

Safeguarding Children, Young People and Vulnerable Adults Policy

Key contacts

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Emergencies / immediate risk of harm	Police	999

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Child Protection and Safeguarding Policy

1 INTRODUCTION

- 1.1. Safeguarding children is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.
- 1.2. Our students' welfare is our paramount concern. The board will ensure that Anglia Professional Training (APT) will safeguard and promote the welfare of students and work together with other agencies to ensure that our organisation has adequate arrangements to identify, assess and support those children who are suffering or likely to suffer harm.

2 OUR ETHOS

- 2.1 We believe that APT should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child.
- 2.2 We recognise the importance of providing an environment within our organisation that will help children feel safe and respected. We recognise the importance of enabling children to talk openly and to feel confident that they will be listened to.
- 2.3 We recognise that all adults at APT, including permanent and temporary staff, volunteers and board members, have a full and active part to play in protecting our pupils from harm.
- 2.4 We will work with parents to build an understanding of the organisation's responsibilities to ensure the welfare of all children, including the need for referrals to other agencies in some situations.

3 SCOPE

- 3.1 In line with the law, this policy defines a child as anyone under the age of 18 years.
- 3.2 This policy applies to all members of staff at APT, including all permanent, temporary and ancillary staff, governors, volunteers, contractors and external service or activity providers.

4 THE LEGAL FRAMEWORK

- 4.1 Section 175 of the Education Act 2002 places a duty on governing bodies of maintained organisations and further education institutions (including sixth-form colleges) to make arrangements for ensuring that their functions relating to the conduct of the organisation are exercised with a view to safeguarding and promoting the welfare of children who are pupils at the organisation. Section 157 of the same Act places a similar duty on non-maintained and independent organisations, including free organisations and academies.

- 4.2 Under section 10 of the Children Act 2004, all maintained organisations, further education colleges and independent organisations, including free organisations and academies, are required to cooperate with the local authority to improve the well-being of children in the local authority area.
- 4.3 Under section 14B of the Children Act 2004, the Local Safeguarding Children Board can require a school or further education institution to supply information in order to perform its functions. This must be complied with.
- 4.4 This policy and the accompanying procedures have been developed in accordance with the following statutory guidance and local safeguarding procedures:
- [Working Together to Safeguard Children: A Guide to Inter-Agency Working to Safeguard and Promote the Welfare of Children July 2018](#)
 - [Keeping Children Safe in Education: Statutory Guidance for Organisations and Colleges, September 2018](#)
 - [Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers. July 2018](#)

5 ROLES AND RESPONSIBILITIES

- 5.1 APT's lead person with overall responsibility for child protection and safeguarding is the **Designated Child Protection Officer**. We have one deputy Designated Child Protection Officer to ensure there is appropriate cover for this role at all times. The Designated Child Protection Officer's responsibilities are described in Appendix A.
- 5.2 APT has a **nominated board member** responsible for safeguarding to champion good practice, to liaise with the Managing Director and to provide information and reports to the board.
- 5.3 The **case manager for dealing with allegations** of abuse made against organisation staff members is the Managing Director. The case manager for dealing with allegations against the Managing Director is the board of directors. The procedure for managing allegations is detailed in Appendix B.
- 5.4 The **Managing Director** will ensure that the policies and procedures adopted by the board are fully implemented and sufficient resources and time are allocated to enable staff members to discharge their safeguarding responsibilities.
- 5.5 The **board of directors** is collectively responsible for ensuring that safeguarding arrangements are fully embedded within the organisation's ethos and reflected in the centre's day-to-day practice.
- 5.6 **All staff members, board members, volunteers and external providers** know how to recognise signs and symptoms of abuse, how to respond to pupils who disclose abuse and what to do if they are concerned about a child.

6 CHILD PROTECTION AND SAFEGUARDING PROCEDURE

- 6.1 We have developed a structured procedure which will be followed by all staff members at APT in cases of suspected abuse. This is detailed in Appendix B.
- 6.2 In line with the procedures, the relevant Children's Services Duty and Assessment Team will be notified as soon as there is a significant concern.
- 6.3 The name of the Designated Child Protection Officer will be clearly advertised in the organisation, with a statement explaining the organisation's role in referring and monitoring cases of suspected abuse.
- 6.4 We will ensure all parents and carers are aware of the responsibilities of staff members to safeguard and promote the welfare of children by publishing the policy and procedures on our website and by referring to them in our introductory organisation materials.

7 RECORD KEEPING

- 7.1 All child protection and welfare concerns will be recorded and kept in line with the Peterborough Local Safeguarding Children Board guidance.
- 7.2 We will continue to support any student leaving the organisation about whom there have been concerns by ensuring that all appropriate information, including child protection and welfare concerns, is forwarded under confidential cover to the student's new further education provider as a matter of priority.

8 SAFER WORKFORCE AND MANAGING ALLEGATIONS AGAINST STAFF AND VOLUNTEERS

- 8.1 We will prevent people who pose risks to children from working in our centre by ensuring that all individuals working in any capacity at our centre have been subjected to safeguarding checks in line with the statutory guidance [*Keeping Children Safe in Education: Statutory Guidance for Organisations and Colleges, September 2018*](#).
- 8.2 We will ensure that agencies and third parties supplying staff provide us evidence that they have made the appropriate level of safeguarding check on individuals working in our centre.
- 8.3 Every job description and person specification will have a clear statement about the safeguarding responsibilities of the post holder.
- 8.4 We will ensure that at least one member of every interview panel has completed safer recruitment training.

- 8.5 We have a procedure in place to handle allegations against members of staff and volunteers in line with [Keeping Children Safe in Education: Statutory Guidance for Organisations and Colleges, September 2018](#). This procedure is detailed in Appendix B.

9 STAFF INDUCTION, TRAINING AND DEVELOPMENT

- 9.1 All new members of staff, including newly-qualified teachers and teaching assistants, will be given induction that includes basic child protection training on how to recognise signs of abuse, how to respond to any concerns, e-safety and familiarisation with the child protection policy and other related policies.
- 9.2 The induction will be proportionate to staff members' roles and responsibilities and will include, at a minimum, the online child protection training provided by the Peterborough Local Safeguarding Children Board.
- 9.3 The Designated Child Protection Officer will undergo updated child protection training every two years.
- 9.4 All staff members of the centre will undergo child protection training (whole-organisation training) at least every three years.
- 9.5 Staff members who miss the whole-organisation training will be required to undertake other relevant training to make up for it, e.g. by joining another organisation's whole-organisation training.
- 9.6 The nominated board director for child protection will undergo appropriate training prior to or soon after appointment to the role; this training will be updated every two years.
- 9.7 We will ensure that staff members provided by other agencies and third parties, e.g. supply teachers, have received appropriate child protection training commensurate with their roles before starting work. They will be given the opportunity to take part in whole-organisation training if it takes place during their period of work for the centre.
- 9.8 The Designated Child Protection Officer will provide an annual briefing to the organisation on any changes to child protection legislation and procedures and relevant learning from local and national serious case reviews.
- 9.9 The organisation will maintain accurate records of staff induction and training.

10 CONFIDENTIALITY, CONSENT AND INFORMATION SHARING

- 10.1 We recognise that all matters relating to child protection are confidential.
- 10.2 The Managing Director or the Designated Child Protection Officer will disclose any information about a pupil to other members of staff on a need-to-know basis only.

- 10.3 All staff members must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or well-being.
- 10.4 All staff members have a professional responsibility to share information with other agencies in order to safeguard children.
- 10.5 All our staff members who come into contact with children will be given appropriate training to understand the purpose of information sharing in order to safeguard and promote children's welfare.
- 10.6 We will ensure that staff members are confident about what they can and should do under the law, including how to obtain consent to share information and when information can be shared without consent. This is covered in greater detail in Appendix B.

11 INTER-AGENCY WORKING

- 11.1 We will develop and promote effective working relationships with other agencies, including agencies providing early help services to children, the police and Children's Social Care.
- 11.2 We will ensure that relevant staff members participate in multi-agency meetings and forums, including child protection conferences and core groups, to consider individual children.
- 11.3 We will participate in serious case reviews, other reviews and file audits as and when required to do so by the Peterborough Local Safeguarding Children Board. We will ensure that we have a clear process for gathering the evidence required for reviews and audits, embedding recommendations into practice and completing required actions within agreed timescales.

12 CONTRACTORS, SERVICE AND ACTIVITY PROVIDERS AND WORK PLACEMENT PROVIDERS

- 12.1 We will ensure that contractors and providers are aware of our centre's child protection policy and procedures. We will require that employees and volunteers provided by these organisations use our procedure to report concerns.
- 12.2 We will seek assurance that employees and volunteers provided by these organisations and working with our children have been subjected to the appropriate level of safeguarding check in line with [*Keeping Children Safe in Education: Statutory Guidance for Organisations and Colleges, September 2018*](#). If assurance is not obtained, permission to work with our children or use our centre premises may be refused.
- 12.3 When we commission services from other organisations, we will ensure that compliance with our policy and procedures is a contractual requirement.

13 WHISTLE-BLOWING AND COMPLAINTS

- 13.1 We recognise that children cannot be expected to raise concerns in an environment where staff members fail to do so.
- 13.2 We will ensure that all staff members are aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues. If necessary, they will speak with the Managing Director, the board of directors, or the Local Authority Designated Officer.
- 13.3 We have a clear reporting procedure for children, parents and other people to report concerns or complaints, including abusive or poor practice.
- 13.4 We will actively seek the views of children, parents and carers and staff members on our child protection arrangements through surveys, questionnaires and other means.

14 SITE SECURITY

- 14.1 All staff members have a responsibility to ensure our buildings and grounds are secure and for reporting concerns that may come to light.
- 14.2 We check the identity of all visitors and volunteers coming into the centre. Visitors are expected to sign in and out in the visitors' log and will be accompanied by a member of staff whilst on site. Any individual who is not known or identifiable will be challenged for clarification and reassurance.
- 14.3 The centre will not accept the behaviour of any individual, parent or anyone else, that threatens security or leads others, child or adult, to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse the person access to the site.

15 QUALITY ASSURANCE

- 15.1 We will ensure that systems are in place to monitor the implementation of and compliance with this policy and accompanying procedures. This will include periodic audits of child protection files and records by the Designated Child Protection Officer.
- 15.2 We will complete an audit of the centre's safeguarding arrangements at frequencies specified by the Peterborough Local Safeguarding Children Board and using the audit tool provided by them for this purpose.
- 15.3 The centre's senior management and the governing body will ensure that action is taken to remedy without delay any deficiencies and weaknesses identified in child protection arrangements.

16 POLICY REVIEW

- 16.1 This policy and the procedures will be reviewed every academic year. All other linked policies will be reviewed in line with the policy review cycle.
- 16.2 The Designated Child Protection Officer will ensure that staff members are made aware of any amendments to policies and procedures.

17 LINKED POLICES AND PROCEDURES

- 17.1 The following policies and procedures are relevant for the child protection and safeguarding policy and procedure:
- Anti-Bullying Policy
 - Attendance Policy
 - Behaviour Policy
 - Children Missing from Education Policy and Procedures
 - Complaints procedure
 - E-safety and acceptable use Policy
 - Equalities Policy
 - Keeping Records of Child Protection and Welfare Concerns: Guidance for Early Years Settings, Organisations and Colleges
 - Health and Safety Policy and other linked policies and risk assessments
 - Recruitment and Selection Policy and procedures
 - Special Educational Needs and Disabilities Policy

APPENDIX A

The role of the Designated Child Protection Officer

1 MANAGING REFERRALS

- 1.1 Refer all cases of suspected abuse to Cambridgeshire County Council's Children's Social Care and to the Police if a crime may have been committed.
- 1.2 Liaise with other agencies about safeguarding issues relating to individual children, especially ongoing enquiries under section 47 of the Children Act 1989.
- 1.3 Act as a source of support, advice and expertise to staff members on matters of child protection and safeguarding.
- 1.4 Liaise with agencies providing early help services and coordinate referrals from the organisation to targeted early help services for children in need of support.

2 RECORD KEEPING

- 2.1 Keep written records of child protection and welfare concerns in line with Peterborough Local Safeguarding Board guidance and [Keeping Child Protection and Welfare Concerns: Guidance for Early Years Settings, Organisations and College.](#)
- 2.2 Ensure a stand-alone file is created as necessary for children with safeguarding concerns.
- 2.3 Maintain a chronology of significant incidents for each child with safeguarding concerns.
- 2.4 Ensure such records are kept confidentially and securely and separate from the child's educational record.
- 2.5 As soon as a child with safeguarding concerns moves to another organisation, liaise with the new organisation's Designated Child Protection Officer for information sharing. Ensure the child's child protection or welfare concerns records are transferred to the new organisation as soon as possible.

3 INTER-AGENCY WORKING AND INFORMATION SHARING

- 3.1 Cooperate with Children's Social Care for enquiries under section 47 of the Children Act 1989.
- 3.2 Attend, or ensure other relevant staff members attend, child protection conferences, core group meetings and other multi-agency meetings, as required.
- 3.3 Liaise with other agencies working with the child, share information as appropriate and contribute to assessments.

4 TRAINING

- 4.1 Undertake appropriate training, **updated every two years**, in order to
- be able to recognise signs of abuse and how to respond to them, including special circumstances such as child sexual exploitation, female genital mutilation, fabricated or induced illness.
 - understand the assessment process for providing early help and intervention, e.g. early help process.
 - have a working knowledge of how the local authority conducts initial and review child protection case conferences and contribute effectively to these; and
 - be alert to the specific needs of children in need (as specified in section 17 of the Children Act 1989), those with special educational needs, pregnant teenagers and young carers.
- 4.2 Ensure each member of staff has access to and understands APT's child protection policy and procedures, including providing induction on these matters to new staff members.
- 4.3 Organise whole-organisation child protection training for all staff members at least **every three years**. Ensure staff members who miss the training receive it by other means, e.g. by joining another organisation's training.
- 4.4 Link with Peterborough Local Safeguarding Children Board to identify appropriate training opportunities for relevant staff members.
- 4.5 Ensure the centre allocates time and resources every year for relevant staff members to attend training.
- 4.6 Encourage a culture of listening to children and taking account of their wishes and feelings in any action the organisation takes to protect them.
- 4.7 Maintain accurate records of staff induction and training.

5 AWARENESS RAISING

- 5.1 Review the safeguarding and child protection policy and procedures annually, update and implement them.
- 5.2 Make the child protection and safeguarding policy and procedures available publicly and raise awareness of parents that referrals about suspected abuse may be made and the role of APT in any investigations that ensue.
- 5.3 Provide an annual briefing to APT on any changes to child protection legislation and procedures and relevant learning from local and national serious case reviews.

6 QUALITY ASSURANCE

- 6.1 Monitor the implementation of and compliance with policy and procedures, including periodic audits of child protection and welfare concerns files (at a minimum once a year).
- 6.2 Complete an audit of APT's safeguarding arrangements at frequencies specified by Peterborough Local Safeguarding Children Board.
- 6.3 Provide regular reports, including an annual report, to the governing body detailing changes and reviews to policy, training undertaken by staff members and the number of children with child protection plans and other relevant data.
- 6.4 Take lead responsibility for remedying any deficiencies and weaknesses identified in child protection arrangements.

APPENDIX B

Child Protection and Safeguarding Procedures

1 DEFINITIONS

- 1.1 **Abuse**, including neglect, is a form of maltreatment. A person may abuse a child by inflicting harm or by failing to prevent harm. Children may be abused within their family, in an institutional or community setting, by those known to them, or, more rarely, by a stranger.
- 1.2 **Children** are any people who have not yet reached their 18th birthday; a 16-year-old, whether living independently, in further education, in the armed forces or in hospital, is a child and is entitled to the same protection and services as anyone younger.
- 1.3 **Child protection** is part of safeguarding and promoting the welfare of children and refers to activity undertaken to protect specific children who are suffering, or likely to suffer, significant harm.
- 1.4 **Early help** means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years to teenage years.
- 1.5 **Harm** is ill treatment or impairment of health and development, including impairment suffered from seeing or hearing the ill treatment of another.
- 1.6 **Safeguarding children** is the action we take to promote the welfare of children and protect them from harm. **Safeguarding and promoting the welfare of children** is defined in [*Working Together to Safeguard Children: A Guide to Inter-Agency Working to Safeguard and Promote the Welfare of Children \(July 2018\)*](#) as:
- protecting children from maltreatment;
 - preventing impairment of children's health and development;
 - ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
 - taking action to enable all children to have the best outcomes.
- 1.7 **Significant harm** is the threshold that justifies compulsory intervention in the family in the best interests of the child. Section 31 of the Children Act 1989 states 'where the question of whether harm suffered by a child is significant turns on the child's health or development, his health or development shall be compared with that which could reasonably be expected of a similar child.'

2 CATEGORIES OF ABUSE

- 2.1 **Emotional abuse** is the persistent emotional maltreatment of a child such that it causes severe and persistent adverse effects on the child's emotional development. It may involve:
- making a child feel worthless, unloved or inadequate

- only there to meet another's needs
- inappropriate age or developmental expectations
- overprotection and limitation of exploration, learning and social interaction
- seeing or hearing the ill treatment of another, e.g. domestic abuse
- making the child feel worthless and unloved - high criticism and low warmth
- serious bullying
- exploitation or corruption

Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

- 2.2 **Neglect** is the persistent failure to meet a child's basic physical or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance misuse. Once a child is born, it may involve a parent failing to:
- provide adequate food, clothing and shelter, including exclusion from home or abandonment
 - protect a child from physical and emotional harm or danger
 - ensure adequate supervision, including the use of inadequate care givers
 - ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

- 2.3 **Physical abuse** may involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.
- 2.4 **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. Activities may involve physical contact, including penetration of any part of the body, or non-penetrative acts. They may include non-contact activities, such as involving children looking at or in the production of sexual images, including on the internet, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Child sexual exploitation is also sexual abuse; it involves children and young people receiving something, for example accommodation, drugs, gifts or affection, as a result of them performing sexual activities, or having others perform sexual activities on them. It could take the form of grooming of children, e.g. to take part in sexual activities or to post sexual images of themselves on the internet.

3 SPECIFIC SAFEGUARDING ISSUES

- 3.1 APT's staff members need to be aware of specific safeguarding issues and be alert to any risks. The Peterborough LSCB has training and information about specific issues such as child sexual exploitation, fabricated or induced illness,

female genital mutilation, private fostering, etc., and the local procedures to respond to risks.

3.2 The government website, GOV.UK, has broad government guidance on a variety of issues. The following is not a comprehensive list and staff members should search the GOV.UK website for advice on other issues.

- [bullying, including cyberbullying](#)
- [child sexual exploitation](#)
- [drugs](#)
- [fabricated or induced illness](#)
- [faith abuse](#)
- [female genital mutilation](#)
- [gangs and youth violence](#)
- [trafficking](#)

4 RECOGNITION – WHAT TO LOOK FOR

4.1 In an abusive relationship, the child may:

- appear frightened of their parent(s)
- act in a way that is inappropriate to their age and development, although full account needs to be taken of different patterns of development and different ethnic groups

4.2 In an abusive relationship, the parent or carer may:

- persistently avoid child health services and treatment of the child's illnesses
- have unrealistic expectations of the child
- frequently complain about or to the child and fail to provide attention or praise
- be absent
- be misusing substances
- persistently refuse to allow access on home visits by professionals
- be involved in domestic violence and abuse
- be socially isolated

4.3 Serious case reviews have found that parental substance misuse, domestic abuse and mental health problems, sometimes referred to as the 'toxic trio', if they coexist in a family could mean significant risks to children. Problems can be compounded by poverty, frequent house moves or eviction.

5 WHAT ACTION TO TAKE IF YOU HAVE CONCERNS ABOUT A CHILD

Staff member	What action to take if you have concerns
Any member of staff, board member, volunteer, contractor or activity provider	1. Discuss your concerns with the Designated Child Protection Officer Lynda Phillips, or in their absence, with the Deputy Designated Child Protection Officer Christine Barnes, as soon as possible, before the child leaves for the day . It is important that the child is not sent home at the end of the day without taking the right protective action. 2. Complete the child protection incident/welfare concern form and pass it to the

	<p>Designated Child Protection Officer.</p> <p>3. If the Designated Child Protection Officer or their deputy is not available, you should contact the Children’s Social Care Duty and Assessment Team yourself for a consultation about the action you need to take. Inform the Designated Child Protection Officer about your consultation and what actions you have taken.</p>
<p>Designated Child Protection Officer</p>	<p>1. You are concerned that the child is at risk of significant harm (Level 4 of need)</p> <p>1.1 Contact the relevant Duty and Assessment Team immediately.</p> <p>1.2 If you believe that the child is in immediate danger, or you suspect a crime has been committed, you must also contact the police immediately.</p> <p>1.3 If the Duty and Assessment Team accepts your contact as a referral, send them a completed safeguarding form (available from the Peterborough LSCB website within 24 hours).</p> <p>1.4 The Duty and Assessment Team may decide, in discussion with you, that the organisation is better placed to provide support. See points 2.5 and 2.6 below for further action.</p> <p>1.5 Record all your discussions and decision-making on the child protection incident/welfare concern form sent by the staff member who contacted you originally. Add it and a copy of the statement of referral to the child’s file. If the child does not have a stand-alone child protection file, you will need to create one. Update the chronology. Continue to update the child’s file and chronology as the investigation and the resulting work carry on.</p> <hr/> <p>2. You believe the child is not at risk of significant harm, but the child or their family may need support</p> <p>2.1 Identify the level of need.</p> <p>2.2 Discuss your concerns with senior colleagues in another agency, if necessary.</p> <p>2.3 Contact the Duty and Assessment Team for a consultation, without necessarily identifying the child in question, in order to develop an understanding of the child’s needs and circumstances.</p> <p>2.4 If the Duty and Assessment Team accepts your contact as a referral for social care assessment, send them a completed safeguarding referral within 24 hours, as above.</p> <p>2.5 If your consultation results in the decision that the child and family are in need of help, provide additional support in the centre and/or refer the child or their family to other agencies providing early help services.</p> <p>2.6 Record all your consultations and decision-making on the child protection incident/welfare concern form sent by the staff member who contacted you originally. Update the chronology and add referral letters and forms to the child’s file; create a stand-alone file, if one does not exist. Continue to update the file, including the chronology, as work progresses.</p>

6 DEALING WITH A DISCLOSURE MADE BY A CHILD – ADVICE FOR ALL MEMBERS OF STAFF

- 6.1 If a child discloses that he or she has been abused in some way, the member of staff or volunteer should follow this guidance.
- Listen to what is being said without displaying shock or disbelief.
 - Only ask questions when necessary to clarify.
 - Accept what is being said.
 - Allow the child to talk freely – do not put words in the child's mouth.
 - Reassure the child that what has happened is not his or her fault.
 - Do not make promises that you may not be able to keep.
 - Do not promise confidentiality – it may be necessary to refer the child to Children's Social Care.
 - Stress that it was the right thing to tell.
 - Do not criticise the alleged perpetrator.
 - Explain what has to be done next and who has to be told.
 - Inform the Designated Child Protection Officer without delay.
 - Complete the child protection incident/welfare concern form and pass it to the Designated Child Protection Officer.
 - Dealing with a disclosure from a child and safeguarding issues can be stressful. Consider seeking support for yourself and discuss this with the Designated Child Protection Officer.

7 DISCUSSING CONCERNS WITH THE FAMILY AND THE CHILD – ADVICE FOR THE DESIGNATED CHILD PROTECTION OFFICER

- 7.1 In general, you should always discuss any concerns the organisation may have with the child's parents. They need to know that you are worried about their child. However, you should not discuss your concerns if you believe that this would place the child at greater risk or lead to loss of evidence for a police investigation.
- 7.2 **If you make a decision not to discuss your concerns with the child's parents or carers** this must be recorded in the child's child protection file with a full explanation for your decision.
- 7.3 **It is important to consider the child's wishes and feelings**, if age appropriate, as part of planning what action to take in relation to concerns about their welfare.
- 7.4 When talking to children, you should take account of their age, understanding and preferred language, which may not be English. It is also important to consider how a disabled child may need support in communicating.
- 7.5 How you talk to a child will also depend on the substance and seriousness of the concerns. You may need to seek advice from Children's Social Care or the police to ensure that neither the safety of the child nor any subsequent investigation is jeopardised.
- 7.6 If concerns have arisen as a result of information given by a child, it is important to reassure the child but not to promise confidentiality.

- 7.7 **It is expected that you discuss your concerns with the parents and seek their agreement to making a referral to Children's Social Care, unless you consider that this would place the child at increased risk of significant harm.**
- 7.8 **You do not need the parents' consent to make a referral if you consider the child is in need of protection**, although parents will ultimately be made aware of which organisation made the referral.
- 7.9 If parents refuse to give consent to a referral but you decide to continue, you need to make this clear to Children's Social Care.
- 7.10 **If you decide to refer the child without the parents' consent, make sure to record this with a full explanation of your decision.**
- 7.11 When you make your referral, you should agree with Children's Social Care what the child and parents will be told, by whom and when.
- 7.12 See section 10 below for guidance on information sharing and consent.

8 EARLY HELP FOR CHILDREN AND FAMILIES

- 8.1 Most parents can look after their children without the need of help other than from their family or friends. However, some parents may need additional help from APT or other services such as the NHS. Providing help early is more effective in promoting the welfare of children than reacting later.
- 8.2 APT will work together with other agencies to provide a coordinated offer of early help, in line with [Working Together to Safeguard Children 2018](#) and local guidance, to any child who needs it.
- 8.3 We will pool our knowledge within the centre and with other agencies about which families or children need additional support in a range of ways so that we can work out how best to help them.
- 8.4 We will work closely with targeted early help services and Children's Social Care if we feel families need more support and input, or children are at risk of harm, and we will continue to provide support if other services are also needed.
- 8.5 **Targeted Youth Support Service (for children and young people aged 11 to 19 years)** works closely with secondary organisations, academies and colleges.
- 8.6 Targeted support is also provided by family keyworkers in specialist services, for example Probation, Cambridgeshire Police, and by community Nurses and Family Support Health Practitioners. These services may lead a plan of support in a similar way to targeted early help services.
- 8.7 APT will refer any child with needs where relevant to an early help service and work with the service in any early help planning they may undertake to support the child.

- 8.8 We will talk to the family about referral to a targeted early help service and explain that there may be a need to involve other professionals, including talking to a social worker about our concerns. We will seek the family's consent for the referral.
- 8.9 If the family does not consent to an early help service, we will make a judgement about whether the needs of the child will escalate or the child will become unsafe without help. If our judgement is that the needs or concerns will escalate, then we will contact the Children's Social Care Duty and Assessment Team in our area for a consultation with a qualified social worker in order to make a shared decision about whether the level of concerns calls for a referral to Children's Social Care.

9 CHILDREN'S-SOCIAL-CARE-LED RESPONSES TO CONCERNS ABOUT A CHILD

- 9.1 Once Children's Social Care has accepted our referral as needing a social-care-led response, a senior social work practitioner and their manager will evaluate the concerns to identify the sources and levels of risk and to agree what protective action may be necessary.
- 9.2 The evaluation of concerns and risks involve deciding whether:
- the child needs immediate protection and urgent action is necessary; or
 - the child is suffering, or at risk of suffering, significant harm and enquiries need to be made under section 47 of the Children Act 1989; or
 - the child is in need and should be assessed under section 17 of the Children Act 1989.
- 9.3 We will cooperate with Children's Social Care and the police in any emergency action they take using their legal powers for immediate protection of the child. This may involve removing the child from their home.
- 9.4 We will participate in any multi-agency discussions (strategy discussions), if invited to do so, and share information about the child and their family to plan the response to concerns.
- 9.5 We will share information about the child and their family for section 47 enquiries and family assessments undertaken by Children's Social Care.
- 9.6 We will ensure that a relevant staff member participates in all initial and review child protection conferences, if we are invited to attend. The staff member will work together with other agencies to discuss the need for and agree to an outcome-focused child protection plan and will ensure that the child's wishes and views are considered in their own right in planning.
- 9.7 If we are members of the core group to implement a child protection plan, we will ensure a relevant staff member participates in all core group meetings.

- 9.8 We will ensure that we complete all actions allocated to us as part of the outcome-focused plan, whether a child protection plan or a family support plan, in a timely way.
- 9.9 We will continue to monitor children once their plans are ended to ensure that they are supported and kept safe.

10 INFORMATION SHARING AND CONSENT

- 10.1 It is essential that people working with children can confidently share information as part of their day-to-day work. This is necessary not only to safeguard and protect children from harm but also to work together to support families to improve outcomes for all.
- 10.2 The organisation may have to share information about parents or carers, such as their medical history, disability or substance misuse issues, for investigations of child abuse carried out by Children's Social Care.
- 10.3 We will proactively seek out information as well as sharing it. This means checking with other professionals whether they have information that helps us to be as well informed as possible when working to support children.
- 10.4 The Data Protection Act 1998 is not a barrier to sharing information. It is there to ensure that personal information is managed in a sensible way and that a balance is struck between a person's privacy and public protection.
- 10.5 We should be sharing any concerns we have with parents at an early stage, unless this would put a child at greater risk or compromise an investigation. Parents need to know what our responsibilities are for safeguarding and protecting children and that this involves sharing information about them with other professionals.
- 10.6 Be clear about the purpose of sharing confidential information and only share as much as you need to achieve your purpose.
- 10.7 Try to get consent from parents (or the child, if they have sufficient understanding¹) to share information, if possible. However, **you do not need consent if you have serious concerns about a child's safety and well-being. If you decide to share information without consent, you should record this with a full explanation of your decision.**
- 10.8 **Consent should not be sought from parents or carers (or the child, if they have sufficient understanding), if:**
- it would place a child at increased risk of harm; or
 - it would place an adult at risk of serious harm; or

¹ Children aged 12 or over may generally be expected to have sufficient understanding. Younger children may also have sufficient understanding. All people aged 16 and over are presumed, in law, to have the capacity to give or withhold their consent, unless there is evidence to the contrary.

- it would prejudice a criminal investigation; or
- it would lead to unjustified delay in making enquiries about allegations of significant harm to a child; or
- required by law or a court order to share information.

10.9 **Consent is not necessary** in cases where Children's Social Care are making child protection enquiries under section 47 of the Children Act 1989. Information needs to be shared with Children's Social Care; staff members must make sure to record what information has been shared.

10.10 **Consent is necessary**, for:

- Children's Social Care investigations or assessments of concerns under section 17 of the Children Act 1989. Children's Social Care will assume that we have obtained consent from the parents to share information unless we make them aware that there is a specific issue about consent. This must be discussed with a social worker in the Duty and Assessment Team.
- early help assessments. Assessments are undertaken with the agreement of the child and their parents or carers.

10.11 If you are in any doubt about the need for seeking consent, get advice from the Designated Child Protection Officer or from the Children's Social Care Duty and Assessment Team.

10.12 Keep a record of your decision to share information, with or without consent, and the reasons for it. Remember also that it is just as important to keep a record of why you decided not to share information as why you did so.

11 RECORD KEEPING

11.1 Good record keeping is an important part of APT's accountability to children and their families and will help us in meeting our key responsibility to respond appropriately to welfare concerns about children.

11.2 Records should be factual, accurate, relevant, up to date and auditable. They should support monitoring, risk assessment and planning for children and enable informed and timely decisions about appropriate action to take.

11.3 All staff members, board members, volunteers, contractors and activity providers should ensure that they record and report safeguarding concerns in line with guidance from the Peterborough Local Safeguarding Children Board (LSCB).

11.4 The Designated Child Protection Officer will ensure that records are maintained appropriately for children with safeguarding concerns and that stand-alone files are created and maintained in line with requirements of the above guidance.

12 PROFESSIONAL CHALLENGE AND DISAGREEMENTS

- 12.1 Working with children and families, and in particular child protection work, is stressful and complex, as well as involving uncertainty and strong feelings. To ensure that the best decisions are made for children, we need to be able to challenge one another's practice.
- 12.2 We will promote a culture within our centre that enables all staff members to raise, without fear of repercussions, any concerns they may have about the management of child protection in the centre. This may include raising concerns about decisions, action and inaction by colleagues about individual children. If necessary, staff members will speak with the Designated Child Protection Officer, the Managing Director, the board of directors or with the Local Authority Designated Officer.
- 12.3 Cooperation across agencies is crucial; professionals need to work together, using their skills and experience, to make a robust contribution to safeguarding children and promoting their welfare within the framework of discussions, meetings, conferences and case management.
- 12.4 If there are any professional disagreements with practitioners from other agencies, the Designated Child Protection Officer or the Managing Director will raise concerns with the relevant agency's safeguarding lead.
- 12.5 If APT disagrees with the child protection conference chair's decision, the Designated Child Protection Officer will consider whether they wish to challenge it further and raise the matter with Children's Services Head of Safeguarding.

13 SAFER RECRUITMENT

- 13.1 APT has robust recruitment and vetting procedures to help prevent unsuitable people from working with children.
- 13.2 Our job advertisements and application packs make explicit reference to the APT's commitment to safeguarding children, including compliance with disclosure and barring regulations and clear statements in the job description and person specification about the staff member's safeguarding responsibilities.
- 13.3 All staff members who have contact with children, young people and families will have appropriate pre-employment checks in line with [*Keeping Children Safe in Education: Statutory Guidance for Organisations and Colleges, September 2018*](#).
- 13.4 At least one member on every short listing and interview panel will have completed safer recruitment training.
- 13.5 The Managing Director is responsible for ensuring that our **single central record of pre-employment checks** is accurate and up to date.

14 PROCEDURE FOR MANAGING ALLEGATIONS OF ABUSE MADE AGAINST CENTRE STAFF MEMBERS

- 14.1 APT takes seriously all allegations of abuse made against staff members, including volunteers, and will investigate them in line with the statutory guidance, [*Keeping Children Safe in Education: Statutory Guidance for Organisations and Colleges, September 2018.*](#)
- 14.2 The process described below is a summary of the procedure described in the above documents. The case manager for the investigation should refer to them for details.
- 14.3 **The procedure applies to all adults working in the organisation or providing a service on behalf of the organisation to our pupils either within or outside organisation premises**, i.e. all permanent, temporary and ancillary staff, board members, volunteers, contractors and external service or activity providers (**collectively referred to as staff or staff members** in this procedure).
- 14.4 The allegations management procedure will be used in all cases where it is alleged that a staff member, has:
- behaved in a way that has harmed a child, or may have harmed a child; or
 - possibly committed a criminal offence against or related to a child; or
 - behaved towards a child or children in a way that indicates that they would pose a risk of harm if they work regularly or closely with children.
- 14.5 Allegations may arise in a number of ways, for example a report from a child, a complaint from a parent, or a concern raised by another adult within the centre. An allegation may concern someone's behaviour or actions within their job or a voluntary activity, or within their family or private life.
- 14.6 **Any concerns will be considered in the context of the four types of abuse** (see section 2 above).
- 14.7 Concerns include inappropriate relationships between adults and children. For example:
- a sexual relationship between a child under 18 and an adult in a position of trust with them, even if the relationship may appear to be consensual;
 - grooming, i.e. meeting a child under 16 with intent to commit a relevant offence (section 15 of the Sexual Offences Act 2003); or
 - other behaviour that gives rise to concerns, such as possession of abusive images of children or inappropriate contact through texts or online, inappropriate messages, gifts or socialising with children.
- 14.8 If an allegation or concern arises about a staff member outside of their work with children, and this may present a risk to children for whom the staff member is responsible, the general principles outlined in these procedures will still apply.
- 14.9 **Roles and responsibilities:**
- **Anyone who has concerns** about, or has received an allegation about, the behaviour of a staff member **needs to report the concerns immediately to the Managing Director. In the absence of the Managing Director, or if the Managing Director is the subject of the**

allegation, concerns must be reported to the board of directors. If both the Managing Director and the board of directors are absent, the allegation needs to be reported to the Local Authority Designated Officer (LADO).

- The **Managing Director will act as the case manager** for investigations of allegations and liaise with the **LADO**.
- The **board of directors will act as the case manager**, if the allegation is made against the Managing Director.
- The **LADO** is involved in the overall management and oversight of individual cases. They will provide advice and guidance to the case manager, liaise with the police and other agencies and monitor the progress of cases to ensure that they are dealt with as quickly as possible, consistent with a thorough and fair process.

14.10 Initial action by the person noticing concerns or receiving an allegation first:

- Treat the matter seriously and keep an open mind.
- Do not make assumptions or offer alternative explanations.
- Do not investigate or ask leading questions, if seeking clarification.
- Do not promise confidentiality, but give assurance that the information will only be shared on a need-to-know basis.
- Act quickly.
- Make a written record of the information. Where possible, record the exact words of the person making the allegation or the child's own words.
- Record the time, date and place and names of people present when the allegation was made or concerning behaviour was observed. Record the time, date and place of alleged incidents, persons present and what was said, if these were mentioned by the person making the allegation.
- Sign and date the written record.
- Immediately report the matter to the Managing Director or the chair of governors, as in 14.9 above and give them the written record.

14.11 Initial response by the case manager:

- Do not investigate the matter immediately or interview the staff member or the child concerned.
- Obtain written details of the concern or allegation, signed and dated by the person reporting it. Countersign and date the written details and record the decisions made and the reasons for those decisions.
- Contact the LADO immediately to report the allegation and for a consultation. The allegation must be reported within one day at the most.
- If the allegation requires immediate attention but is received out of hours, contact the Children's Services Emergency Duty Team or the police and inform the LADO as soon as possible.
- Refer allegations against a staff member who is no longer working in the organisation to the police in the first instance and then inform the LADO.

14.12 Initial consideration of the allegation by the case manager and the LADO:

- The case manager and the LADO will consider the nature, content and context of the allegation and agree a course of action, including whether further information is needed.
- The case manager may need to obtain relevant additional information, such as previous history, whether the child or their family have made similar allegations in the past and the staff member's current contact with children.
- If the allegation is not demonstrably false and there is cause to suspect that a child is suffering or likely to suffer significant harm, the LADO will refer the case to Children's Social Care and ask them to convene a strategy discussion.
- The LADO will consult the police if a criminal offence may have been committed. If the threshold for significant harm is not reached but a police investigation may be needed, the LADO will immediately inform the police.
- If an investigation by Children's Social Care or the police is not necessary, the case manager and the LADO will discuss the options open to the organisation depending on the nature of the allegation and the evidence available. This will range from taking no further action to dismissal or a decision not to use the staff member's services in the future.
- If the initial evaluation leads to no further action against the staff member concerned, the decision and justification should be recorded by both the case manager and the LADO. Agreement should be reached on what information should be put in writing to the individual and what action should follow, including informing the person who made the allegation originally.

14.13 Persons to be notified:

- After consultation with the LADO, the case manager should inform the accused person about the allegation as soon as possible.
- **However, if a strategy discussion is needed, or the police or Children's Social Care need to be involved, the case manager should not inform the accused person until those agencies have been consulted and have agreed what information can be disclosed to the individual.**
- In principle, the case manager should inform the parents or carers of the children involved about the allegation. The LADO should be consulted first to ensure that this will not impede any investigation or disciplinary process. In some cases, the parents or carers may need to be informed right away, e.g. if a child is injured and needs medical attention.
- The parents or carers and the child, if sufficiently mature, should be helped to understand the process and kept informed about the progress of the case and the outcome if no criminal prosecution will take place.
-

14.14 Confidentiality:

- Every effort should be made to maintain confidentiality and guard against publicity while an allegation is being investigated. Information should be restricted to only those who need to know in order to protect the children

concerned, carry out the investigation and manage the disciplinary process.

- The Education Act 2011 introduced **reporting restrictions** preventing the publication of any material that may lead to the identification of a teacher who has been accused by, or on behalf of, a pupil from the same organisation.
- Reporting restrictions apply until the point that the accused person is charged with an offence, or until the Secretary of State publishes information about the investigation or decision from the disciplinary process. Reporting restrictions also cease if the accused person goes public themselves, thereby waiving their right to anonymity.
- Breaching reporting restrictions is a criminal offence. Therefore, the case manager should inform the parents or carers concerned about the implications of publishing details of the allegation on social networking sites. They should be advised to seek legal advice, if they wish to apply to court for removal of reporting restrictions.
- The case manager should discuss with the LADO how best to manage speculation, leaks and gossip within the organisation and the community at large, and press interest, if it arises.

14.15 **Supporting people:**

- The centre together with Children's Social Care and the police, if they are involved, will consider the impact on the child concerned and provide support as appropriate.
- The Managing Director will ensure that the child and family are kept informed of the progress of the investigation.
- The staff member who is the subject of the allegation will be advised to contact their union, professional association or a colleague for support.
- Personnel Services will be consulted at the earliest opportunity to ensure that the staff member is provided with appropriate support, if necessary, through occupational health or welfare arrangements.
- The Managing Director will appoint a named representative to keep the staff member updated on the progress of the investigation; this will continue during any police or section 47 investigation or disciplinary investigation.

14.16 **Managing risk during the investigation:**

- The perceived level of risk during the investigation needs to be considered and managed. In some situations the level of risk may require the staff member not to be working with specific children or all children in the organisation until the investigation is completed.
- There are several options open to the employer, including:
 - redeployment so as not to come into direct contact with one or more children; or
 - refraining (agreeing that the person will not work with children during the investigation); or
 - suspension.
- Refraining and suspension should be considered as neutral acts and should not be automatic. Suspension should be considered only in cases

where there is cause to believe children in the organisation are at risk of harm or the allegation is so serious that it might be grounds for dismissal.

- Decisions about risk are best made in a multi-agency forum such as the strategy discussion. The LADO will canvass the views of the agencies participating and inform the case manager. However, only the employer has the power to refrain or suspend.
- Possible risks to the children involved and any children in the accused staff member's home, work or community life will be evaluated and managed.

14.17 Timescales:

- Cases will be resolved as quickly as possible, consistent with a thorough and fair investigation.
- It is expected that the majority of cases should be resolved within one month and all but the most exceptional cases should be resolved within 12 months.
- However, the timing will depend on the nature, seriousness and complexity of the case and the right outcome is far more important than meeting timescales.
- Cases where it is immediately apparent that the allegation is unsubstantiated or malicious should be resolved within one week.
- The centre should discuss the timing of actions with the LADO for all allegations that do not require police involvement but for which there are child protection concerns.
- If the nature of the allegation does not require formal disciplinary action, the organisation should start appropriate action within three working days.
- If a disciplinary hearing is required and can be held without further investigation, the hearing should be held within 15 working days.

14.18 Resignations and compromise agreements:

- The allegation will be investigated according to procedure, even if the accused staff member resigns or ceases to provide their services.
- Every effort will be made to reach a conclusion to the case should the staff member refuse to cooperate, having been given a full opportunity to answer the allegation and make representation.
- Although it would not be possible to apply disciplinary sanctions if the period of notice expires before the conclusion of the investigation, the outcome of the disciplinary process will be recorded.
- The centre will not use 'compromise/settlement agreements', for example where the staff member agrees to resign provided that disciplinary action is not taken and that a future reference is agreed.

14.19 Outcomes of investigations of allegations:

- **Substantiated** – there is sufficient evidence to prove the allegation
- **Malicious** – there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive
- **False** – there is sufficient evidence to disprove the allegation
- **Unsubstantiated** – there is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.

14.20 **Disciplinary or suitability process and investigations:**

- The LADO and the case manager will discuss whether disciplinary action is appropriate in all cases where:
 - it is clear at the outset, or decided by a strategy discussion, that a police investigation or section 47 enquiry is not necessary; or
 - the police or the Crown Prosecution Service informs that the criminal investigation and subsequent trial are complete, or that an investigation is to be closed without charge, or prosecution is discontinued.
- The discussion will consider any potential misconduct or gross misconduct by the staff member, and take into account:
 - the information provided by the police and Children's Services;
 - the result of any investigation or trial; and
 - the different standards of proof in disciplinary and criminal proceedings.
- In the case of supply, contract or volunteer workers, the LADO and the case manager will work with the providing agency in deciding whether to continue using the person's services or whether they can provide future work with children or whether to report them for barring considerations.

14.21 **Record keeping:**

- The case manager will keep a clear and comprehensive summary of the case record and provide a copy to the accused staff member. A copy of the record should also be given to the LADO.
- The record will include details of how the allegation was investigated and resolved and the decisions reached. It will be completed in collaboration with the LADO.
- Details of allegations that are found to be malicious will be removed from personnel records.
- In the case of all other allegations, the summary will be placed in the staff member's personnel file and kept until the person reaches retirement age or for a period of 10 years from the date of the allegation, if that is longer.

14.22 **References:**

- If the allegation was proven to be malicious, false or unsubstantiated, it will not be included in any references for the staff member.
- A history of repeated concerns or allegations which have all been found to be malicious, false or unsubstantiated will also not be included in any references.

14.23 **Informing the Disclosure and Barring Service (DBS):**

- The LADO will discuss with the case manager whether the organisation will refer the staff member to the DBS and, in the case of a teacher to the National College for Teaching and Leadership (NCTL), if the allegation is substantiated and the person is dismissed or the organisation ceases to use the person's services, or the person resigns or ceases to provide their services.
- **It is a legal requirement for organisations to refer to the DBS anyone:**

- who has harmed, or is likely to harm, or poses a risk of harm to a child; or
- if there is reason to believe that they have committed one of a number of listed offences (as set out in the Safeguarding Vulnerable Groups Act 2006 (Prescribed Criteria and Miscellaneous Provisions) Regulations 2009), and have been removed from working in paid or unpaid regulated activity or would have been removed had they not left.

15 Adults in need of safeguarding

15.1 Guidance

Society as a whole has become more aware of the extent of harm to adults. *No secrets: guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse* was published in 2000 and the Care Standards Act was enacted in 2001. The *No secrets* guidance provides a framework for the safeguarding of adults, including recommended structures for the investigation of allegations of abuse by local authorities. More recent government guidance, *Safeguarding Adults: a national framework of standards and good practice in adult protection work*, published in October 2005, expands the guidance in *No Secrets*.

15.2. Principles

The government has stated that three particular concepts should underpin safeguarding: protection, justice and empowerment (Minister of State, 2010). The government has also identified key principles for safeguarding which the University believes should underpin all of our work with vulnerable students. These are:

- *Empowerment*: presumption of person-led decisions and informed consent
- *Protection*: support and representation for those in greatest need
- *Prevention*: it is better to take action before harm occurs
- *Proportionality*: proportionate and 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 delivering safeguarding.

Whilst within the HE context there are not the same statutory provisions with regard to adults in need of safeguarding, the same values and principles apply. The safeguarding policy and procedures developed by APT and the term “safeguarding” used throughout this document applies equally to the protection of children and vulnerable adults.

15.3. Defining vulnerability

APT will seek to identify students who may be vulnerable or at risk and ensure that there are appropriate support measures in place for them. This is most likely

to be when the student presents to, or is referred to, APT and has mental health difficulties or a disability that puts them into the legal definition of vulnerable.

It may also relate to other factors in the University setting including:

- physical disability;
- language and community difficulties /sensory impairment;
- learning differences;
- social isolation;
- movement to the UK for education and challenges of understanding risks related to
- an unfamiliar context and culture;
- health problems, particularly long term conditions;
- drug and alcohol abuse or addiction;
- permanent or temporary reduction in physical, mental or emotional capacity brought about by life events, for example bereavement, previous abuse or trauma or other significant life events;
- is unable to demonstrate the capacity (see below) to make a decision and is in need of care and support.

(This list is not exhaustive)

Any member of staff with concerns regarding an adult student whom they believe or know to be vulnerable must follow the above processes.

15.4. Mental capacity and consent

Unlike where concerns arise in relation to children where it is a statutory requirement that action is taken to protect a child who is believed to be at risk of harm or abuse, with students who are 18 years and over (even where they have Special Educational Needs and thereby continuing educational support and funding up to the age of 25 years) issues of mental capacity and consent **MUST** be considered.

The consent of the vulnerable adult (an adult at risk) must be obtained except where:

- The vulnerable adult lacks the mental capacity to make a decision, and a risk assessment indicates that referral would be in their best interests;
- others may be at risk,
- a crime has been committed.

In determining whether an individual has capacity to give informed consent, the following factors should be considered:

- Where it is not clear whether the vulnerable person can make an informed choice, a referral for an assessment should be made to an appropriate organisation (usually Local Authority Social Services or the National Health Service) and undertaken by an appropriately qualified practitioner.
- Mental capacity is a legal concept. It is the ability at that point in time to understand, retain and use the information required to make an informed decision on a specific issue and understand the

consequences. It is also necessary to be able to communicate this decision.

- Adults are presumed to have mental capacity until it has been assessed they do not. It should be noted that because a person lacks capacity in one area then they do not inevitably lack capacity in all areas and the Mental Capacity Act 2005 is clear that each decision must be assessed in its own right by an appropriately trained individual.
- All reasonable steps must be taken to help the adult to make those decisions which they are able to. This includes being creative in the way in which information is given to the adult in an accessible form. An adult must not be treated as being unable to make a decision just because they make an unwise choice. Lack of mental capacity should only be decided using the assessment as defined by the Mental Capacity Act 2005.
- Thorough multi-disciplinary assessments should set out the reasons upon which their judgement is based and APT will seek appropriate support from Adult Social care services where concerns arise.

This policy has been approved and authorised by:

Name: Balwinder Gill

Position: Managing Director