

## **SAFEGUARDING CHILDREN AND YOUNG PEOPLE POLICY**

### **1. Policy**

- 1.1 Burton and District Mind is committed to safeguarding and protecting the welfare of all who use its services. It recognises that it has a responsibility, through its support for individuals and families, to protect the welfare of children and young people who may be in vulnerable situations and to ensure that such individuals are protected from harm and abuse.
- 1.2 B&D Mind is committed to high standards of practice in safeguarding the welfare of children and young people. It has no statutory remit or role to investigate abuse of children and young people but acknowledges a responsibility to pass on to the appropriate statutory agency concerns in relation to the safety or welfare of an individual so that these concerns can be assessed.
- 1.3 Our Safeguarding Children and Young People Policy and associated procedures demonstrate our compliance with UK and Staffordshire legislation, research and good practice.
- 1.4 B&D Mind provides services to young people aged 16 plus, and we are in contact with families where children and young people might be at risk, or work with individuals or groups where information about children or young people at risk may be disclosed. B&D Mind may also be approached by a child or young person as they may see us as a place of safety. This policy ensures that we are able to act in these situations and have an understanding of the correct escalation procedures.
- 1.5 It is understood that in all circumstances regardless of any necessary escalation, that the child or young person should be referred onwards to Action for Children (age 5 – 18), Mental Health Support team in schools (age 5 -18), Staffordshire Wellbeing Service (16 plus) and their GP (all ages) for ongoing support.

### **2. Learning, development and training on safeguarding and promoting the welfare of children and young people**

- 2.1 All staff and volunteers are required to complete mandatory safeguarding training within their employment induction. It is the responsibility of the individual and their line manager to ensure mandatory training is completed. Safeguarding training is an annual mandatory requirement for all staff.

- 2.2 Supervision sessions and team meetings are held on a monthly basis to discuss safeguarding issues, changes in regulation and best practice. All training and requirements for additional specialist training are recorded and discussed.
- 2.3 Our safeguarding policy aims to achieve the following three objectives by being vigilant in the execution of our duties:
- Creating a culture where children and young people are valued and their right to safety and respect is upheld.
  - Actively managing risk to minimise circumstances where children of people using B&D Mind services may suffer harm.
  - Working collaboratively with other organisations to ensure that children are safeguarded and protected.
- 2.4 Breaches of this Policy could place children and young people at risk of harm and may result in disciplinary action.
- 2.5 These policies and procedures apply across all teams within B&D Mind Services to ensure that all staff, volunteers and other workers are clear about their role, responsibility and expectations in responding to any safeguarding concerns regarding children at risk.
- 2.6 Everyone who works or volunteers for B&D Mind has a duty to safeguard and promote children and young people's welfare alongside a duty to recognise, respond and share concerns or worries about possible abuse and harm in a timely fashion. Everyone will be supported to make decisions as to how to proceed in a way that is in the best interests and safety of the child or young person.
- 2.7 This policy must be followed alongside MASH protocol.

### **3. Accountability Framework**

- 3.1 The Trustee Board of Directors have a duty of care, which includes taking necessary steps to safeguard and protect children and young people. They will act in children's interests and ensure that they take all reasonable steps to prevent any harm to them.
- 3.2 The Chief Officer is the Lead responsible for the management of serious safeguarding incidents. All safeguarding concerns must be reported. The Safeguarding Lead is responsible for providing advice and support to Trustee Directors of the Board and staff on best practice in adhering to this Policy and Procedures, safer working practices and oversight of allegations and serious incidents.

- 3.3 The Chief Officer holds the responsibility for the implementation of the Safeguarding Children and Young People Policy and Procedures and effective management of safeguarding concerns from staff and volunteers.

#### **4. Legislation and Definition**

- 4.1 B&D Mind are required to refer to relevant legislation and guidance including to inform this policy:
- ‘Working Together to Safeguard Children: A guide to interagency working to safeguard and promote the welfare of children’, 2015.
  - Children Acts 1989 & 2004 The Children and Young People (Scotland) Act 2014
  - The United Nations Convention on the Rights of the Child (UNCRC) 1992
  - Equality Act 2010
  - Children and Families Act 2014
  - The Human Rights Act 1998
  - Keeping Children Safe in Education 2019
  - Working together to Safeguarding Children 2018
  - The Children and Social Work Act 2017
  - Education Act 2002

#### **5. Safeguarding Procedure**

- 5.1 Communicating Safeguarding Responsibilities:
- Ensure all staff and volunteers are aware of the Safeguarding Children and Young People Policy and Procedure.
  - Ensure that all Board Members/staff/volunteers fully understand and have a staff and volunteer Code of Conduct.
  - Ensure local Safeguarding service, escalation procedure and contact numbers are shared and displayed in an accessible place for staff and volunteers.
- 5.2 Responding to a safeguarding concern and serious allegations
- Always offer reassurance, listen to and take seriously what is being said. Never promise to keep secrets or be persuaded by the child, or family not to take action if you are worried that a child is being harmed or is at risk of harm.

- It is not your job to investigate, verify what is being said or examine the child; this is the statutory responsibility of the child protection services and/or the Police. However, it is important to tease out relevant information and it may be necessary to undertake some
- enquiries before making a referral, including full name, age, mobile number, email address and any involvement with B&D Mind services and a brief outline of what happened to them.
- Explain the process to the child or family member: that you will need to pass this information on, to whom, the reasons why and possible actions.
- Consult with the Safeguarding Lead to agree the course of action but do not delay if this would place a child at increased risk.
- If the child is present and is at immediate risk of harm, take the appropriate course of action to secure the immediate safety of the child unless to do so would put you or others at risk.

This could include:

- Calming angry or upset children or adults;
- Contacting 999 emergency services, if necessary on their behalf;
- Contacting the local safeguarding team directly or seeking vital medical assistance;
- Contact the Safeguarding Lead, or the Police outside of office hours.
- If you receive a telephone call from a child take as much detail as possible, including full name, age/date of birth, address, mobile number, email address, and involvement with services, and if they are being harmed a brief outline of what is happening to them. If the child is in immediate danger, advise them to call the Police; you must also contact the Police to check if the child has referred the concern to them. If the child is not in agreement with this/not able to do this, you have a duty to call the Police and pass on any information you have.
- If the child is not in immediate risk or harm, signpost them to the most appropriate local service or offer to contact them on their behalf. If there is no relevant local agency and they do not wish to contact anyone suggest Child line (0800 1111)
- In all circumstances you must record what your concerns are, identify what action has been taken, and pass this record to the Chief officer/Safeguarding lead.
- If the child is subject to a Care Order or an ongoing Child Protection Investigation, or has a child protection plan, any new incident must be referred to the lead professional at Staffordshire Child Protection services.

- If the child is not subject to the above, the Chief Officer/safeguarding Lead should assess the information received and, if the child is suffering, or likely to suffer, significant harm, a referral must be made to the children's safeguarding team.
- If a referral is not needed to the children's safeguarding team, then a referral for further support/assessment by Action for Children should be made.
- If the child protection service's response adequately safeguards the child, then the Chief Officer must escalate appropriately.

### 5.3 **Child protection escalation procedures**

- When concerned about a child or young person a referral should always be made to Front door (MASH) using online referral form <https://www.staffsscb.org.uk/contact/> or by calling Staffordshire First response on Tele 0300 111 8007 option 1. For Emergency or out of hours Tele: 0345 604 2886 Mobile: 07815 492613.
- If the response is still not deemed to be satisfactory discuss with the appropriate person at the statutory agency and follow up concerns in writing.

## 6. **Allegations against Directors, staff or volunteers**

- 6.1 It is important that any concerns for the welfare of a child or young person arising from abuse or harassment by a Trustee, member of staff or a volunteer should be reported immediately to the Chief Officer or, if they are implicated in the concerns, the Chair of Trustees or Vice Chair, and a referral form completed. The same approach applies to concerns about poor practice.
- 6.2 Where there are allegations of abuse or concerns about poor practice of Trustee Directors, staff or volunteers there may be three strands of investigation as follows:
- Criminal investigation (externally led by the Police Authority)
  - Child protection investigation (externally led)
  - A disciplinary investigation (internally led)
- 6.3 It may be that the employee will be suspended with pay during an investigation or a volunteer asked to cease volunteering pending the outcome of the investigation.

## **7. Retention of Records**

- 7.1 A factual, dated record of concern and action about a child or young person supported by B&D Mind will be kept in line with our retention schedule.
- 7.2 Records kept by employees about children and young people should include contacts made and referral of safeguarding concern including date, time, reason and referral agency.
- 7.3 This policy will be reviewed annually and more regularly if appropriate

## **8. Designated Safeguarding Personnel**

- 8.1 The Strategic Lead for Safeguarding/Lead Designated Person is:

Lynne Barrell  
Chief Officer,  
[lynne.barrell@burtonmind.co.uk](mailto:lynne.barrell@burtonmind.co.uk)  
Tel. 01283 566696 or 07527 467447

**Adopted by the Trustee Board of Directors Feb 2022**

**Due for annual review Feb 2023**

## Appendix 1 - Referral Form

### Details of At Risk Child or Young Person

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
**E mail:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Date of birth:** \_\_\_\_\_  
**Gender:** \_\_\_\_\_

### Details of alleged abuser (please tick a box)

Staff Member	<input type="checkbox"/>	Volunteer	<input type="checkbox"/>
Family Member	<input type="checkbox"/>	Friend	<input type="checkbox"/>
Police	<input type="checkbox"/>	Care Provider	<input type="checkbox"/>
Social Worker	<input type="checkbox"/>	Doctor	<input type="checkbox"/>
Healthcare Professional	<input type="checkbox"/>	Another service user	<input type="checkbox"/>
Other	<input type="checkbox"/>	Unknown	<input type="checkbox"/>

### Location of alleged abuse (please tick a box)

Office	<input type="checkbox"/>	Public place	<input type="checkbox"/>
Club	<input type="checkbox"/>	Education	<input type="checkbox"/>
Hospital	<input type="checkbox"/>	Doctors Surgery	<input type="checkbox"/>
Own home	<input type="checkbox"/>	Another home	<input type="checkbox"/>
Day centre/service	<input type="checkbox"/>	Other	<input type="checkbox"/>

### Type of abuse (please tick a box)

Physical	<input type="checkbox"/>	Sexual	<input type="checkbox"/>
Psychological	<input type="checkbox"/>	Financial or materials	<input type="checkbox"/>
Neglect and acts of omission	<input type="checkbox"/>	Institutional	<input type="checkbox"/>
Discriminatory	<input type="checkbox"/>	Other	<input type="checkbox"/>

Date and time of incident: \_\_\_\_\_

Full description of the incident including persons present:

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Describe your concern and action taken

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Description and location of any visible marks, bruising etc.

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Details of the Referrer

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**E mail:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_

**Signed:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**To be completed by a Designated Person only**

This information has been passed on to \_\_\_\_\_

Name of Designated Person:

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

## **Appendix 2 – Definition of abuse**

### **Definition of abuse**

“The physical, psychological, emotional, financial or sexual maltreatment, or neglect of a vulnerable child or young person by another person. The abuse may be a single act or repeated over time. It may take one form or multiple forms. The lack of appropriate action can also be a form of abuse. Abuse can occur in a relationship where there is an expectation of trust and can be perpetuated by a person or persons, in breach of that trust, who have influence over the life of a dependent, whether they be formal or informal carers, staff or family members or others. It can also occur outside such a relationship”

Forms of abuse can be categorised as follows:

- Physical abuse (including inappropriate restraint or use of medication)
- Sexual abuse
- Psychological abuse
- Financial or materials abuse
- Neglect and acts of omission
- Institutional abuse
- Discriminatory abuse
- Exploitation

Incidents of abuse may be multiple, either to one person in a continuing relationship or service context, or to more than one person at a time.

Any or all types of abuse may be perpetuated as the result of deliberate intent and targeting of vulnerable people, negligence or ignorance.

### **Appendix 3 – Safe recruitment of Trustee Directors, staff and volunteers**

#### **Selection**

- Before commencing employment/voluntary work, prospective staff/volunteers will be asked to attend an interview with the Chief Officer of B&D Mind. The level and formality of the interview will depend on the role and work involved.
- Employee/volunteer recruitment procedures will include a Disclosure and Barring Service (DBS) check, at the appropriate level, for all personnel with access to vulnerable people and should always include the use of references (two wherever possible). This process equally applies to all Directors.

Any Disclosure that causes concern will be assessed by a panel (comprising Chair, Chief Officer and one board member) to establish the level of risk the subject poses to service users, colleagues, the general public and/or our organisation.

All new Trustee Directors/employees/volunteers will go through a probation and induction process, including relevant training. Ongoing training and supervision will ensure all employees/volunteers are adequately supported.

Any concerns about a Trustee Director/employee/volunteer should be passed on to a Designated Person or, if they are implicated in the concerns, the Trustee Chair.