undertake a risk assessment of a room or building to check its suitability. Furthermore, when designating accommodation, we take all necessary action to minimise risk.

All our employees and volunteers have been issued with an organisational identity badge, which displays their name and a photograph of the individuals. Any external contractor on the project or premises should sign the visitors' book and display identification from their contracted organisation.

All visitors to our premises sign in and out at arrival and departure. Visitors comply with all safeguarding procedures as appropriate. Visitors are never left unsupervised with service users or where sensitive data is stored.

## **17. Monitoring our effectiveness and continuous improvement**

Issues of safeguarding receive continuous attention. We regularly review our practice to support this principle, including monitoring and reviewing the effectiveness of our performance and reporting to our Board. In addition, the Board receive reports on our progress against any strategic goals set for the safeguarding of service users.

We have an open organisational culture focused on organisational learning, service improvement, and identifying and addressing weaknesses in the system. We operate within an environment in which the physical and emotional needs of the child, young person or adult is central to the delivery of, and reflection on, our practice. The results of such considerations are shared with employees and is reflected in our future strategic planning.

We value the input of all our children, young people and adults in the design, delivery and evaluation of our safeguarding policy and procedures, eliciting feedback through formal and informal methods.

## **18. This policy is supported by the following procedures:**

[Procedure A – Safeguarding](#)

[Procedure B – Missing Persons](#)



# SAFEGUARDING PROCEDURE

## 1. If you Suspect or Discover Abuse

- 1.1 It is the responsibility of all employees to report any discovered or suspected abuse. Due to the age range of the children, young people, and adults we work with and the different levels of risk, there are three strands to this procedure and employees must follow the one that is most appropriate
- **Child Protection (child under 18 or under 21 if from the 'looked-after' community)**  
Employees must immediately trigger the Statutory Child Protection Procedures. Protection is a statutory responsibility if there are any indications, or it has been identified that a child under 18 may be suffering from any form of abuse.
  - **Adults at Risk (18 years or over)** employees must immediately trigger the Adult at Risk Safeguarding Procedures if there are indications, or it has been identified that an adult at risk may be suffering from any form of abuse. For more information see <https://www.gov.uk/government/publications/safeguarding-policy-protecting-vulnerable-adults>
  - In **All other cases** the employees must follow our safeguarding procedure. If it involves discrimination abuse you must refer to our Equality, Diversity, and Inclusion Policy.

## 2. Concerns around a Person in a Position of Trust

- 2.1 We place trust in our employees to effectively carry out their duties in the most protective manner. We operate the most stringent checks and balances to ascertain the most competent and trustworthy of employees. We continue our constant vigilance through supervision and ongoing training.
- 2.2 The supervision of employees ensures that the children, young people, and adults using our services receive adequate and appropriate protection and high service standards. We will be extra vigilant in our supervisory role where employees occupy high risk posts or are working in high-risk settings.
- 2.3 Safeguarding is our priority, and we operate a wide range of policies and procedures to ensure protection and harm reduction (Including safeguarding from the possibility of sexual abuse by person/s in a position of trust as defined by the Sexual Offences Act (2003). These are consistent with guidance on allegations against employees setting out how we safeguard children, young people, and adults once an allegation is made through a thorough risk assessment of the individual concerned. In addition, there is a named senior officer with responsibility to investigate and conclude on any allegations against employees, volunteers, or external contractors. Please visit <https://www.sandwell.gov.uk/adult-social-care/safeguarding-adults-1/3> for further advice and guidance.
- 2.4 We fully support any employee or volunteer who is suspended. If the person is not suspended, we safeguard the child, young person, or adult, in particular, and all our employees and users of our services, in general, including the accused employee or volunteer. In the case of an external contractor, the accused person remains off-site throughout the investigation period, a satisfactory conclusion is reached with the contracted organisation.
- 2.5 Employees must never dismiss any disclosure in relation to concerns around a person in a position of trust.

### 3. Concerns about Children

#### 3.1 Vulnerability and Safeguarding

- a. Under the Children's Act (1989), a child in need is defined as being unlikely to achieve or maintain a reasonable level of health or development; or whose health and development is likely to be significantly or further impaired without the provision of services.
- b. The UK Government guidance Working Together to Safeguard Children (2018) identifies four types of child abuse and defines them as:

**Physical abuse** involves hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating, or otherwise causing physical harm to a child or failing to protect a child from that harm. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child

**Emotional abuse** is the persistent emotional maltreatment of a child that causes severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person

**Sexual abuse** involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact including both penetrative or non-penetrative acts such as kissing, touching, or fondling the child's genitals or breasts, vaginal or anal intercourse or oral sex

**Neglect** is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy due to maternal substance abuse

- c. It further defines safeguarding and promoting the welfare of children as:
  - protecting children from maltreatment
  - preventing the 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.

The below information provides a guide on safer ways of working to safeguard and promote the wellbeing of children.

[https://assets.publishing.service.gov.uk/media/5fd0a8e78fa8f54d5d6555f9/Working\\_together\\_to\\_safeguard\\_children\\_inter\\_agency\\_guidance.pdf](https://assets.publishing.service.gov.uk/media/5fd0a8e78fa8f54d5d6555f9/Working_together_to_safeguard_children_inter_agency_guidance.pdf)

- d. When working in a school, if there is a concern about a young person, you must first raise this with the schools DSL, then continue with KPG's reporting procedure,

3.2 All children are vulnerable by nature compared to adults, but some are more critically vulnerable than others. All vulnerable children have one common denominator; they have no reliable social safety networks on hand to depend upon, to adequately manage the risk to which they are daily exposed.

3.3 Child Protection and safeguarding children is the individual responsibility of each person working with children and young people. Responsibility for formally investigating whether a child has been abused lies with Social Care Services and the Police.

- 3.4 Robust systems are in place to make employees aware of children subject to Child Protection. These systems are supported by appropriate training and are subject to regular monitoring to identify and resolve any issues
- 3.5 A child protection issue may come to the notice of an employee in several ways. A child may:
- make a direct allegation
  - make a comment, which seems to suggest abuse
  - have bruises or marks (<https://www.nspcc.org.uk/what-is-child-abuse/spotting-signs-child-abuse/>)
  - display behaviour that suggests the possibility of abuse
- It is to be noted that children with SEND may not be able to verbalise abuse, or understand abuse is taking place. All staff working with children undertake specific SEND training to understand additional needs and vulnerabilities.
- 3.6 The procedure that must be followed in all child protection cases is outlined below. The focus of any action must be on the welfare of the child as a possible victim of abuse. Employees must always respond to child protection enquiries. Employees must also be alert to the concerns of the child and respond to any disclosure of potential abuse to the child. Employees must never dismiss any disclosure or ignore the concerns of the child. If abuse is suspected, gather further information using open non-leading questions regarding the nature of the abuse, people, places, times etc. Never promise confidentiality, thank them for disclosing and tell them who the information will be shared with. For further guidance please visit <https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2>
- 3.7 If an employee has concerns about a child, employees must complete an incident report, and list the reasons for their concerns. They must write down exactly what the child said and the details of any significant marks or observed behaviour, noting names, dates, times, and witnesses who either heard what the child said, or saw the marks, or noticed the behaviour. This must be done as soon as possible and form part of the incident report.
- 3.8 Employees must discuss their concerns with their line manager as soon as possible unless they are either unavailable or the allegation relates to their line manager. In either case, the concern must be discussed with another member of the Operational Management Team or Leadership Team. The concerns must be raised directly with children's services following the appropriate Local Safeguarding Board referral procedures. **Never delay action where it is necessary for the immediate safety of a child. Dial 999 if there is an immediate risk.**
- 3.9 The line manager must consult with the DSO. If the allegation relates to the DSO, they must consult with the CEO.
- 3.10 Any further action and the person taking the action must be recorded on the incident log and the care/support plan updated. Even when no action is taken, a written record must be placed in the log and the support plan updated. This is saved in a secure electronic file, accessed by the DSO, CEO, and deputies.
- 3.11 The line manager must refer to the relevant local authority's Children Services if a child protection issue is identified as soon as possible on the same day, following the agreed Local Safeguarding Board referral procedures. If a telephone referral is made this must be followed up in writing within 48 hours.

- 3.12 All employees can make high quality referrals to the Multi-Agency Safeguarding Hub (MASH) when appropriate and required. They can all participate in multi-agency meetings and forums to consider individual children.

A referral to MASH can be made without consent of parents if certain thresholds of risk are reached. A parent should be given the opportunity to consent and informed that the referral is being made. If there is immediate risk of harm to a child, you are to keep the child in the venue and no not let them leave. You are to call 999 and inform your DSO or member of the leadership team immediately

- 3.14 Concerns must be passed to the local authority's Children Services/Social Care service where there is disagreement over the level of concern. They must follow the approved Local Children Safeguarding Board's referral procedures, as soon as possible but on the same day. A telephone referral must be followed up in writing within 48 hours.

The above procedure aims to protect the welfare of all children from abuse occurring from adults, organisations, and other children. Reporting child on child abuse incident reporting remains the same, as any other abuse, this should be discussed with your DSO immediately upon disclosure or suspicion.

#### 4. Procedures in Relation to Safeguarding Adults at Risk (Aged 18 and over)

It is important to note that adults at risk are deemed more vulnerable than an average person. Many of our service users who are over 18 are adults in a vulnerable situation, for example, homeless, experiencing domestic abuse, however this does not mean they are necessarily at risk. If they are vulnerable adults, they are deemed priority need by the Local Authority

- 4.1 The Care Act 2014 (Section 42) defines an adult at risk as someone who is aged 18 or over who
- has needs for care and support, whether the authority is meeting any of those needs or not
  - is experiencing, or is at risk of, abuse or neglect
  - is unable to protect themselves as a result, or the risk, of abuse or neglect.

A protection issue may come to the notice of an employee in several ways. The person may:

- make a direct allegation
- make a comment, which seems to suggest abuse
- display behaviour that suggests the possibility of abuse.

- 4.2 Employees must complete an incident report and list their concerns and reasons. The employee must write down the exact words of the adult at risk and the details of any significant marks or behaviour, which were observed, noting names, dates, times, and witnesses. This must be done as soon as possible and form part of the incident report.
- 4.3 Employees must discuss their concerns with their line manager as soon as possible. If unavailable or the allegation relates to the line manager, the concern must be discussed with another member of the Operational Management Team or Leadership Team. If this delays proceeding, concerns must be raised directly with Social Care/Adult Care services, using the appropriate Local Safeguarding Board referral procedures. **Never delay action where it is necessary for the immediate safety of an adult at risk. Dial 999 if there is an immediate risk.**
- 4.4 The line manager must consult with the DSO. If the allegation relates to the DSO, they must consult with the CEO.
- 4.5 Any further action and the person taking the action must be recorded in the incident log and the care/support plan updated. A written record must be placed in the log and the support plan updated, even when no action is taken.
- 4.6 If 'an adult at risk' safeguarding issue is identified, the manager must make a referral to the relevant local authority via the approved Local Safeguarding Board's referral procedures as soon as possible on the same day. Any telephone referral must be followed up in writing within 48 hours.

#### 5. Maintaining Records, Monitoring and Reporting

- 5.1 KPG has a corporate responsibility to maintain our records and record keeping systems in accordance with the regulatory environment. The person with overall responsibility for this is the DSO.
- 5.2 We adhere to the basic rules of
- all personal information is kept in secure, lockable storage.
  - personal information held on computer systems is password protected. Information is never left on screen if the computer is unattended.
  - files containing personal or sensitive information are never left on the desks unattended
  - sensitive personal information is only sent externally by e-mail, if there is no other course of action and is always password protected.

- when data is carried on removable data carriers, it is encrypted using appropriate software.
- All data storage is fully compliant with GDPR legislation,<sup>3</sup> and the Data Protection Policy should be referred to for further guidance

## Incident Reporting

- 5.3 Employees must complete an incident report listing their safeguarding concerns and reasons. They must use the exact words of the person and the details of any significant marks or observed behaviour, noting names, dates, times, and any witnesses as soon as possible to form part of the incident report.
- 5.4 The incident report must be shared with their line manager or with another member of the Operational Management Team or Leadership Team as soon as possible and within 12 hours of the incident occurring. The manager must consult with the DSO. If, however, the allegation relates to the DSO, they must consult with the CEO. **Never delay action where it is necessary for the immediate safety of the child, young person, or adult.**
- 5.5 The incident report forms are retained in the incident log which are kept by the DSO. A quarterly review and sample audit of incident log files are carried out to assess the effectiveness of this policy and procedure and its implementation. It also seeks to identify and address any disincentives to reporting concerns. The practice of this policy is monitored locally by department and Service Managers/Leads at Safeguarding and Governance meetings.
- 5.6 Any further action and the person taking the action must be recorded in the incident log and the support plan must be updated whether action was taken or not.
- 5.7 The line manager or senior manager must ensure that all incidents are investigated as soon as possible. They must ensure the relevant authority is notified of the allegation/incident and its initial investigation within 12 hours, passing on all relevant information to them.
- 5.8 The manager must take any necessary immediate preventative action if a child, young person, or adult is at immediate risk of abuse, maintaining confidentiality where possible. They must also consider any required further action to prevent future cases of abuse, together with the needs of the victim, alleged perpetrator, and others involved. All staff are aware they must contact the LADO if a child meets the threshold.
- 5.9 Employees must be willing and able to participate in multi-agency meetings and forums. In addition, they contribute to Serious Case Reviews (SCR). We will comply with the recommendations or instructions of the SCR in terms of completing actions, gathering evidence, embedding recommendations, and disseminating learning.

## Information Sharing

- 5.10 Information sharing is vital to safeguarding and the promotion of children's, young people's, and adult's welfare. A key factor identified in serious case reviews has been a failure by practitioners to record information, to share it, to understand its significance, and then take appropriate action. For further guidance, visit [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1062969/Information\\_sharing\\_advice\\_practitioners\\_safeguarding\\_services.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1062969/Information_sharing_advice_practitioners_safeguarding_services.pdf)
- 5.11 Individuals need to feel confident that information that is personal to them and their families will be kept safe and secure and will not generally be shared except on a need-to-know basis. It should be made clear that the child, young person, or adult's welfare is paramount and therefore information

will be shared if there are protection or safeguarding concerns.

- 5.12 All employees have access to our guidance on information sharing in line with their Local Safeguarding Board's procedures and are aware of their personal responsibilities and those of our organisation.
- 5.13 We share information about incidents or potential incidents on a need-to-know basis, in compliance with the Data Protection Act 2018.

## **Disclosure, Complaints, and Allegations Against KPG Employees or Board Members**

Allegation refers to a claim to reasonably suspect that a staff, board or committee member has acted in a way that has harmed a child, young person or adult at risk, or put a child, young person or adult at risk, in possible serious harm.

- 6.1 Any child, young person, or adult using our services may disclose to an employee any abuse they may be suffering anywhere in their lives. Employees are vigilant in their support and will initiate appropriate procedures if they have concerns that a child, young person, or adult may be at risk of harm. Further guidance is available in our Domestic Abuse Policy & Procedures
- 6.2 The parent/carer of the child or young person in such cases can only be informed of the accusation under the authority of the DSO. The safety and confidentiality of the child or young person is paramount in all cases.
- 6.3 The DSO informs the Designated Board Member for Safeguarding and the respective LADO following an initial investigation. The DSO has lead responsibility for liaison with other agencies and to support the child/young person/adult and their family throughout the process.
- 6.4 Any child or young person using our services, or anyone acting on our behalf, may complain about any aspect of the service received, through our Complaints Procedure. All complainants have a right of appeal to an independent person/agency if dissatisfied with the way a complaint is handled. The Public Interest Disclosure Act protects whistle-blowers making disclosures in the public interest and allows for action in the event of any unfair dismissal of the whistle-blower (refer to Whistleblowing policy)
- 6.5 Any allegation against employees must be reported to the DSO. If, however, the allegation relates to the DSO, it should be reported to the CEO and advice and guidance is available from the LADO.
- 6.6 For any allegation against employees, the DSO/CEO must submit all allegations and findings in a report to the Board. The Designated Board Member for Safeguarding will receive a copy of the report.
- 6.7 If the allegation relates to the Designated Board Member for Safeguarding, it is discussed with the Chair of the Board of Trustees. The DSO will liaise with the LADO in these cases.
- 6.8 It may be necessary to inform the police and suspend the employee/Board member from any involvement with children, young people, and adults at KPG. This action is intended to safeguard the welfare of children, young people and adults and does not assume the guilt of the employee/Board member.
- 6.9 Our employees fully support children, young people and adults through any process deemed necessary for their health and wellbeing. Support is provided to any employees/Board members suspended from duty following an allegation.
- 6.10 We support all those involved, using the good practice guidelines on procedures for managing allegations against people who work with children and young people. We notify the LADO of any instance of an employee being dismissed from duty because of harming or posing a risk to children and young people.
- 6.8 We also consider the implications for the welfare of children, young people, and adults when a poor standard of care, rather than abuse, is offered. Concerns may be raised about the suitability of employees to care for children, young people, and adults, and in such cases Social Care Services can advise.



## **7. Dealing with specific identified types of abuse**

- 7.1 Section 11 of the Children’s Act 2004 lists the types of abuse that safeguarding action may be needed to protect children from. These are:

|  |  |  |
|--|--|--|
| Neglect  | Physical Abuse   | Sexual Abuse   |
| Emotional Abuse  | Substance Misuse   | Domestic Abuse/Violence  |
| Child Sexual Exploitation & trafficking  | Radicalisation and/or Extremist Behaviour                              | Teenage Relationship Abuse   |
| Female Genital Mutilation  | Forced Marriage  | Modern Slavery   |
| Fabricated or Induced illness  | Poor Parenting (particularly in relation to babies and young children) | Bullying, including Online Bullying and Prejudice-Based Bullying                                 |
| Gender-Based Violence/Violence Against Women and Girls   | The Impact of New Technologies on Sexual Behaviour (e.g., sexting)     | Issues that may be specific to a local area or population (e.g., gang activity & youth violence) |
| Other issues not listed here but that pose a risk to children, young people, and vulnerable adults |  |  |

## **8. Communication**

- 8.1 Consideration of the Safeguarding Policy and Procedures is part of all employees’ induction and training, with all employees having access to it. All employees must comply with the policy as indicated by KPG’s “Read and Sign” record system on Breathe.
- 8.2 Service users are informed of this policy during their induction into the relevant service, with a copy being available to them on request. They are encouraged to discuss this policy with employees if they wish.
- 8.3 Safeguarding is a standard agenda item in management meetings, local service meetings, and Board meetings to ensure safeguarding is at the forefront of everything we do. This will ensure that voices will be heard but will also influence how we deliver services and any future service developments.
- 8.5 Any safeguarding concerns/issues or missing person logs will be recorded in the handover document and followed up by the person on shift.

## **9. Compliance with Regulatory Bodies**

- 9.1 KPG is compliant with all the requirements of the regulatory bodies with which we are registered. We ensure that all employees and volunteers, where required, hold, and maintain registration and/or accreditation with the appropriate professional body. All employees know why, when, and how to report safeguarding incidents and concerns to regulatory bodies.

## **MISSING PERSONS PROCEDURE**

Where appropriate, KPG expects all staff to emphasise the importance of keeping in touch with service users to minimise the risk of prolonged periods of absence.

### **1. Definition**

- 1.1 KPG would consider a child, young person or adult is missing when
  - they are absent from the place where they ought to be and their whereabouts is unknown.
- 1.2 KPG would consider a child, young person or adult is missing when any or all the points below have been identified
  - they have been absent without contact from the service for an unusual period of time
  - the reason for their absence is unknown
  - they are vulnerable
  - other risk factors are present.

### **2. Basic Minimum Practices**

- 2.1 KPG will inform all new service users about the action that will be taken if they go missing. This will be completed when the service user joins the service and will be included in their welcome pack.
- 2.2 In our residential and independent living schemes this will link to the resident's responsibility for ensuring they reside at the property, and they notify KPG if they are going away.
- 2.3 Staff will encourage service users to keep in regular contact with them or the service. Good levels of contact with a service user will assist employees to be able to recognise indicators that a service user is not coping well and needs extra support and services to continue their move towards independence in a safe manner.
- 2.3 Staff should establish regular routines and patterns of behaviour of service users and keep this in their records.
- 2.4 It also needs to be made clear to the service user that an employee of KPG may enter the service user's accommodation after a certain amount of time to check for information. This includes checking personal effects, or web history if there is a safety concern.

### **3. Data Protection Permission**

- 3.1 KPG employees must ensure that the 'Privacy Notice for Service Users' permission forms are in the service user's file. This will ensure KPG has permission to discuss details with other agencies as applicable.

### **4. What to do Before Confirming that a Service User is Missing**

- 4.1 Employees should take the following steps before confirming that the service user is missing:
  - Try to contact the service user
  - Check the person's care/support plan, contact notes, or other relevant sources to see if the person is at a prearranged meeting or appointment.
  - Make all appropriate enquiries regards the whereabouts of the service user including speaking with other service users at the service that might be friends or neighbours, if appropriate, to see if they have been informed of the service user's whereabouts
  - Contact next of kin, known friends, family, associates, appropriate locations such as local hospitals and the local police custody office.
  - A full search of the buildings and grounds should be organised immediately, if appropriate.

- 4.2 At this point, if the service user's whereabouts cannot be identified, the most senior employee on duty at the service should be informed. All stages of the missing person concerns and action taken must be logged and documented.

## **5. Identifying a Missing Child under the Age of Sixteen**

- 5.1 In the event that a child cannot be located, and the parent/carer has any concern about the whereabouts or safety of the child, or that the child may pose a risk to others, there should be no delay in calling the Police and reporting the child as missing.
- 5.2 When a child is missing, the parents/carers should make reasonable efforts to locate the child before calling the Police. Parents/carers should complete the following tasks outlined below prior to calling the Police, unless there is a reasonable belief that the child is at risk of harm or is especially vulnerable. Parents/carers may need Police support if they are very distressed or otherwise unable to undertake enquiries.
- 5.3 In the event that a child cannot be located, and where it is safe to do so, basic steps taken to locate and establish wellbeing might include:
- Search the premises carefully including bedroom/flat/outbuildings/vehicles
  - Contact known friends and relatives where the child may be
  - Visit locations that the child is known to frequent
  - Attempt to contact the child on the telephone, via text or social media
  - If applicable checking with the nursery or school
- 5.4 Failure to report a missing child to the Police by those with parental responsibility or delegated responsibility could be considered as a safeguarding concern which may need further assessment.
- 5.5 Anyone who has care of a child in a location unknown to those with parental responsibility should also do what is reasonable to safeguard and promote the child's welfare. They should inform the Police and the parents/carers of their whereabouts and safety. If this is not complied with, the Police should consider advice or warning under the Child Abduction Act 1984, if it is appropriate.

## **6. Process for Notifying the Police**

- 6.1 The on-call manager should be notified of all high-risk cases that occur out of hours.
- 6.2 The Police may require specific information including:
- description of the child, young person, or adult including their clothing
  - details of where the child, young person, or adult was last seen and with whom
  - recent photograph
  - relevant addresses, known associates and addresses frequented
  - previous history of being missing and circumstances of where they were previously found
  - circumstances under which the child, young person or adult is absent
  - any factors that increase the risk to the child, young person, or adult.

## **7. Safe and Well**

- 7.1 Once the child, young person, or adult is found a risk assessment and safe management plan will be established (with parental/carer involvement where applicable), in an attempt to prevent reoccurrence.

## Local Safeguarding Boards

Warwickshire MASH:  
Multi Agency Safeguarding Hub  
Telephone:  
01926 414144  
Email:  
[mash@warwickshire.gov.uk](mailto:mash@warwickshire.gov.uk)

Sandwell MASH:  
Multi Agency Safeguarding Team  
Telephone:  
0121 569 3100  
Email:  
[access\\_team@sandwellchildrenstrust.org](mailto:access_team@sandwellchildrenstrust.org)

Wolverhampton MASH:  
Multi Agency Safeguarding Team  
Telephone:  
01902 551990  
email  
[AIA@wolverhampton.gov.uk](mailto:AIA@wolverhampton.gov.uk)

Walsall MASH:  
[Walsall Multi Agency Safeguarding Hub](#)  
The Quest, 2nd floor 139-143 Lichfield Street Walsall  
WS1 1SE  
Opening Hours  
Monday - Thursday 08.45 - 17.15, Friday 08.45 - 16.45  
Telephone: 0300 555 2866 option 2  
Out of Hours Emergency Response Team: 0845 111 2922  
website: [www.walsall.gov.uk](http://www.walsall.gov.uk)

Dudley MASH:  
Dudley Safeguarding People Partnership  
3-5 St James's Road, Dudley, West Midlands DY1 1HZ  
Office Hours 9am - 5pm  
For children  
0300 555 0050  
For adults  
0300 555 0055  
Out of office hours  
0300 555 8574 or in an emergency call 999

## Appendix A

### Safeguarding Children and Child Protection Training Requirements

| <b>Level 1:</b><br>All staff working in healthcare services.   | <b>Level 2:</b><br>Non-clinical and clinical staff who, in their role, have contact (however small) with children, young people and/or parents/carers or adults who may pose a risk to children.   | <b>Level 3:</b><br>All clinical staff (client or service user-facing) <ul style="list-style-type: none"> <li>• working with children, young people and/or</li> <li>• their parents/carers and/or</li> <li>• any adult who could pose a risk to children.</li> </ul>  |
|--|--|--|
| <p>This level is equivalent to the core safeguarding/child protection training across all organisations working with children and young people and is for all healthcare staff regardless of place of work. Empowering level 1 staff with the knowledge and skills have resulted in interactions which cause concern being highlighted and appropriate action being taken to safeguard and protect children and young people.</p> <p>This includes, for example, receptionists, administrative, caterers, domestic staff, maintenance.</p> | <p>This includes administrators and reception staff for looked after children and safeguarding teams, reception managers, healthcare students.</p>   | <p>The staff in this group have a role which is mainly patient facing. Level 3 staff work in a wide variety of settings and will spend differing amounts of time with service users depending on their role and place of work. The key principle here is that every contact counts.</p> <p>This includes all mental health staff, child psychotherapists, health professionals working in substance misuse services, allied health professionals working with children, child play therapists.</p>   |
| <p><b>Training Requirement</b></p> <p>While each individual organisation determines the appropriate time commitment to ensure staff have the required up to date knowledge and skills, as a guide we recommend that over a three-year period, staff at level 1 should receive refresher training equivalent to a minimum of two hours.</p>   | <p><b>Training Requirement</b></p> <p>As a guide we recommend that over a three-year period, professionals at level 2 should receive refresher training equivalent to a minimum of four hours.</p> | <p><b>Training Requirement</b></p> <p>It is expected that those individuals who have not yet attained the knowledge, skills and competence for level 3 should acquire these within a pre-defined timeframe as agreed with their employer. The timeframe for this initial training should not exceed a 12-month period.</p> <p><b>Initial training</b></p> <p>Professionals will complete the equivalent of a minimum of 8 hours training related to safeguarding children.</p> <p><b>Refresher training</b></p> <ul style="list-style-type: none"> <li>• Over a three-year period, professionals should be able to demonstrate refresher training equivalent to a minimum of eight hours</li> <li>• Training at level 3 will include the training required at level 1 and 2 and will negate the need to</li> </ul> |

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|  |  | <p>undertake refresher training at levels 1 and 2 in addition to level 3.</p> <ul style="list-style-type: none"> <li>• Training, education and learning opportunities should be multi-disciplinary and delivered internally and externally. It should include personal reflection and scenario-based discussion, drawing on case studies and lessons from research and audit. This should be appropriate to the speciality and roles of participants. Organisations should consider encompassing safeguarding/child protection learning within regular multi-professional and/or multi-agency staff meetings.</li> </ul> |
|--|--|--|

| <b>Level 4:</b><br>Specialist roles – named professionals for safeguarding children and young people. | <b>Level 5:</b><br>Specialist roles – designated professionals for safeguarding children and young people. | <b>Board Level for Chief Executive Officers, Board Executive and Non-Executive Directors/Members</b>   |
|---|--|--|
| This includes named professionals in organisations.   | Not applicable to The Kaleidoscope Plus Group  | <p>It is envisaged that Chief Executives of healthcare organisations take overall (executive) responsibility for safeguarding and child protection strategy and policy, including safe staffing levels with additional leadership being provided at board level by the executive director with the lead for safeguarding.</p> <p>This includes differentiating between safeguarding service users within the organisation in the course of service provision and identifying those service users who have been subject to abuse and/or neglect outside of the service.</p> <p>All board members including non-executive members must have a level of knowledge equivalent to all staff working within the setting (level 1) as well as additional knowledge-based competencies by virtue of their board membership, as outlined below. All boards should have access to safeguarding advice and expertise through designated or named professionals.</p> |

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|   |  | The Chair, Chief Executive Officers, Executive Board Leads and board members have specific roles.  |
| <p><b>Training Requirement</b><br/> Named professionals should attend a minimum of 24 hours of education, training and learning over a three-year period.</p> <p>This should include non-clinical knowledge acquisition such as management, appraisal, and supervision training.</p> <ul style="list-style-type: none"> <li>• Named professionals should participate regularly in support groups or peer support networks for specialist professionals at a local and national level, according to professional guidelines (attendance should be recorded).</li> <li>• Named professionals should complete a management programme with a focus on leadership and change management within three years of taking up their post.</li> <li>• Training at level 4 will include the update and training required at levels 1-3 and will negate the need to undertake refresher training at levels 1-3 in addition to level 4.</li> </ul> |  | <p><b>Training Requirement</b><br/> This will require a tailored package to be delivered which encompasses level 1 knowledge, skills, and competencies, as well as board level specific as identified in this section.</p> |