

# Safeguarding Children, Young People and Vulnerable Adults with care and support needs: Policy and Procedures

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## 1.0 Introduction

- 1.1** This policy aims to ensure that an overarching approach to safeguarding is embedded within all council services and that staff, elected Members, those delivering contracts on behalf of the council and volunteers understand their role and responsibilities in supporting all residents to live a life free from abuse, exploitation, and intimidation.
- 1.2** Cherwell District Council will create an environment where staff, elected Members, those delivering contracts on behalf of the council and volunteers are adequately trained and encouraged to think of safeguarding as being their responsibility, understanding the need for them to play a full and active part in the delivery of the council's response. It will create an organisational culture where the reporting of abuse and exploitation is encouraged, and everyone feels supported to do so.
- 1.3** The council believes that all individuals, regardless of age, disability, gender and gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation, should have the greatest possible control over their lives. They should be able to make informed decisions or be supported to make these decisions if unable to do so themselves, without fear of harm or abuse from others.
- 1.4** CDC have a statutory duty to have appropriate arrangements and procedures in place to safeguard and promote the welfare of the children, young people and adults with care and support needs living in our community. The council will ensure that it complies with all relevant safeguarding legislation.
- 1.5** The senior responsible officer for safeguarding is the Assistant Director of Wellbeing and Housing Services. On a day-to-day basis, the main point of contact for raising safeguarding issues is the Deputy Designated Safeguarding Lead. Across all services, at least one Safeguarding Champion has been identified – these are people who will give receive further in-depth training and will provide advice and support to other staff or elected members on safeguarding issues.

All contact details are provided in Appendix 2 on page 16.

## Scope

The safeguarding themes considered within this policy are outlined below:

### **Safeguarding and promoting the welfare of children and young people.**

This encompasses the protection and welfare of children under the age of 18 (including unborn babies). It also incorporates the additional aims of preventing the impairment of children's health and development; ensuring they grow up in circumstances consistent with the provision of safe and effective care, providing optimum life chances.

All staff, elected Members, those delivering contracts on behalf of the council and volunteers who come into contact with children, who work with adults who are parents, or who gain knowledge about children through working with adults, will be trained to recognise and know how to act upon evidence that a child's (or unborn baby's) health or development is being or may be impaired, especially when they are suffering or at risk of suffering significant harm.

**Child sexual exploitation (CSE) and child criminal exploitation (CCE)** CSE and CCE is illegal activity by people who have some form of power and control over children and use it to sexually abuse them/force them into criminal behaviour. It involves forcing or enticing a child (under the age of 18) to take part in sexual/criminal activities whether or not the child is aware of what is happening, including exploitative situations, contexts and relationships where children (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them, sexual activities. CSE and CCE can be a form of organised or complex abuse, involving a number of abusers and/or a number of children.

CSE and CCE can occur through use of technology without the child's immediate recognition, for example the persuasion to post sexual images on the internet/mobile phones with no immediate payment or gain. In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.

### **Safeguarding Adults**

The purpose of adult safeguarding is to prevent harm and reduce the risk of abuse or neglect to adults with care and support needs. The statutory framework introduced under the Care Act applies to any person aged 18 or above who:

- Has needs for care and support (regardless of the level of need and whether or not these needs are being met),
- Is experiencing, or is at risk of abuse or neglect, and
- As a result of those needs, is unable to protect themselves against the abuse or neglect or the risk of it.

Adults with care and support needs should be supported in maintaining control over their lives and to make informed choices without coercion. Ill-treatment and wilful neglect of a person who lacks capacity is a criminal offence under the Mental Capacity Act 2005.

**Further information on the categories of abuse can be found in Appendix 1 on page 12.**

To meet this duty, we have the following in place (these are explored in more detail later in this document):

- **Training:** appropriate training is provided to employees and members to ensure they are equipped with the relevant knowledge and skillset to be able to identify safeguarding (and also criminal) concerns and report them to the appropriate person/agency in a timely manner;
- **Reporting Concerns:** A mechanism is in place to ensure employees and members of the public can effectively report concerns about children, young people and vulnerable adults at risk. Working in conjunction with local Police to increase community intelligence and reduce the risk of criminal acts;
- **Recruitment:** We operate sound recruitment and selection procedures for employees to ensure suitability for working with children, young people and vulnerable adults;
- **Multi-Agency Working:** Participate in forums and activities designed to improve consistency and overall outcomes for vulnerable groups;
- **Record Keeping:** We maintain appropriate records of training, risk assessments, referrals and escalation of concerns
- **Governance:** Maintain oversight of the safeguarding arrangements in place through a Safeguarding Leads Group and regular reporting to the Safeguarding Boards. Arrangements will also be tested periodically to ensure they remain fit for purpose.

## 2.0 Recruitment and Selection of Employees

- 2.1 CDC have a legal obligation to ensure that all job applicants (including casual and volunteer staff) do not have a history that would make them unsuitable for posts involving contact with children, young people and vulnerable adults.
- 2.2 Interviews must include questions relating to safeguarding where the role is exposed to or responsible for the protection of children, young people or vulnerable adults. It is the Recruiting Manager's responsibility to select the questions that are most appropriate to the role/situation. All Recruiting Managers will have completed Safer Recruitment Training. Guidance and sample questions are available via the [Recruitment and Selection Guidance – Sample Safeguarding Questions](#) document.
- 2.3 Offers of appointment are subject to the completion of pre-employment clearances which include medical, reference and asylum/immigration checks. See [Recruitment and Selection Guidance - Pre-employment Clearances](#) for more information.
- 2.4 Offers of appointment may be subject to receipt of a satisfactory disclosure from the Disclosure and Barring Service (DBS). Disclosures are available and sought in respect of professions and positions within the terms of the Exceptions Order under the Rehabilitation of Offenders Act. Please refer to the [DBS Policy](#) and [Recruitment and Selection Guidance - Disclosure and Barring Service Checks](#) for more information.

If a post is required to be subject to a DBS check, the individual is not permitted to commence employment until satisfactory clearance has been received by the Council.

In exceptional circumstances and if restrictions can be applied to the role to negate any risks prior to the receipt of DBS clearance (such as identifying office-based duties), the employee may be able to commence employment. Continued employment under these circumstances will still be conditional upon receipt of a satisfactory Disclosure being received.

Failure to obtain clearance will result in non-engagement/instant dismissal. This policy and procedure includes paid employees, volunteers, elected members and contractors.

## 3.0 Training

3.1 Training is a crucial element in supporting employees to meet their responsibilities toward safeguarding children, young people and vulnerable adults.

3.2 A Safeguarding Training Framework has been developed as a core part of these arrangements and aims to ensure that employees and members are equipped with the relevant knowledge and skillset to be able to identify safeguarding (and also criminal) concerns and report them to the appropriate person/agency in a timely manner.

3.3 A Training program details of the training requirements for all Cherwell employees (separate requirements are outlined for Members. Completion of these is mandatory (in line with the corporate training objective).

As part of their induction and probationary period, new staff will be asked to complete the iHASCO e-learning modules shown below and these modules must be completed within the first few weeks of starting at the organisation.

- Anti-bribery
- Cyber Awareness
- DSE – Display Screen Equipment
- Equality and Diversity
- Fraud Awareness
- Fire Awareness
- GDPR Essentials or GDPR for Management
- Health and Safety Basics and Essentials
- Manual Handling
- PREVENT
- Safeguarding Children
- Safeguarding Vulnerable Adults
- Whistleblowing

Managers need to complete these additional modules:

- Accident Reporting
- Risk Assessment
- First Aid Requirements and RIDDOR
- Safer Recruitment Training

Once completed, iHasco will prompt the individual to complete refreshers when required, on a yearly, two yearly or three yearly basis, dependant on the training module. Alongside the role-specific training detailed above, all new starters to CDC are required to attend a mandatory 'Safeguarding Awareness Briefing' and will be invited to attend these as part of their corporate induction.

3.4 In line with the government's PREVENT strategy the council will have due regard to prevent people from being drawn into terrorism as part of its responsibility to protect vulnerable adults from risk and experience of abuse and neglect.

- 3.5 Completion of role specific safeguarding training is mandatory and evidence of completion is required to be provided. A training register will be maintained to track completions and initiate renewals.
- 3.6 Safer recruitment training will be provided for staff involved with recruitment of roles exposed to these vulnerable groups.
- 3.7 Managers should ensure that safeguarding training forms part of employees' Professional Development Plans.

## 4.0 Definitions of Abuse

- 4.1 Abuse may arise through neglect or through infliction of harm, or by failure to act to prevent harm. Children, young people and vulnerable adults may be abused in a wide variety of settings, by people known to them, or by strangers. Further information on the categories of abuse can be found in [Appendix 1 on page 12.](#)

### Responding to Disclosure, Suspicions and Allegations of Abuse

- 4.2 It is not the responsibility of CDC employees to decide whether or not abuse is taking place. It is the responsibility of CDC staff to be alert to signs of abuse and to report concerns. If a person says or indicates that they are being abused or information is obtained which gives concern that a person may be being abused the concerns should be reported promptly via the 'See It – Report It' form (SIRI) (see Reporting Concerns section below). If you consider the child, young person or vulnerable adult to be at imminent risk, then you must call 999.

## 5.0 Confidentiality

- 5.1 Confidentiality is a key issue in safeguarding children, young people and vulnerable adults. Whilst information generally should not be shared without the consent of the individual (or their parent/guardian in the case of a child) or for purposes other than for which information was obtained, it must be shared with appropriate agencies – even when the individual does not consent – if there are safeguarding concerns or in the case of radicalisation where there may be a need to share information to prevent a crime being committed.

## 6.0 Data Protection

- 6.1 Occasionally there will be a need or requirement to collect and use certain types of information on children, young people and vulnerable adults. This personal information must be dealt with properly however it is collected, recorded and used – whether on paper, in a computer, or recorded on other material – and there are safeguards to ensure

this in the General Data Protection Regulation (GDPR). (Personal information is data that relates to a living individual who can be identified from the data.)

- 6.2 The lawful and correct treatment of personal information is very important and wherever such information is kept there is a need to comply and adhere to the principles of data protection, as enumerated in the General Data Protection Regulation. CDC's Data Protection Policy is available on the intranet. In most cases the need to safeguard a child or vulnerable adult will take precedence over data protection requirements, and where an employee is uncertain about this, they should seek advice from a member of the Legal Services Team.
- 6.3 To keep children, young people and adults with support needs safe from harm, professionals will share relevant information across geographical and professional boundaries as required. When there is a reasonable cause to believe that a child, young person or adult with care and support needs, may be suffering or may be at risk of suffering harm, consideration will always be given to referring these concerns to the relevant authorities.

Information about children, young people, families and adults at risk will be shared appropriately, and always in accordance with the council's Information Management and Data Sharing Policy and the Oxfordshire Information Sharing Framework, facilitating effective data sharing across Oxfordshire in order to enable organisations to respond quickly to customers' needs. Information will also be shared in accordance with the council's duty to supply information to the local Safeguarding Adults and Safeguarding Children Boards upon request, under the Care Act 2014 and the Children Acts 1989 and 2004 legislation, accordingly. Information sharing will however be - necessary, proportionate, relevant, accurate, timely and secure. Clear records and reasons for decisions will be recorded.

## 7.0 Reporting Concerns

- 7.1 If you have any concerns regarding a child, young person or vulnerable adult you should write down what you have seen or heard that gives you concern, keep that document safe and confidential, and report it as soon as is practically possible via the ['See it – Report it' form](#) which is available via the Safeguarding section of the intranet (this can also be made available in paper format upon request).
- 7.2 If there is an imminent risk of harm, then you must call 999. If it concerns suspected abuse to a child, direct referral to the Oxfordshire Multi agency safeguarding team should also be made:
- Oxfordshire MASH: 0345 050 7666 or [mash-childrens@oxfordshire.gcsx.gov.uk](mailto:mash-childrens@oxfordshire.gcsx.gov.uk)
- 7.3 There may be occasions where employees have existing connections with the Police, Children's/Adult Social Care or other agency and choose to report their concern directly.

In these instances, the concern must still be reported internally via the 'See it – Report it' mechanism to ensure we capture all information relating to referrals made by our agency. This ensures we are able to identify trends/patterns of concerns and ultimately meet our Safeguarding Board reporting requirements.

- 7.4 When reporting a concern via the 'See it – Report it' mechanism, you must include as much detail as possible regarding the situation and those involved and wherever possible include full names, dates of birth, addresses and contact details (telephone numbers) as this is vital if it is considered necessary to refer the concern to another agency.

### **Escalation Process**

- 7.5 It is essential that alongside referral to outside agencies, internal escalation processes are in place to alert senior management to serious safeguarding incidents or concerns.
- 7.6 Route for escalation would be via the Nominated Officer to the Board Level Lead (see 8.2) and on to the Chief Executive Officer.
- 7.7 Safeguarding concerns are assessed by the Deputy Designated Safeguarding Lead and Nominated Officer and decisions to escalate are made on a case by case basis.

## **8.0 Safeguarding Leadership**

- 8.1 Section 11 of the Children Act 2004 places duties on a range of organisations and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children.
- 8.2 Section 11 of the Children Act 2004 stipulates that these organisations must have a senior board level lead to take leadership responsibility for the organisation's safeguarding arrangements.
- 8.3 CDC have a Nominated Officer who is responsible for coordinating the responses of CDC to safeguarding concerns and be the link person with relevant agencies.
- 8.4 The Designated Safeguarding Lead (DSL) role is supported by a Deputy Designated Safeguarding Lead who is responsible for ensuring the appropriate arrangements are in place to meet Section 11 of the Children's Act 2004 which includes safeguarding policy and procedures, employee training, reporting mechanisms and provision of advice and guidance.
- 8.5 See Key Contacts Outlined in **Appendix 2 on page 16**.



- 8.6 Selected CDC elected members also have responsibility for the oversight of Safeguarding practices as part of their portfolios.

## 9.0 Acceptable and Unacceptable Behaviour

- 9.1 CDC have published Safeguarding Guidance to support employees and elected members in understanding what is acceptable and unacceptable behaviour when working with children, young people or vulnerable adults (Appendix 3).
- 9.2 CDC have a duty to have a designated officer to be involved in the management and oversight of individual cases. This person has responsibility for:
- Ensuring that CDC operates procedures for dealing with allegations in accordance with Oxfordshire Safeguarding Boards' guidance resolving inter-agency issues;
  - Liaison with the Oxfordshire Safeguarding Boards on any issues.

## 10.0 Whistleblowing Policy

- 10.1 CDC are committed to the highest possible standards of openness, probity and accountability. In line with that commitment, it expects and encourages employees, and others that it deals with, who have serious concerns about any aspect of the CDC work to come forward and voice those concerns. This includes concerns relating to Safeguarding arrangements.
- 10.2 Such issues can be raised without fear of victimisation, subsequent discrimination or disadvantage. CDC have a Whistleblowing Policy in place which is intended to encourage and enable employees to raise serious concerns within the Council rather than overlooking a problem or 'blowing the whistle' outside.

The Whistleblowing Policy is available via the CDC intranet.

## Partnership working

Whilst the council's responsibility and duty is to ensure that all disclosures and observations of a safeguarding nature are shared and reported appropriately by all council staff and elected members, the council will from time to time assist and advise other agencies in identifying a safeguarding concern as part of their existing partnership working and may submit further safeguarding concerns as a result in order to prevent the abuse of children and adults at risk in the district in all its forms.

A list of some of those agencies is provided in Appendix 4 on page 18.

## 11.0 Child Death Review Process

- 11.1 All members of the Oxfordshire Safeguarding Boards (adults and children) are required to provide a senior officer contact to the Board. This person will act as a first point of contact for any deaths (or life changing injury) of children, young people and vulnerable adults that the organisation may be the first to be aware of and to ensure that there is an effective response.
- 11.2 If you become aware of the death of a child, young person or vulnerable adult in the course of your professional duties you should immediately contact the Nominated Officer (see 8.3).

## 12.0 Serious Case Reviews and Safeguarding Adults Reviews

- 12.1 Safeguarding Boards hold a statutory responsibility for the commissioning and undertaking of reviews following the death or serious harm of a child, young person or vulnerable adult. The reviews consider what has happened, what lessons can be learned for the future and what changes may need to be made. They are not criminal investigations or Public Enquiries and their aim is not to apportion blame but to ensure that agencies involved learn lessons to help them keep children, young people and vulnerable adults safe in the future.
- 12.2 Child Safeguarding Practice Review (CSPRs) are the reviews carried out by the Children Boards and Safeguarding Adults Reviews (SARs) are those carried out by the Adults Boards in Oxfordshire.
- 12.3 Periodically the Nominated Officer will be contacted by the Safeguarding Boards to gather information relating to the child, young person or vulnerable adult and their families/carers who are subject to one of these reviews. The collation of this information from service areas will be coordinated by the Safeguarding Officer.

# Appendix 1

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## Categories and signs of abuse

### Physical abuse

May involve hitting, shaking, throwing, kicking, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm. Misuse of medication, restraint or inappropriate physical sanctions. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a person for whom they are caring.

### Emotional abuse

Is the persistent emotional ill-treatment such as to cause severe adverse effects. For example, it may involve conveying to children, young people and vulnerable adults that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed. It may involve causing children, young people and vulnerable adults to frequently feel frightened or in danger, or their exploitation or corruption. Some level of emotional abuse is involved in all types of ill-treatment, though it may occur alone.

### Domestic abuse

Can be any incident or pattern of incidents of controlling, coercive threatening behaviour, violence or abuse intimidating partners or family members regardless of gender or sexuality. This includes psychological, physical. Sexual, financial, emotional abuse; so, called 'honour' based violence.

### Sexual abuse

Involves forcing or enticing a person to become involved in any way in sexual activities, whether or not they are aware of what is happening. Including indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendoes, sexual photography.

### Racial Abuse

This is when you are treated differently because of your race in one of the situations covered by the Equality Act. The treatment could be a one-off action or as a result of a rule or policy based on race. 'Race' includes colour, nationality, citizenship and ethnic or national origins.

**Indirect racism-** It is indirect race discrimination to have a rule, policy or practice which people of a particular racial, ethnic or national group are less likely to be able to meet than other people, and this places them at a disadvantage.

**Direct Racism-** It is direct race discrimination to treat someone less favourably than someone else would be treated in the same circumstances, because of race.

### **Sexual Exploitation**

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities.

Child sexual exploitation can occur through the use of technology without the child's or young person's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain.

In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.

Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

### **Neglect**

The persistent failure to meet basic physical and/or psychological needs, likely to result in the serious impairment of the individual's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. It may involve a parent or carer failing to provide adequate food and clothing, shelter including exclusion from home and abandonment, failing to protect a child, young person or vulnerable adult from physical harm or danger. Failure to ensure adequate supervision, including the use of inadequate care-takers; or failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

### **Self-Neglect**

Self-neglect is a general term used to describe a vulnerable adult living in a way that puts his or her health, safety, or well-being at risk. Self-neglect by vulnerable adults is a serious problem. It can be difficult to know when or if you should get involved.

- The term "self-neglect" covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings.
- Examples of self-neglect include:
- A refusal or inability to cater for basic needs, including personal hygiene and appropriate clothing.

- Neglecting to seek assistance for medical issues.
- Not attending to living conditions – letting rubbish accumulate in the garden, or dirt to accumulate in the house.
- Hoarding items or animals.

## **Modern Slavery**

Human trafficking involves an act of recruiting, transporting, transferring, harbouring or receiving a person through a use of force, coercion or other means, for the purpose of exploiting them.

If an identified victim of human trafficking is also an adult with care and support needs, the response will be co-ordinated under the adult safeguarding process. The police are the lead agency in managing responses to adults who are the victims of human trafficking.

There is a national framework to assist in the formal identification and help to coordinate the referral of victims to appropriate services, known as the National Referral Mechanism.

Support services for Modern Slavery victims and others affected by Modern Slavery are provided across the Thames Valley by **Victims' First**.

CDC Corporate procurement team ensure good practice by undertaking modern slavery training through the Chartered Institute of Procurement and supply's (CIPS) online Ethical Procurement and Supply training. Challenging any abnormally low-cost tenders to ensure they do not rely upon the potential contract practicing Modern Slavery.

## **Financial or Material abuse**

This includes theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions or the misuse or misappropriation of property, possessions or benefits of vulnerable adults.

## **The Signs of Abuse**

The following factors should act as indicators in situations of potential or actual abuse:

- unexplained or suspicious marks, bruises, fractures, burns/scalds.

- Stereotyping, Hostility, Overcritical, Consistently Overlooked.
- poor physical condition or delayed speech and language development in children.
- unexplained changes in behaviour or personality;
- becoming withdrawn.
- seeming anxious.
- becoming uncharacteristically aggressive.
- inappropriate sexual awareness;
- a statement by a child or person that he or she has been victimised;
- distrust of others, particularly those with whom a close relationship would normally be expected;
- behaviour of adults/careers who have children in their care, which makes you concerned.
- difficulty making friends or socialising;
- prevention from socialising with other children, young people or adults;

It should be recognised that this list is not exhaustive and the presence of one or more of these indicators is not proof that abuse is actually taking place. These signs don't necessarily mean that a child is being abused, there could be other things happening in their life which are affecting their behaviour. Speak to the Safeguarding team or complete the SIRC ('See it Report it') form and they will help to assess the situation.

## Appendix 2

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### Key Safeguarding Contacts for CDC:

Lead	Their Role	Job Title	Email Address
Senior Responsible Officer and Designated Safeguarding Lead	Oversee Safeguarding processes within District Authority	Assistant Director Housing & Wellbeing	Nicola.Riley@Cherwell-DC.gov.uk
Deputy Designated Safeguarding Lead/ CSE Lead	Susan Asbury	Deputy Designated Safeguarding lead	Susan.asbury@cherwell-dc.gov.uk

Safeguarding Champions	Additional people to go to for safeguarding advice	Various	<a href="mailto:Kelly.Thornton@Cherwell-DC.gov.uk">Kelly.Thornton@Cherwell-DC.gov.uk</a> <a href="mailto:Lucy.Johnson@cherwell-dc.gov.uk">Lucy.Johnson@cherwell-dc.gov.uk</a> <a href="mailto:Sue.Balcombe@Cherwell-DC.gov.uk">Sue.Balcombe@Cherwell-DC.gov.uk</a> <a href="mailto:Mandy.Targett@Cherwell-DC.gov.uk">Mandy.Targett@Cherwell-DC.gov.uk</a> <a href="mailto:Jayne.Allsop@cherwell-dc.gov.uk">Jayne.Allsop@cherwell-dc.gov.uk</a>
Domestic Abuse Co-Ordinator	Domestic Abuse Lead	Domestic Abuse Co-Ordinator	<a href="mailto:christine.stephens@cherwell-dc.gov.uk">christine.stephens@cherwell-dc.gov.uk</a>
General enquiries or advice	Any other queries pertaining to safeguarding matters and additional email address to copy in on referrals made		Safeguarding CDC <a href="mailto:Safeguarding@Cherwell-DC.gov.uk">Safeguarding@Cherwell-DC.gov.uk</a>

## Appendix 3

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### Promoting Good Practice when working with children, young people and vulnerable adults

It is possible to reduce situations in which abuse can occur and help protect employees by promoting good practice. The following guidelines should be used to ensure this can be achieved:

- Always ensure that you follow safer recruitment practices and undertake DBS checks;
- always work in an open environment, avoiding private or unobserved situations;
- Treat all children, young people and vulnerable adults with equal dignity and respect
- always put the welfare of the person first;
- maintain a safe, appropriate and professional distance with children, young people and vulnerable adults
- build balanced relationships based on mutual trust which empowers children, young people and vulnerable adults to share in the decision making process;
- make activities fun, enjoyable and promote fair play;
- ensure that if any form of manual / physical support is required, it should be provided openly and with due care;
- keep up to date with the appropriate technical skills and qualifications; ensure that if children are supervised that they are accompanied by at least two employees;
- be an excellent role model - this includes not smoking or drinking alcohol in the company of children, young people and vulnerable adults give enthusiastic and constructive feedback rather than negative criticism;
- recognise the developmental needs and capacity of children, young people and vulnerable adults;
- ensure that equipment and facilities are safe and appropriate to the age and ability of the person
- ensure that high standards are maintained at all times.

### Practices to be avoided

The following should be avoided except in emergencies. If cases arise where these situations are unavoidable they should only occur with the full knowledge and consent of a senior officer, guardian or carer or the child's parent, for example:

- spending excessive amounts of time alone with children, young people and vulnerable adults away from others' oversight;
- taking unaccompanied children, young people or vulnerable adults on car journeys, however short, on your own
- taking children, young people and vulnerable adults to your home.

### Employees should never:

- engage in rough, physical or sexually provocative games, including horseplay;
- allow or engage in any form of inappropriate touching;
- allow children to use inappropriate language unchallenged;
- make sexually suggestive comments to a person, even in fun;



- allow allegations made by a person to go unrecorded or not acted upon;
- do things of a personal nature for children, young people and vulnerable adults that they can do for themselves;
- invite or allow children, young people and vulnerable adults to stay at their home;
- constantly shout at and/or taunt a person.

## Appendix 4

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### Safeguarding in Partnership

Agencies that the council may work in partnership with to prevent the abuse of children and adults at risk in the district in all its forms include, but is not restricted to:

Members of the wider Community Safety Partnership (CSP)

Police

Fire & Rescue

Clinical Commissioning Groups (CCGs)

Probation Services

Adults Health & Social Care Children's Health & Social Care Army

And additionally, where appropriate:

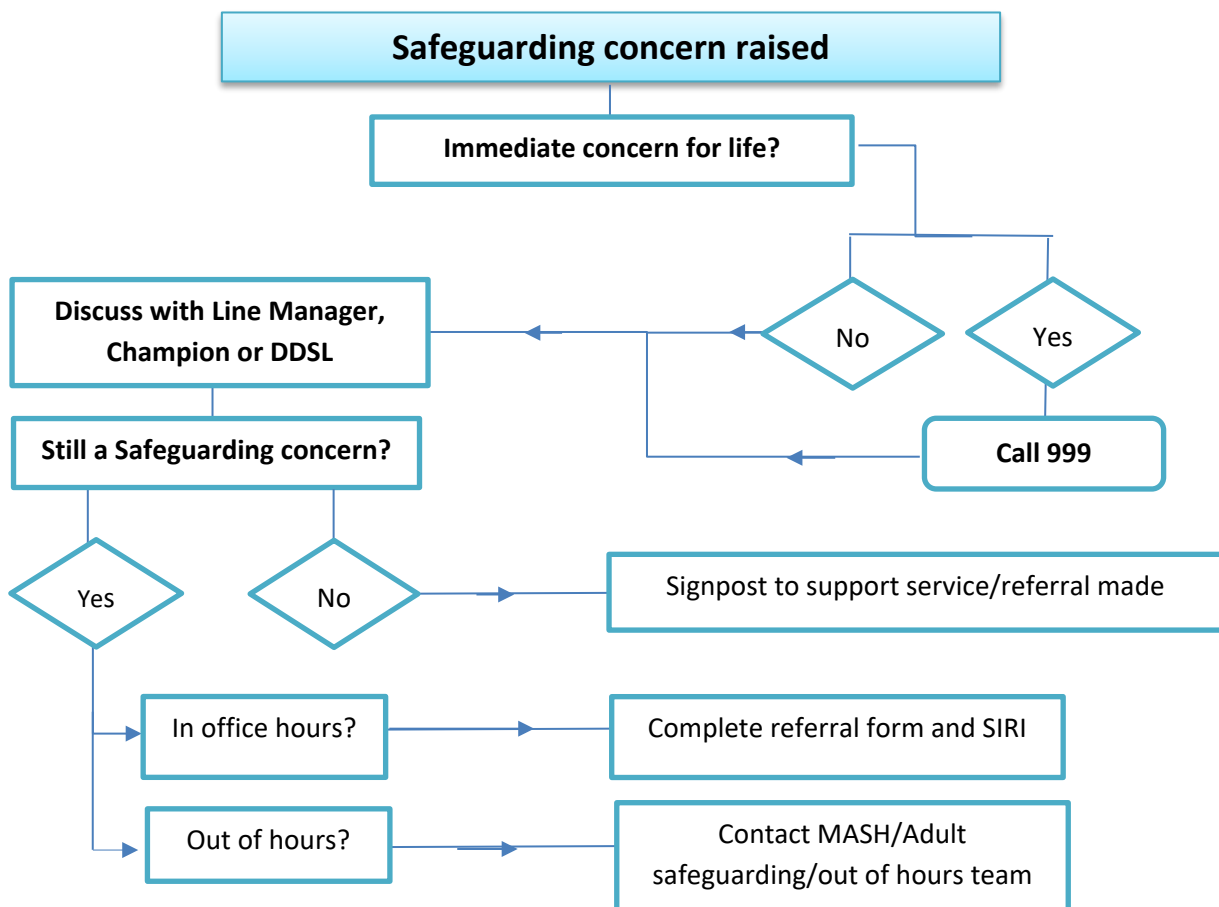
Social Landlords Volunteer/Charity Support Organisations

Town & Parish Councils

Resident groups

## Appendix 5

### Referral Process



#### ALWAYS

Always ensure the Designated Safeguarding Lead has been advised that a referral or MASH submission has been done, or if further information has been provided.

Complete a "See it Report it" Form with 24 hrs.

# Appendix 6

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## Legislation and Guidance

This policy has been based on current safeguarding legislation and guidance for children and vulnerable adults, including:

Domestic Abuse Act 2021

- Working together to safeguard children – A guide to interagency working HM Gov., 2023
- Modern Slavery Act 2015
- The Counter Terrorism and Security Act 2015
- Health Care Act 2022
- Information Sharing Advice for practitioners, 2023.
- The Role of District Councils in Safeguarding Children and Young People, 2010
- Safeguarding Vulnerable Groups Act 2012
- National Framework of Standards – adult safeguarding, 2005
- The Children Act 2004 (including provisions and guidance in 2005).
- Every Child Matters Green Paper, 2003
- ‘No Secrets’ guidance, 2000
- The Children Act, 2004

Other related legislation includes: the Data Protection Act 2018, the General Data Protection Regulations 2018, the Equality Act 2010 and the Freedom of Information Act 2000. Further detail on safeguarding legislation can be found by accessing the relevant links on this website:

<http://www.isa.homeoffice.gov.uk/>

## Appendix 7 - Specific Guidance for Councillors

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When should a councillor comply with the council’s safeguarding policy? When acting as, or perceived to be acting as, a councillor. When is a councillor acting as, or perceived to be acting as, a

councillor? It can be unclear as to when a councillor's duties end and when their private life takes over. With regard to safeguarding children there would appear to be three possible situations:

1. 1 A councillor clearly acting in an official capacity, for example where a planned visit to a school or care home has been organised by officers and the councillor is attending in their official capacity. In this situation, councillors would be expected to follow the same policy and procedures as officers.
2. 2 A situation where the councillor could be perceived to be acting in an official capacity – this could be a situation where councillors are fact finding on their own without officers in attendance (for example where complaints of anti-social behaviour in a children's play area have been made and a ward councillor goes out to see how bad the situation is). In this situation, the councillor may come into contact with children. Again, councillors would be expected to follow the same policy and procedures.
3. 3 Purely social contact with children (for example giving a lift to the children of a family friend) or vulnerable adults (for example visiting an older person who is a friend at a care home). There is no need to follow the council's child protection policy and procedures.

It is noted that councillors often get involved with, or take on, other roles in the community, for example school governor, helping at youth clubs, care homes etc. In these circumstances the councillor will have to comply with the policy of the relevant organisation (i.e. the school etc).

### **Working with children and vulnerable adults**

In the unlikely event that a councillor needs to work frequently with children or vulnerable adults on behalf of the council then they would be required to have a DBS check and meet with the Community Safety Manager, to ensure that they are familiar with the council's safeguarding policy and procedure. Councillors will receive additional guidance on their safeguarding responsibilities as part of the councillor induction process.