

# A WAY OUT

# SAFEGUARDING CHILDREN POLICY

Last updated: February 2024

## Contents

1. Introduction .....	1
2. Principles of Child Safeguarding within AWO.....	1
3. Purpose .....	2
4. Scope.....	2
5. Policy Statement .....	3
6. Legal Framework.....	3
7. Partnership Working.....	4
8. Categories of Abuse .....	4
9. Key Roles and Responsibilities.....	7
Appendix 1: Organisational Chart.....	13

## 1. Introduction

### What is Child Protection?

Child protection relates to action taken to prevent children suffering harm or further harm caused by deliberate abuse and / or neglect.

Whilst we all may contribute to child protection by being alert and passing on our concerns to the authorities, child protection work can only be carried out by specific professionals such as Social Workers and Police officers.

### What is Safeguarding?

Safeguarding is about managing a safe environment for children and young people to access.

It combines both reactive and preventative approaches to the management of children's safety and well-being. It describes a wider set of actions and responsibilities designed to promote children's wellbeing.

Safeguarding includes child protection, but also involves keeping children safe from accidents through neglect, bullying, crime and issues such as ensuring safer recruitment of staff and volunteers and the implementation of safe working practices.

Any group or organisation that works with children and young people should be able to deal with situations when they arise, but also be able to take all reasonable steps to prevent, wherever possible, situations arising in the first place.

### **Safeguarding children is EVERYONE'S responsibility and business in any organisation.**

All children and vulnerable people have the right to feel safe and secure in any environment - at home, in the community or in a faith based organisation.

People who work with children on a regular basis in faith based organisation and other community organisations can play an important role in identifying children at risk of neglect or abuse.

Good practice reduces the potential for abuse and increases safety for children.

Organisations must therefore develop policies, procedures and practices to safeguard children in their care.

## 2. Principles of Child Safeguarding within AWO

The <b>child's interests are paramount</b> and his or her safety and welfare will always be given first priority.
Children and young people have the <b>right to protection from neglect, abuse and exploitation</b> (article 19 of the United Nations Convention on the Rights of the Child).
Safeguarding children and young people (including child protection) is <b>everyone's responsibility</b> .
A child's concern will be <b>listened to and always taken seriously, and we will make opportunities to ensure that the voice of the child can be heard</b> .
The <b>limits of confidentiality</b> in the context of child protection will be <b>explained</b> to service users at the time of their initial involvement with the organisation.
Care will be taken <b>not to infringe privacy and confidentiality any more than is necessary</b> to safeguard the welfare of the child. However where there are safeguarding concerns disclosure of confidential information may well be required.

In <b>assessing the need for action</b> when faced with safeguarding concerns, staff will consider the situation in the context of family relationships, religion and culture, but will not condone or ignore abusive behaviours that may be deemed acceptable to others.
Unless there are exceptional circumstances <b>staff will share their concerns with service users</b> and inform them of any action they intend to take.
Arrangements will be made to <b>assist with communication</b> in circumstances of disability or where English is not the service user's first language.
Staff will <b>use plain, jargon-free language appropriate to the age</b> , understanding and culture of each person, and will explain any unavoidable technical or professional terms.
A Way Out will ensure that all <b>staff, including volunteers and trustees, understand the charity's safeguarding children policy</b> , and are trained to appropriate levels in safeguarding and child protection matters, including the latest Government guidance and requirements.
A Way Out will ensure that <b>adequate pre-recruitment checks</b> are undertaken for all staff, including volunteers and trustees. This includes requesting independent references from two sources and completion of an enhanced DBS disclosure application for which A Way Out will cover the cost. The contents of all DBS disclosures will be reviewed by the Management Team before permitting the staff member to work in an unsupervised capacity with any client group.
A Way Out will ensure that the <b>child protection procedures</b> for the authorities within which it operates are <b>understood</b> , in order to maintain good working relationships and appropriate levels of co-operation. This will include staff attending relevant training sessions arranged by the LSCB.
A Way Out will ensure that all <b>staff receive appropriate supervision</b> on a regular basis and have access to a line manager in the event of the need for an urgent case discussion.

### 3. Purpose

The purpose of this policy is to outline the principles and definitions that underpin safeguarding work, along with detailing the statutory duties. The policy is linked to:

- Safeguarding Adults Policy
- Information Sharing Policy
- Data Protection Policy
- Whistleblowing Policy
- Confidentiality Policy
- Child Protection Procedure
- Risk Assessments Guidance
- PREVENT Policy

### 4. Scope

This policy sets out the responsibilities of A Way Out to help protect children from abuse or neglect. Every child or young person has the right to protection. A Way Out endeavours to deliver positive outcomes for children and young people and to help protect them from harm.

This policy covers any child up to the age of 18 regardless of their age, gender, religion, ethnicity, sexual orientation and disability.

The policy aims to demonstrate that safeguarding is everyone's responsibility and includes all staff, volunteers and Trustees at A Way Out.

## 5. Policy Statement

A Way Out believes that children must be protected from harm at all times:

- We believe every Child should feel valued, safe and happy. We want to make sure that Children we have contact with know this and are empowered to tell us if they are suffering harm.
- We want Children who use or have contact with this Organisation to feel safe whilst enjoying what we have to offer.
- We want Parents and Carers who use or attend our Organisation to be supported to care for their Children in a way that promotes their Child's health and wellbeing and keeps them safe.
- We want Organisations who work with or commission work from us, or who provide funding to us to have confidence and recognise that we are a safe Organisation.
- We will achieve this by having an effective Safeguarding Children Procedure and following National Guidance (What to Do if you're worried a Child Is Being Abused) and Local Procedures (<http://www.teescpp.org.uk>). We will also provide opportunity for all staff within A Way Out to attend external training and learning events to develop their understanding of multi-agency working.
- If we discover or suspect a Child is suffering harm, we will notify Social Care by completing a SAFER referral form (<https://www.teescpp.org.uk/forms/safer-referral-form/>) and sending to:

**Hartlepool & Stockton Children's Hub:** Email: [HSSCP@hartlepool.gov.uk](mailto:HSSCP@hartlepool.gov.uk) Ring to follow up only if the child is at immediate risk: 01429 284284.

**Middlesbrough Children's Hub:** Email: [MiddlesbroughMACH@middlesbrough.gov.uk](mailto:MiddlesbroughMACH@middlesbrough.gov.uk) Ring to follow up only if the child is at immediate risk: 01642 726004.

**Emergency Duty Team (Outside of Office Hours)** Tel: 01642 524552 or Police: Tel: 101/999 in order that they can be protected if necessary.

- This Safeguarding Children Policy Statement and our Safeguarding Children Procedure applies to all staff, trustees, volunteers and users of A Way Out and anyone carrying out any work for us or using our premises.
- We will review our Safeguarding Children Policy and Procedures at least every 2 years to make sure they are still relevant and effective.

Director/Manager of Organisation:



Signed:

Kay Nicolson

Date:

29/12/23

## 6. Legal Framework

The policy has been developed within the context of the law and guidance that seeks to protect children including:

- Children Act 1989.
- Adoption and Children Act 2002.
- Police Act 1997.
- Human Rights Act 1998.

- Crime and Disorder Act 1998.
- Protection of Children Act 1999.
- Children Act 2004.
- UN Convention on the Rights of the Child.
- Working Together to Safeguard Children 2018

Further links to useful websites can be seen at page 13.

## 7. Partnership Working

We work closely with a variety of partner agencies across the statutory, voluntary and private sectors and are members of a number of multi-agency forums that seek to work collectively to safeguard children. Our collaborative approach helps us to protect, prevent and identify safeguarding issues for the children and young people we work with.

We are members of the Hartlepool and Stockton Safeguarding Partners (HSSCP'S) and strategic sub group for VEMT and take part in the Early Help Panel meetings.

We have partnership agreements and arrangements set up with a range of agencies and services across the Stockton area:

- Drug and alcohol treatment provider e.g. Lifeline
- Youth Direction
- Housing Options
- Police
- Social Services
- Mental health support providers
- Domestic abuse specialists
- Sexual Health
- Two primary schools in Port Clarence and Thornaby
- CSE specialists e.g. Barnardos ACE project
- Housing/support accommodation providers
- Residential children's homes
- The Local Authority – Children's Hub
- Health Care Providers
- Northfield Secondary School

## 8. Categories of Abuse

<b>PHYSICAL ABUSE</b>
May involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent/carer fabricates the symptoms of, or deliberately induces illness in a child.
<b>EMOTIONAL ABUSE</b>
Is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or "making fun" of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying, (including cyber- bullying) causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
<b>SEXUAL ABUSE</b>

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may include non-contact activities, such as involving children in looking at, or in the production of, sexual online images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
<b>NEGLECT</b>
Is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); or ensure access to appropriate medical care or treatment).
<b>MODERN SLAVERY</b>
Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
<b>DISCRIMINATORY ABUSE</b>
Including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.

**Possible signs of abuse include:**

Unexplained or suspicious injuries such as bruising cuts or burns, particularly if situated on a part of the body not normally prone to such injuries or the explanation of the cause of the injury is does not seem right. In addition to be cautious of any injuries on a non-mobile child.

The child discloses abuse or describes what appears to be an abusive act.

Someone else (child or adult) expresses concern about the welfare of another child.

Unexplained change in behaviour such as withdrawal or sudden outbursts of temper.

Inappropriate sexual awareness or sexually explicit behaviour

Distrust of adults, particularly those with whom a close relationship would normally be expected.

Difficulty in making friends / forming relationships.

Eating disorders, depression, self-harm or suicide attempts.

Any change in behaviour and demeanour not usually expected of that child/young person – this could be a sign and would need further exploration with the individual child/young person.

**Intersectional risk factors:**

Refers to the combination of risk factors that has become important in safeguarding and is a concept that everyone with safeguarding responsibilities should be aware of, so that the best interests of children can be prioritised.

Concerning intersectional risk factors are made up of three pervasive issues: **domestic abuse, mental ill-health, and substance misuse** and is a significant indicator of increased risk to children and young people within a family environment. It is important for practitioners to understand how these risk factors interlink and to ensure there is a multi-agency response.

While living with mental health problems, using alcohol or drugs, or experiencing domestic abuse does not necessarily mean that a parent or carer will be unable to safeguard their child from significant harm, each issue has a range of other potentially negative consequences for children.

**Contextual Safeguarding:**

Contextual safeguarding recognises that as young people grow and develop, they are influenced by a whole range of environments and people outside of their family. For example, in school or college, in the local community, in their peer

groups or online. Children and young people may encounter risk in any of these environments. Sometimes the different contexts are inter-related and can mean that children and young people may encounter multiple risks. Contextual safeguarding looks at how we can best understand these risks, engage with children and young people and help to keep them safe. It's an approach that's often been used to apply to adolescents, through the lessons can equally be applied to younger children, especially in today's changing world.

### [Contextual safeguarding | NSPCC Learning](#)

#### **Domestic Abuse:**

- Creates an inconsistent and unpredictable environment for children.
- May lead to parents or carers showing a lack of emotional warmth as well as high levels of aggression.
- Can be extremely distressing and cause the child serious harm. It can even impair the development of the brain in babies.
- Might cause children to become aggressive themselves or lead to them developing mental health problems.
- Can be connected to neglect and physical/emotional abuse of children.

#### **Mental ill-health:**

- Can inhibit a parent or carer's ability to respond to a child's basic and emotional needs and stop them giving consistent care.
- Can lead to parents being absent from home – for example, if they need to spend time at hospital.
- Can cause a parent to be 'intrusive and hostile' or 'withdrawn and disengaged'.
- Can lead to children experiencing emotional, psychological, and behavioural problems.
- Could lead to parents misusing drugs or alcohol.
- Can impact the family's financial situation – for example, if the parent can no longer work.

#### **Substance Misuse:**

- Is a significant feature in cases where children have been seriously harmed or killed.
- Is linked with poor mental health, particularly depression.
- Can lead to unstable home life and inconsistent care.
- Can inhibit a parent's ability to meet their child's basic, emotional, social, and developmental needs – for example, they might leave their home cold and without adequate food or prioritise drugs or alcohol over their child.
- Can force a child to act as carer for their siblings, impacting their own development and academic achievement.
- Can be scary and confusing for children to witness.
- Can give parents slower reaction times and make them unable to assess risks to their child.
- May lead to children being coerced into criminal activities, such as collecting their parent or carer's drugs.

The new 'Prevent Duty' established under the Counter Terrorism and Security Act 2015 requires responsible organisations to 'have due regard to the need to prevent individuals from being drawn into terrorism in the exercise of their duties.' This includes working with children and young people.

Children, Young People and adults can be drawn into violence, or they can be exposed to extremist messages and information as well as terrorist propaganda by various means. These can include exposure through the influence of family members or friends and /or direct contact with extremist groups and organisations or increasingly, through the internet and social media. This can place a child, young person or adult at risk of being drawn into criminal activity and has the potential to cause significant harm.

PREVENT training can be accessed and completed at: [www.elearning.prevent.homeoffice.gov.uk](http://www.elearning.prevent.homeoffice.gov.uk)

Please refer to A Way Out PREVENT policy 04701.

## 9. Key Roles and Responsibilities

### All Staff

All staff and volunteers have a duty to report suspected abuse or neglect without delay taking due care and attention and guidance from Co-ordinators, Team Leaders and the Child Safeguarding Leads as stated below. You should not:

- promise to keep abuse a secret.
- alert the abuser as this could make matters worse and make it difficult to help the child.
- delay in reporting the abuse.

Should you identify or suspect abuse or neglect or someone tells you that this is happening you should immediately speak to your Service Manager to make them aware of the situation prior to escalating the concern. Keeping your Service Manager informed of your concern allows them to appropriately manage the service/staff/service users safely in conjunction with your concern and to provide support to you whilst you report, record and take action.

Following notification to the Service Manager the concern will need to be escalated for consideration and decision making to the Child Safeguarding Lead. This should be done as soon as practicable and when possible, on the same day.

### Adult and Child Safeguarding Leads

The Adult and Child Safeguarding Leads in the organisation are:

- Kay Nicolson, Chief Executive ([kay.nicolson@awayout.co.uk](mailto:kay.nicolson@awayout.co.uk))
- Michelle Carr (Trustee Safeguarding Lead (via [kay.nicolson@awayout.co.uk](mailto:kay.nicolson@awayout.co.uk)))
- Sue Willoughby, Head of Service Unity ([susan.willoughby@awayout.co.uk](mailto:susan.willoughby@awayout.co.uk))
- Jane Hill, Head of Service Horizon ([jane.hill@awayout.co.uk](mailto:jane.hill@awayout.co.uk))
- Vicky Hugill, Service Manager ([victoria.hugill@awayout.co.uk](mailto:victoria.hugill@awayout.co.uk))
- Charlotte Gibbons, Service Manager ([charlotte.gibbons@awayout.co.uk](mailto:charlotte.gibbons@awayout.co.uk))

Part of the safeguarding lead's role is to ensure that there is always a lead available either on the premises or remotely when service delivery is taking place. A weekly safeguarding rota is shared with all staff so they are aware of who to contact should a safeguarding issue arise.

The decision to escalate a case to a statutory level should normally be made in conjunction with the Child Safeguarding Lead and in some instances, this may not be the action that is recommended by them. More information may be needed from other partner agencies or to be collected and monitored or guidance may be required from the Local Authority.

The Hartlepool & Stockton-On-Tees Safeguarding Partnership (HSSCP) seeks to ensure that the children of Stockton are protected from all forms of abuse and neglect by ensuring that everybody working with children works effectively together.

If the Child Safeguarding Lead has any doubt that a child or young person is being abused or neglected, they will advise you to inform Children's Social Care or the Police.

<b>To report concerns:</b>
<b>During working hours contact:</b>
The Children's Hub Contact Hartlepool & Stockton-on-Tees Civic Centre – Level 2 Victoria Road Hartlepool TS24 8AY
Tel: 01429 284284 / 01642 130080
Email: <a href="mailto:HSSCP@hartlepool.gov.uk">HSSCP@hartlepool.gov.uk</a>



<b>Out of hours contact:</b>
Emergency Duty Team Tel: 01642 524552

<b>In an emergency contact the Police on:</b> Tel: 101 or 999
---

They may ask you to monitor the case only or take some additional internal actions or alongside other partner agencies.

They will discuss with you what provision has been put in place to keep the child safe now if they are in imminent danger or what should be put in place to help them to stay safe.

### **Local Authority Designated Officer (LADO)**

If you believe or suspect that someone at A Way Out has:

- Behaved in a way that has harmed a child, or may have harmed a child?
- Possibly committed a criminal offence against or related to a child?
- Behaved towards a child or children in a way that indicates s/he is unsuitable to work with children?

If you have any of these concerns about staff or volunteers this should be reported through the Child Safeguarding Lead to discuss the concern prior to it being reported to:

The Local Authority Designated Officer (LADO) has a statutory responsibility to provide advice about what action needs to be taken.

Where there are any disputes about staff or volunteer concerns, this will be escalated to the CEO. Advice and guidance will be sought via the Charity's HR advisory experts and in consultation with the Chair, where necessary.

### **Contact Statutory Agency**

The Police and/ Children's Hub should this be, the recommended route will make sure that the right people investigate the abuse to help safeguard the child/children. They will listen to you and provide you with good advice. A Concern Form will need to be completed when reporting a children's safeguarding concern to the Stockton & Hartlepool Children's Hub

The Children's Hub may be able to give you the advice and information you need over the phone or by e-mail but if your enquiry is complicated or requires lengthy discussions, they will make an appointment at a convenient time and place to make sure you get the best possible assistance.

If you wish to make a referral, please download the **Safer Referral Form** and complete all relevant sections prior to contacting us. Please follow the instructions on the form for the procedure to be followed.

**Prior to referral, ask yourself these questions (remembering that your role is to gather information only and not to undertake any form of investigation, which is the remit of the social worker)**

- Is there a social worker allocated? Have I discussed this referral with that social worker?
- Has the situation been discussed with a manager/senior lead for safeguarding? Management oversight must take place prior to a referral being made.
- Have I assessed the child and documented my findings?
- Have I documented any existing risk factors or issues?
- Is there any evidence of substance abuse, domestic abuse, mental illness, a chaotic lifestyle or missed appointments?
- Has the Early Help Assessment Framework been followed?
- Has the situation been discussed with the child's parent(s) where safe and appropriate to do so?

- Do we have information about the home circumstances and others in the household?
- Have I updated myself on the children's recent health history (Health staff)?
- Do I have knowledge of any siblings? May they be at risk of harm too?

By completing the form prior to making a call you will ensure that you have the following available:

- The evidence triggering the call.
- A list of recent events
- The child's health record (Health staff)

### **Family involvement**

We would work with families and carers, involving them as part of the process around safeguarding where this is appropriate and reasonable to do so and would not negatively impact on the safety and wellbeing of the child/children.

Discussing safeguarding concerns with families and carers and promoting an open and transparent dialogue is paramount, however, it is also important to consider the concept of Gillick competence, particularly when working with young people who may express a desire to not share information with their families or carers. The guidance below gives a clear overview of the types of circumstances where there may need to be some exceptions to sharing information. Any consideration or application of the guidance must be discussed with a manager of safeguarding lead and in conjunction with Children's Services.

Gillick competence - <https://learning.nspcc.org.uk/child-protection-system/gillick-competence-fraser-guidelines/>

### **Advocacy**

A Way Out will endeavour to advocate on behalf of their beneficiaries, however in circumstances whereby a child/young persons' wishes and views conflict with their safety this must be highlighted also. A Way Out staff will endeavour to explain to a child/young person why they are concerned/worried in age appropriate language they can easily understand.

### **Information Sharing**

The Safeguarding Children policy is linked to A Way Out's Information Sharing Policy outlining that information will only be shared on a "need to know" basis when it is in the interest of the child to keep them free from abuse, harm and neglect. The policy details the Act and the Caldicott Principles that govern how to do this lawfully.

### **VENT**

VENT stands for Vulnerable, Exploited, Missing, Trafficked and is the acronym used by the four Local Safeguarding Children Boards (LSCBs) in the Tees area (Hartlepool, Middlesbrough, Redcar & Cleveland and Stockton-on-Tees) related to work they do individually and together to understand and address the issues relating to children who are at risk due to going missing from home and care and / or are at risk of sexual exploitation and trafficking.

This group chaired by Cleveland Police is attended by senior professionals of the four Tees LSCBs (Hartlepool, Middlesbrough, Redcar & Cleveland and Stockton-on-Tees) who they are accountable to. They work together to address the issues of vulnerable, exploited, missing or trafficked children through the remit of this group which meet. We are members of the operational and strategic sub group for VENT in Stockton.

### **Early Help**

Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Early help can also prevent further problems arising, for example, if it is provided as part of a support plan where a child has returned home to their family from care.

An Early Help Panel takes place once per month and is attended by individuals from both statutory and voluntary agencies within the local area to ensure any families are discussed within this arena as part of a multi-agency approach. We actively take part in this panel.

### **Record Keeping**

It is essential to maintain and make clear, concise and accurate notes in a timely manner to enable swift and appropriate action to be taken and accurate advice to be obtained. This will assist when considering what action is needed. The completion of AWO Doc 12 – Abuse Concern Form at Appendix 1 should be completed within 24 hours of a concern being flagged with the Child Safeguarding Lead regardless of the outcome. This will ensure that all the appropriate information has been correctly logged and will enable the safeguarding concern to be monitored and tracked allowing repeated, low level harm incidents to be easily identified and subsequently referred.

These forms should also be saved on the central recording system for each service area.

Sensitive personal data should be stored in line with the Information Sharing and Data Protection Policies.

Staff should discuss contents of Safeguarding Policy with clients and evidence discussion within case notes. Clients should be given the option to access Safeguarding Policy.

### **Management Arrangements**

Every month each service area during their team meeting will discuss safeguarding concerns, practices and cases. Safeguarding is a standard agenda item discussed and reviewed each month by each project to continuously improve and better meet the needs of children around safeguarding.

Every month the Senior Leadership Team (SLT) also discuss any issues/concerns that have arisen during team meetings around safeguarding. The Board of Trustees has a nominated Safeguarding Champion, Dr Michelle Carr (contact via safeguarding lead) who has the relevant professional qualifications, training and skills to advise the Board and ensures alongside Senior Managers that safeguarding concerns are considered as part of the Board's decision making and who will inform, alongside SLT, Trustees of any changes in legislation/practice/regulation in this area.

A Way Out has a whistleblowing and disciplinary policies and procedures that enable staff and volunteers to confidentiality report any safeguarding concerns that they may have that are being caused by other staff or volunteers to ensure appropriate controls and measures are in place to identify, report and address this.

### **Monitoring Arrangements**

Team Leaders carry out monthly case file reviews including associated documents to ensure compliance with policy and procedures and consistency across the team. Every 6 months Abuse Concern Forms are reviewed and shared with the team to understand any patterns/trends, action taken, multi-agency responses, lessons learnt and outcomes for the individual.

Senior Leadership Team review every 6 months the position with the Abuse Concern Forms following a review by the Team Leaders and their teams as above. Outcomes are reviewed and any appropriate recommendations and learning passed across to the service areas. Annual evaluation and monitoring reports of the same are considered by the Board of Trustees to provide the Board with assurance around safeguarding practices at A Way Out.

### **HR Practices**

A Way Out has arrangements in place to ensure safe recruitment of staff and volunteers (including staff employed on a temporary basis or via an agency). This includes:

- having a formal application and interview process
- obtaining suitable references
- obtaining proof of ID
- obtaining a satisfactory Disclosure and Barring Service (DBS) check at an appropriate level where applicable
- providing an induction, training and review for new staff/ volunteers
- annual mandatory safeguarding training

All job descriptions contain a requirement which will vary depending on level of responsibility around safeguarding. Recruitment practices involve at interview questions and scenarios around safeguarding prioritising this area as a key commitment for the organisation.

Induction programmes for new staff cover training and development in this area to ensure that we have suitably qualified and skilled staff to deliver in line with the Safeguarding Policy requirements to help empower, prevent and protect the adults that we work with to be free from abuse, harm and neglect. Updated policies and procedures will be shared with staff by Services Managers and discussed in team meetings and supervision sessions. Appraisals take place annually and look to assess safeguarding practices and delivery for each member of staff.

Training is secured through the local safeguarding boards for staff, volunteers and Trustees and where required guidance is requested from the same to further underpin our commitment to safeguard the adults that we support.

### **Lone Working**

A Way Out Lone Working Policy is in place, supporting staff and volunteers to assess and control risk, put appropriate measures in place including safe working arrangements in office and community locations and use of technology (including mobile phones and lone working devices). This is managed and monitored through safeguarding leads daily. Adherence to the lone working policy means that should staff members encounter a safeguarding concern whilst working alone they understand what they need to do to report the incident and how to get support for themselves.

See Appendix 1: Organisational Chart

## **10. Links to Useful Websites & Information**

The following may help you to further develop your good safeguarding practice:

<https://www.nspcc.org.uk/preventing-abuse/>

The NSPCC provides safeguarding information related to activities outside the home – from after school art clubs to weekend reading groups.

It supports organisations and groups; community, charities, faith, voluntary and social enterprise by providing them with a wide range of support services including templates and guidance for policies and procedures.

<https://www.hsscp.co.uk/>

This website is provided by the four Tees Local Safeguarding Children Boards (Hartlepool, Middlesbrough, Redcar & Cleveland and Stockton-On-Tees) and outlines the roles and responsibilities that professionals from organisations have in taking action and working together to safeguard and promote the welfare of children.

<https://www.hsscp.co.uk/professionals/page/51>

This link will take you to the Hartlepool & Stockton-On-Tees Safeguarding Partnership web pages, including information regarding the Multi Agency Training Programme.

<https://thirtyoneeight.org/>

thirtyone: eight – Provides professional advice and support in all areas of safeguarding children throughout the UK. Their services are used not only by churches and groups across the denominational spectrum, but increasingly by other faiths as well.

<http://minab.org.uk/>

The MINAB (Mosques and Imams National Advisory Board) Mosques and Imams National Advisory Board

<http://www.catalyststockton.org>

The VCSE Safeguarding Forum aims to allow VCSE organisations to discuss any issues they may have around Safeguarding policies and procedures in a safe environment. For more information, please contact [enquiries@catalyststockton.org](mailto:enquiries@catalyststockton.org) or call 01642 733906.

<https://knowhow.ncvo.org.uk/safeguarding/>

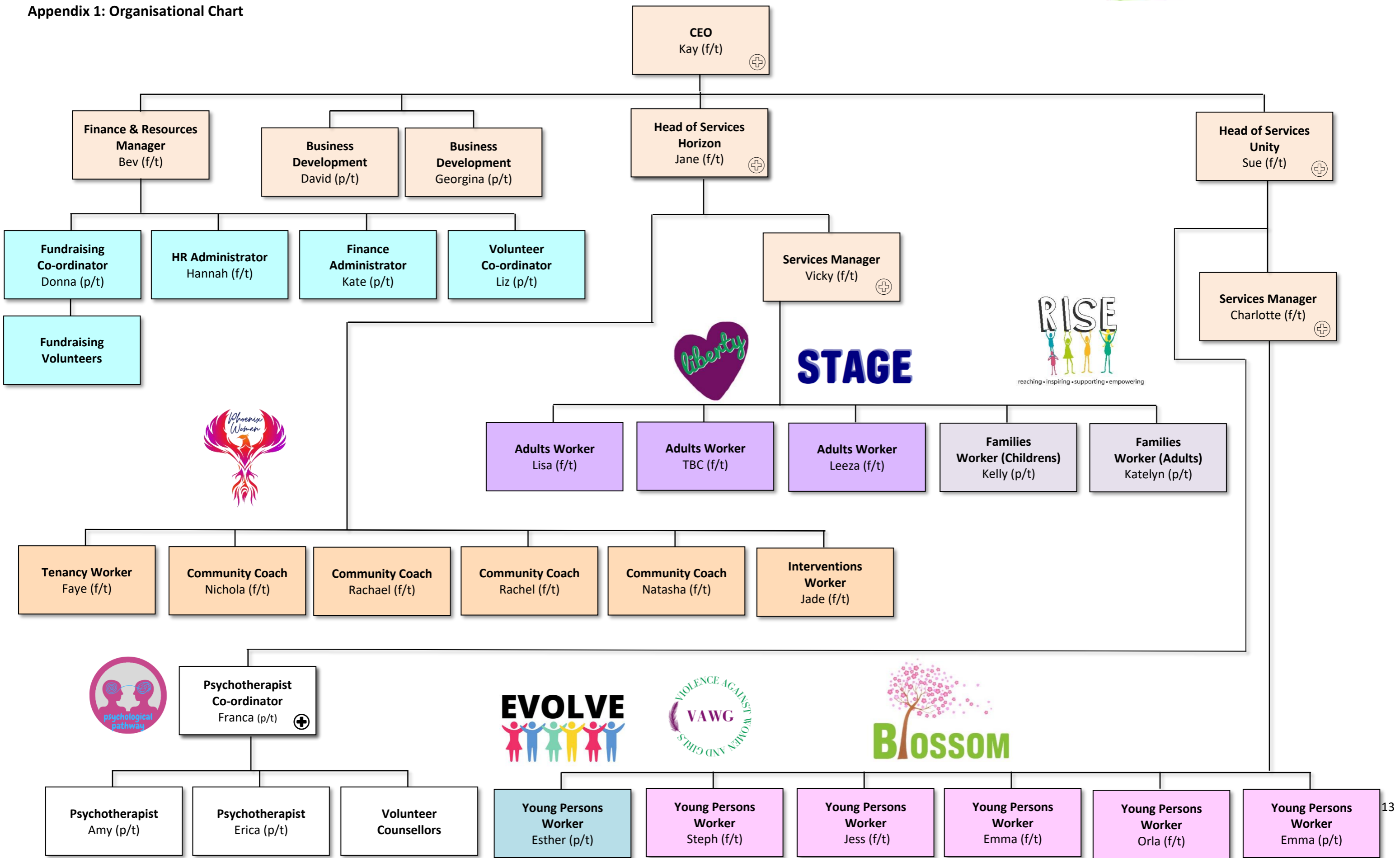


Trauma Lead



Trauma Champion/Safeguarding Lead

### Appendix 1: Organisational Chart



No	Policy Document Change History	Date	Who
16	Reviewed and updated	2/24	KN/MC
15	Reviewed and updated	9/22	KN
14	Updated safeguarding leads	3/22	KB
13	Update safeguarding leads.	8/21	KB
12	Planned Review	05/21	LH
11	Policy full reviewed and updated	04/12/20	AL
10	Stockton Safeguarding Board changed to Hartlepool & Stockton Safeguarding Partnership and updated weblinks	April 19	AB
9	Reviewed	June 18	SMT
8	Policy re-written and re-named (changed from Child Protection Policy to Safeguarding Children Policy) and approved by LSCB	May 17	SMc
7	Policy reviewed	01/06/16	AB
6	Policy reviewed and updated	01/06/15	DB
5	Policy updated to reflect title changes and roles	01/03/15	AB
4	Policy updated to reflect title changes and roles	23/06/14	RP
3	Policy reviewed and updated	20/04/13	RP
2	Policy reviewed and updated	01/02/12	RP
1	Initial release	01/07/10	SC