

# Children, Young People and Adults at Risk

## Safeguarding Procedures

### 2020

*You may wish to insert your organisation's logo here*

(The following document was developed as best practice guidance for YWA members, this document will require further actions by your organisation to ensure it meets your individual specific needs and circumstances. **Please refer to cover letter for further guidance**)

**[insert org name]** Youth Centre

Formally adopted: **[insert date of committee meeting]**



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## Background

*Add a few lines about your organisation including who you work with, when and where. Include any other significant information you think may be relevant but limited this to half a page*

## Introduction

**[insert org name] Youth Centre ensures the following standards are met in line with 'Commitment to Children, Young People and Adults at Risk Policy 2019.**

1. Our organisation has a written policy and procedures for children, young people and adults at risk and staff receive training every two years.
2. We have guidelines and procedures that the organisation implement to meet this commitment in line with minimum standards
3. The policy will be supported by other organisational policies aimed at promoting safe and healthy working relationships and working practices
1. The policy is owned at all levels within the organisation and the person with responsibility for its approval, implementation and review is:
  2. **[insert Name]** (Chairperson)
4. The policy, procedures and guidelines are subject to review at least every two years.
5. Everyone in the organisation is aware that the policy exists, what it aims to achieve and receive the required training and support in its implementation.

## 1. Principles

[insert org name] Youth Centre's safeguarding policy and practice is guided by five underpinning principles as outlined below. These principles are contained within the new Commitment to Safeguarding Children, Young People and Adults at Risk Policy 2019. The following principles are the foundation of our work:

**(1) A Rights-Based Approach:** That promotes and respect all children, young people and adults at risks right to be safe and secure; to freedom from harm and coercion; to equality of treatment; to the protection of the law; to privacy; to confidentiality; and freedom from discrimination.

**(2) An Enabling Approach:** To enable children, young people and adults at risk with the right to make informed choices about their lives, to maximise their opportunities to participate in wider society, to keep themselves safe and free from harm and enabled to manage their own decisions in respect of exposure to risk.

**(3) A Person-Centred Approach:** To promote and facilitate full participation of children, young people and adults at risk in all decisions affecting their lives taking full account of their views, wishes and feelings and, where appropriate, the views of others who have an interest in his or her safety and well-being.

**(4) A Consent-Driven Approach:** To make a presumption that the children, young people and adults at risks have the ability to give or withhold consent; to make informed choices; to help inform choice through the provision of information, and the identification of options and alternatives; to have particular regard to the needs of individuals who require support with communication, advocacy or who lack the capacity to consent; and intervening in the life of a child, young person or adult at risk against his or her wishes only in particular circumstances, for very specific purposes and always in accordance with the law.

**(5) A Collaborative Approach:** That acknowledges children, young people and adult safeguarding will be most effective when it has the full support of the wider public and of safeguarding partners across the statutory, voluntary, community, independent and faith sectors working together and is delivered in a way where roles, responsibilities and lines of accountability are clearly defined and understood. Working in partnership and a person-centred approach will work hand-in-hand.

## 2. Consent and Capacity

[insert org name] Youth Centre will ensure that all 'children, young people and adults at risk' have the capacity to understand what is involved in the activity taking place and that consent has been secured by both the child, young person and or adult at risk and their parent/legal guardian to participate in any activity undertaken by the organisation.

Consent is a process that results from understanding through dialogue and provision of information of the activity and or event being attended. It should have clarity of timeframes, risks, health requirement, materials/clothing needed and costs, etc and have the written approval of the individual and their legal guardian.

### 2.1 Consent is only considered to be valid when:

- Only the parent or legal guardian responsible and the child, young person or 'adult at risk' has the capacity to consent, that is, s/he can understand and weigh up the information needed to make the decision; and
- The person legally responsible for the child, young person or 'adult at risk' is appropriately informed, that is, s/he has been given sufficient information, in an appropriate way, on which to base the decision; and
- Information has been given voluntarily, that is, free from coercion or negative influence. If any of these factors is absent, consent cannot be considered to be valid.

In all cases the consent should be secured from the legal guardian and the child, young person or adult at risk. Staff and volunteers should remember that no one can give, or withhold, consent on behalf of another person unless special legal provision for particular purposes has been made for this.

In certain situations, the need for consent may be overridden. This is generally when it is in the public interest to do so, for example, the disclosure of information to prevent a crime or risk to health or life.

### 2.2 Staff and Volunteers will:

- Always presume that the child, young person or 'adult at risk' at the centre of the decision or action is able to give or withhold consent unless it is established otherwise;
- We make every effort to encourage and support the child, young person or 'adult at risk' to make the decision for themselves and help them to communicate the decision. This includes giving them all the necessary information which is explained or presented in a way which the child, young person or 'adult at risk' fully understands. This will always require the consent of the written consent of the parent/legal guardian as well.
- Be aware that a child, young person or 'adult at risk' who has capacity has the right to make what others may regard as an unwise decision, hence the need for written approval of the parent/legal guardian. Everyone has their own values, beliefs and preferences which may not be the same as those of other people, but sometimes a balance needs to be struck

between the child, young person or 'adult at risks' human rights and the need to intervene to protect others;

- Provide support to a child, young person or 'adult at risk' where they have withheld consent and this has been overridden; and
- Understand that a child, young person or 'adult at risk' can change their mind about any choice or decision they have made.

Where there are concerns about written consent, for example, doubts about whether it is valid, the staff member or volunteer should bring this to the attention of their Line Manager, who should in turn seek further advice where necessary and seek further approval from the parent/legal guardian over the phone.

### 3. Educational Visits

Young people derive considerable benefit from taking part in educational visits, often participating in activities, and experiences not available in the average youth club/project setting. It is widely acknowledged that such educational visits help young people to develop a wide range of valuable personal and social skills.

The vast majority of such visits take place without incident, and it is evidently clear that those involved in planning, and managing such visits are already demonstrating a high level of care, competence, and safety awareness.

However, occasionally serious incidents involving young people do occur, and there is a growing concern amongst staff and parents that further steps are required in order to promote the highest standards of safety on any educational visit/trip.

Our organisation operates the EA Educational Visits systems for planning, preparation, delivery and evaluation and combined with our risk assessment systems ensures we have considered all the risks. See <https://www.eani.org.uk/school-management/educational-visits>

#### 3.1 Definition of Educational Visit

Our definition of educational visits is: "All academic, sporting, cultural, creative, and personal development activities, which take place away from the young person's school or youth club setting, and make a significant contribution to learning, and development of those participating."

#### 3.2 Legal Perspective

Under the common law, 'children and adults at risk', like all other citizens, are legally entitled to receive special care and attention, in terms of their welfare and safety, by those in whose charge they are placed. The safety and welfare of children in the charge of others is specifically addressed through a number of statutes, the basic requirements of which are set out below.

The common law “duty of care” is one, which is daily discharged by youth work staff and others who have a supervisory role concerning young people and ‘adults at risk’.

While the consequences of not adequately discharging any corresponding criminal duty cannot be insured against, this civil duty is however insurable under employee liability and public liability insurance provisions. It is nonetheless incumbent upon staff who are supervising young people to act reasonably in all circumstances, so that the personal safety and well-being of those in their care is not jeopardised during the visit.

Employers have a legal obligation, both to their employees, and young persons in their care, to ensure that their health and safety is safeguarded while they are in any way affected by such employers’ undertakings.

This duty is imposed through occupational health and safety statute, specifically under the Health and Safety at Work (N.I.) Order 1978, and is placed upon employing authorities to ensure that their management arrangements in general, (but also those arrangements which encompass specific activities such as educational visits) are adequate to protect the health and safety of all those who are permitted to participate.

The manner in which such arrangements are developed is through the process of a risk assessment, the outcome of which acts as the basis for the organisation to establish what needs to be put in place to allow the activity to proceed in a way which sufficiently controls the risks to which those going on the visit may be exposed.

This brief note is intended only as an introduction to educational visits, and must be read in conjunction with the guidance booklet, **“Educational Visits, Policy, Practice and Procedures”**. These proforma are available from either the EA of YWA offices.

### 3.3 Educational Visits Checklist

In the management of the Educational Visits system our organisation will consider the following:

- Policy, organisation, and list of responsibilities
- Risk assessment examples, and forms
- Training requirements including having a first aider present
- Approved local excursions, and requirements
- Brochures for young people, parents, guardians
- Safety rules and notices
- Pre-holiday briefing notes
- Where to get more help
- List of standards that should be kept locally
- Certificates of inspections, and competence
- Inspection checklists, and requirement routines
- Emergency procedures for accidents, fires, etc.



### 3.4 In travel we will ensure that the:

- Type, and condition of vehicles, vessels, and aircraft; only use reputable suppliers who have the necessary safety certification and maintenance records
- Drivers/pilots/skippers, etc. to be properly qualified, and alert; relief crews to be present where necessary
- The route should be properly planned for the school's requirements, and type of transport being used.

### 3.5 When using accommodation, we will ensure that there is:

- Safe access and exit
- Fire precautions and means of escape
- Gas safety requirements
- Electrical safety requirements
- Food hygiene and general safety
- Smoking and non-smoking areas
- General cleanliness and hygiene facilities
- Welfare facilities for customers and non-slip arrangements in washing areas
- Medical and first aid arrangements – accidents, sunburn, food poisoning, etc
- Lifts and any special precautions
- Use of balconies
- Swimming pool safety arrangements
- Types of glass fitted at low level – see glazing section
- Arrangements for security
- Arrangements for children's safety
- Animals – how to treat them and what to do if bitten

### 3.6 In excursions/activities we will ensure that:

- Accredited facilities?
- Competence and fitness of organisers and participants
- Safety rules for all events
- Adequate insurance cover
- Proper briefing
- Condition and maintenance of all vehicles, vessels and equipment used
- Communication with participants
- Emergencies
- Thefts and mugging

### 3.7 Residential and Overnight Stays

**Group leaders should ensure that all staff accompanying a group are issued with a copy of this policy and understand their role during overnight visits.**

Staff accompanying groups on a residential visits have a responsibility for the safety and welfare of those in their charge, in addition to which they are responsible for the pastoral care, behaviour, safety and discipline of their young people and 'adults at risk'.

During activities the staff will ensure that all activities are carried out in a safe manner and will carry out a risk assessment of the activity prior to its commencement, youth workers, instructors and information from young people must be considered. The responsibility for the safety of the students remains with the group leader who has consent, who may call a halt to any activity about which they may have concerns. Staff accompanying groups will not normally be asked to take sole charge of a group for an activity and are not expected to join in all but needs to supervise what is going on.

Briefings are held prior to each activity session. It is essential that all participants and staff attend these briefings. We would ask that the visiting staff ensure prompt attendance of all students at these briefings so that the programme can run to time.

Staff are responsible for ensuring that acceptable codes of conduct are observed by the participants, particularly in relation to smoking, alcohol, drugs and relations between the sexes. Overseeing the preparation of packed lunches and ensuring that all participants have all of the equipment required for the day's activities that are part of their responsibilities.

Reviewing and reflection is essential to the learning experiences of the participants. Staff are best placed to participate fully in the review and reflections especially if they have participated in the supervision of any activity and shared the students learning experience but cannot actively supervise the activity if they are actively involved in the event.

Free time is when children, young people and or 'adults at risk' are most likely to have an accident. Staff should have a pre-planned series of activities to keep participants active and out of mischief during those times when they are not engaged in centre programmes.

### 3.8 Other responsibilities of the group leader include

**Meals** – It is important and a health and safety issue that all participants attend for meals and have something to eat especially when dealing with high energy activities. Participants who do not eat will be at a much higher risk of developing hypothermia or losing energy. It is recommended that the group attend meals as a whole rather than having some participants drifting in and out of the dining room, not knowing who has eaten and who has not.

**Preparation for activities** – Much time can be saved during the day if staff check that participants have all of the correct equipment for the activity to be undertaken. Help may be required for participants who are having difficulty in pulling on wet suits but this must be done with safeguarding constantly in mind.

**Transport** – One member of staff should travel on each minibus, sitting where they can best assess the risks and ensure reasonable behaviour allowing the driver to concentrate on the driving. Staff should also ensure that all people travelling wear their seatbelts throughout the journey. This can be more easily carried out if staff sit near the rear of the bus where they can see everyone.

**Drying Room** – This is one of the most important rooms in the centre, it can also be the untidiest. It is essential that visiting staff check this room each time they return from

activities to ensure that equipment is hung in the proper places. Equipment not hung properly will not dry.

**Games Room** – Participants may only use this room if there is a member of staff supervising.

**Bedrooms** – Bedrooms need to be patrolled to ensure that no horseplay takes place. Advice to staff would be that participants are to be discouraged from congregating in the bedrooms. Staff should stay out of bedrooms however, when required entrance to bedrooms should always ensure there is two staff present. Bedrooms must never be shared between the male/female members.

**Shower/Changing Rooms** – When the changing rooms are in use there should be a member of staff in close proximity to maintain segregation between the sexes and put and early stop to any horseplay.

**Bedtime** is always a contentious issue with groups. Staff must ensure that those people wanting to sleep are allowed to do so, therefore it is recommended that there be **QUIET TIME** followed by **BEDTIME**.

The quiet time is a time when everyone not wanting to sleep should be in one downstairs location, e.g. the lounge. Loitering on the stairs should be stopped to maintain quiet upstairs.

Bedtime is when everyone should be in their rooms, quiet and ready to sleep. It is imperative that everyone gets sleep. A lack of sleep will result in numerous problems the next day, both physical and mental. Do this end, if the participants do not sleep they will not be safe to join in the activities and may therefore be required to leave the programme.

To ensure that visiting staff get their much-needed sleep, we would recommend that they organise a rota between themselves so that after bedtime only one member of staff is on duty until all participants are settled.

If the enhanced relationships between staff and children, young people or ‘adults at risk’ which can be gained from a residential visit are to be achieved, then it is vital that the visiting staff accompanying the participants as fully as possible in the activities. No one will be left in the centre during activity sessions.

It is vital to the centre programme that we regularly use sites and facilities where we may meet other groups or members of the public. The standard of behaviour of the participants and above all their language must not be a cause for concern.

All of the instructional staff should be qualified in First Aid and one of these should be on call each evening. Any injuries, no matter how trivial they may seem must be reported to the centre staff and an accident form completed.

Shortly after arrival at the residential centre a fire drill should be carried out. This will be the only fire drill, therefore subsequent sounding of the fire bell should be treated as real. For this reason visiting staff should familiarise themselves with the evacuation procedures posted on the notice boards in their bedrooms.

All participants should be discouraged from bringing mobile phones to the residential centre but where it is felt to be necessary that they have access to mobiles, then this should be at predetermined times and should never be allowed in bedrooms or changing/showering areas.

All participants who are to take part in rock climbing and some other activities will be asked to remove body piercing jewellery to reduce the risk of injury. Participants who do not remove body jewellery may not be permitted to take part in climbing activities.

### 3.9 Safeguarding While on Residential

[insert org name] Youth Centre's Safeguarding Policy must consider all incidents / behaviour of concern must be reported to our CCASC or designated officer and the officer at the residential centre being visited. All our staff will have undergone Safeguarding training that includes safeguarding on residential.

Child and 'adults at risk' safeguarding and protection and staff safeguarding go hand in hand. Staff are responsible for the protection of the children, young people and 'adults at risk' in their care. They are also responsible for looking after themselves.

To this end we recommend the following steps:-

- (a) do **not** have a student in the same room as staff.
- (b) do **not** enter a young person's bedroom or a changing room unnecessarily or without another staff member being present.
- (c) do **not** be in a closed room alone with a young person.
- (d) do **not** engage in rough physical horseplay.
- (e) **do** make sure that there are other people or staff around if you have to assist a child, young person or 'adult at risk' with adjusting their equipment or pulling on a wetsuit.
- (f) **do** make sure that participants have proper attire at all times. Nightwear is only for bedrooms. Pyjama parties are not good practice and pyjamas are not a substitute for normal clothing and should not be allowed.

Respect is a word that should be built into the introductory briefing that all groups and should be given on arrival at the residential centre and in front of their staff. Respect is more than a word, it is a way of living together. We ask that all participants and staff show respect for themselves, for each other and for the property. Although the centre's rules are part of the introductory briefing we continually try to ask participants to think in terms of Respect. We would ask that all visiting staff join in this approach.

## 4. Mental Capacity

Mental capacity means youth workers need to consider the ability of the child, young person or 'adult at risk' to make a decision and take actions. A child, young person or 'adult at risk' will always be assumed to have capacity to make a decision unless it is suspected otherwise but written consent will still need to be sought. However, staff should always seek written approval from the parent/guardian for their participation regardless of the persons request to take part as they have the legal responsibilities for children under 16 years and those deemed at risk. This means staff and volunteers should always start by believing that the child, young person or 'adult at risk' can make their own decisions to participate unless they can prove otherwise but will always require written approval from the parent/legal guardian for their participation.

Staff and volunteers must be aware that capacity can fluctuate i.e. if you suspect intoxication, and it is both issue and time specific, therefore it should be kept under regular review. If a member of staff or volunteer has any doubts about the capacity of a child, young person or 'adult at risk' to make a decision or series of decisions, they should inform their Line Manager or Child & Adult Safeguarding Champion (CASC), who should seek permission from the parent/legal guardian.

## 5. Recruitment of Staff

**[insert org name] Youth Centre consistently applies a thorough and clearly defined method of recruiting staff and volunteers in line with legislative requirements, quality standards and best practice:**

1. We will always provide a clear job description for staff and role description for volunteers and a personnel/volunteer specification outlining the key skills and abilities and qualifications, if any, required and should be in line with the requirements of JNC.
2. We always operate an open recruitment process.
3. We always provide an application form that covers past work/volunteering. Samples are available from YWA on request.
4. We use a declaration form requesting information on previous convictions which are not protected, and investigations, if any.
5. A consent form for an AccessNI disclosure check is completed, if in a regulated position.
6. We always conduct an interview process suitable to the post/role and task.
7. Written references are sought (and followed up when necessary).
8. If a professional qualification is a requirement of the post, a copy of the certificate is kept on file.
9. Where required, an appropriate AccessNI disclosure check is carried out.
10. All posts are approved by management.

11. An induction process will begin on the first day of employment and will last up to six months and will include identification and receipt of all policies and procedures for the organisation. As an element of this induction all new staff and volunteers will complete Safeguarding training within three months of employment. Within the year all staff and volunteers will have completed first aid and basic youth work training if required. This must be recorded on the employees file.

12. All staff will complete a six-month probationary period. This can be extended if required by the Management Committee/Board of Directors.

13. All staff and volunteers will be in receipt of consistent supervision. This will be at the discretion of the organisations manager but will not be more than one month apart for full-time or quarterly for part-time staff. Records of the meetings must be retained within the staff members personnel file and signed off by the employee and line manager.

It is not the responsibility of any individual member of staff or volunteer to appoint a new staff member or volunteer, but an organisational responsibility. Safeguarding children, young people and adults at risk is a primary consideration in developing a thorough method of recruiting, selecting and managing staff and volunteers.

However, there are other matters that we consider in order to enhance the quality of care provided by our organisation. The make-up of our staff and volunteers is responsive to the needs of the adults with whom you work or who are in your care. Some things to consider are:

- Our obligations as an employing and volunteer organisation is to adopt a policy of non-discrimination within the terms of equality legislation;
- Attempt to attain, as far as possible, an appropriate balance of male and female and religious staff and volunteers;
- Attempt to attain, as far as possible, staff and volunteers who are reflective of any minority cultural or linguistic groups represented in your organisation's user groups.

## 6. Management, Support & Supervision

**[insert org name] Youth Centre has standards and procedures in place for the effective management, support, supervision and training of staff and volunteers that ensures they are aware of the safeguarding responsibilities of their position.**

1. We have an induction process for staff and volunteers that will take place over a three-month period from the date of the start of employment that is written and signed off by the employee and line manager.
2. There is a probationary period for staff and a trial period for volunteers agreed by the management committee/board of directors and included in both the contract and induction process.

3. Relevant training is provided, appropriate to the post/role.
4. There is a robust structure and process for support and supervision for all staff and volunteers, appropriate to the post/role.
5. There is an annual appraisal for staff and review for volunteers.
6. Comprehensive, written records are kept of: training completed; support and supervision; and annual appraisals/reviews.

## 6.1 Reporting & Recording Concerns

Our organisation has clearly defined procedures for raising awareness of, responding to, recording and reporting concerns about actual or suspected incidents of abuse:

1. We have a policy that outlines what constitutes children, young people and adults at risk abuse, where abuse can occur and who abuses.
2. There is a written procedure outlining how staff and volunteers respond to, record and report children, young people and adults at risk safeguarding concerns.
3. There is a system to communicate the reporting procedure to staff and volunteers to ensure they are familiar with it.
4. There is a **Child & Adult Safeguarding Champion (CASC)** previously called the designated officer or appointed person who has responsibility for dealing with all safeguarding concerns which come to light within the organisation.
5. There is a procedure for the Child & Adult Safeguarding Champion or appointed person to report all safeguarding concerns to the appropriate authorities.
6. There is a written procedure outlining how staff and volunteers respond to and report allegations made against staff and volunteers.
7. There is a whistleblowing policy and procedure.

Good safeguarding practice means that organisations must ensure that all staff and volunteers understand how to recognise abuse, and how to pass any safeguarding concerns to the relevant people within the organisation. This does not mean that staff and volunteers are responsible for deciding whether or not abuse has occurred, but they do have a responsibility to be alert to the physical signs, actions and/or behaviour by children, young people or adults at risk, staff or volunteers that suggests something may be wrong.

## 6.2 What is Abuse?

Abuse is a 'single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to another individual or violates their human or civil rights'.

Abuse is the misuse of power and control that one person has over another. It can involve direct and indirect contact and can include online abuse. 'Commitment to Safeguarding Children, Young People and Adults At Risk 2019' outlines the main forms of abuse and will

include the organisations additional policies including 'Health & Safety' policy, 'Bullying' policy. etc:

**Physical abuse** is the use of physical force or mistreatment of one person by another which may or may not result in actual physical injury. This may include hitting, pushing, rough handling, exposure to heat or cold, force feeding, improper administration of medication, denial of treatment, misuse or illegal use of restraint and deprivation of liberty. Female Genital Mutilation (FGM) is considered a form of physical AND sexual abuse.

**Sexual violence and abuse** is 'any behaviour (physical, psychological, verbal, virtual/online) perceived to be of a sexual nature which is controlling, coercive, exploitative, harmful, or unwanted that is inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability). Sexual violence and abuse can take many forms and may include non-contact sexual activities, such as indecent exposure, stalking, grooming, being made to look at or be involved in the production of sexually abusive material or being made to watch sexual activities. It may involve physical contact, including but not limited to non-consensual penetrative sexual activities or nonpenetrative sexual activities, such as intentional touching (known as groping). Sexual violence can be found across all sections of society, irrelevant of gender, age, ability, religion, race, ethnicity, personal circumstances, financial background or sexual orientation.

**Psychological/emotional abuse** is behaviour that is psychologically harmful or inflicts mental distress by threat, humiliation, or other verbal/non-verbal conduct. This may include threats, humiliation or ridicule, provoking fear of violence, shouting, yelling and swearing, blaming, controlling, intimidation and coercion.

**Financial abuse** is actual or attempted theft, fraud or burglary from the organisation, a child, young person or adult at risk. It is the misappropriation or misuse of money, property, benefits, material goods or other asset transactions which the person did not or could not consent to, or which were invalidated by intimidation, coercion or deception. This may include exploitation, embezzlement, withholding pension or benefits or pressure exerted around wills, property or inheritance. Institutional abuse is the mistreatment or neglect of an child or adult by a regime or individuals in settings which adults who may be at risk reside in or use. This can happen in any organisation, within and outside youth provision.

**Institutional abuse** may occur when the routines, systems and regimes result in poor standards of care, poor practice and behaviours, inflexible regimes and rigid routines which violate the dignity and human rights of the adults and place them at risk of harm. Institutional abuse may occur within a culture that denies, restricts or curtails privacy, dignity, choice and independence. It involves the collective failure of a service provider or an organisation to provide safe and appropriate services and includes a failure to ensure that the necessary preventative and/or protective measures are in place.

**Neglect** occurs when a person deliberately withholds, or fails to provide, appropriate and adequate care and support which is required by another adult. It may be through a lack of knowledge or awareness, or through a failure to take reasonable action given the information and facts available to them at the time. It may include physical neglect to the



extent that health or well-being is impaired, administering too much or too little medication, failure to provide access to appropriate health or social care, withholding the necessities of life, such as adequate nutrition, heating or clothing, or failure to intervene in situations that are dangerous to the person concerned or to others particularly where the person lacks the capacity to assess risk.

**Exploitation** is the deliberate maltreatment, manipulation or abuse of power and control over another person; to take advantage of another person or situation usually, but not always, for personal gain from using them as a commodity. It may manifest itself in many forms including slavery, servitude, forced or compulsory labour, domestic violence and abuse, sexual violence and abuse, or human trafficking. This list of types of harmful conduct is not exhaustive, nor listed here in any order of priority. There are other indicators which should not be ignored. It is also possible that if a person is being harmed in one way, s/he may very well be experiencing harm in other ways.

**Bullying** is “the repetitive, intentional hurting of one person or group by another person or group, where the relationship involves an imbalance of power. It can happen face to face or online” (Anti-bullying Network). Our organisation will not tolerate any form of bullying within its unit and will implement the Anti-Bullying policy when made aware of the issue with any one young person.

### 6.3 Related Definitions

There are related definitions which interface with Child & Adult Safeguarding, each of which have their own associated adult protection processes in place.

**Domestic violence** and abuse is ‘threatening, controlling, coercive behaviour, violence or abuse (psychological, virtual, physical, verbal, sexual, financial or emotional) inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability) by a current or former intimate partner or family member’. Domestic violence and abuse is essentially a pattern of behaviour which is characterised by the exercise of control and the misuse of power by one person over another. It is usually frequent and persistent. It can include violence by a son, daughter, mother, father, husband, wife, life partner or any other person who has a close relationship with the victim. It occurs right across society, regardless of age, gender, race, ethnic or religious group, sexual orientation, wealth, disability or geography. The response to any adult facing this situation will usually require a referral to specialist services such as Women’s Aid or the Men’s Advisory Project. In high risk cases a referral will also be made to the Multi-Agency Risk Assessment (MARAC) process. Specialist services will then decide if the case needs to be referred to a HSC Trust for action under the safeguarding procedures. If in doubt anyone with a concern can contact the Domestic and Sexual Violence helpline (0808 802 1414) to receive advice and guidance about how best to proceed.

**Human Trafficking/Modern Slavery** involves the acquisition and movement of people by improper means, such as force, threat, or deception, for the purposes of exploiting them. It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting. Victims of human trafficking/modern slavery can come

from all walks of life; they can be male or female, children or adults, and they may come from migrant or indigenous communities. Hate crime is any incident which constitutes a criminal offence perceived by the victim or any other person as being motivated by prejudice, discrimination or hate towards a person's actual or perceived race, religious belief, sexual orientation, disability, political opinion or gender identity. The response to adults at risk experiencing hate crime will usually be to report the incident to the Police Service.

## 6.4 Responding to Alleged Abuse

Where there are concerns raised about a child, young person or adult at risk, or where a disclosure or allegation is made, people often feel anxious about passing on the information. Often staff and volunteers can feel afraid that their concerns may be wrong and because of this, they may delay in passing on vital information regarding a safeguarding issue.

Staff and volunteers who have concerns do not need any evidence of wrongdoing, nor are they responsible for conducting an investigation, they simply need to pass on their concerns through the organisation's reporting procedures, as soon as possible. It is important to remember that it is not the responsibility of one person in an organisation to evaluate information regarding the child, young person or adult at risk or any safeguarding concerns. It is unlikely that one person will hold all the information relevant to the child or adult as often important information may be held by several people and more than one organisation but each piece of information may add to the overall jigsaw, which can show a fuller picture of any person's situation. Sharing information is one of the most important ways to prevent and detect abuse.

## 6.5 How Can You be Alerted to Signs of Abuse or Neglect?

There are a variety of ways that you could be alerted that a child, young person or adult is suffering harm:

- They may disclose to you;
- Someone else may tell you of their concerns or something that causes you concern;
- They may show some signs of physical injury for which there does not appear to be a satisfactory or credible explanation;
- Their demeanour/behaviour may lead you to suspect abuse or neglect;
- The behaviour of a person close to them makes you feel uncomfortable (this may include another staff member, volunteer, peer or family member); or
- Through general good neighbourliness and social guardianship.

Being alert to abuse plays a major role in ensuring that children and adults are safeguarded and it is important that all concerns about possible abuse are taken seriously and appropriate action is taken.

## 6.6 What if a Person Discloses Abuse?

In cases where a child, young person or adult at risk discloses abuse to a staff member or volunteer, it is important that staff/volunteers know how to react appropriately, according to the following guidelines:

### Do

- Stay calm;
- Listen attentively;
- Express concern and sympathy and acknowledge what is being said;
- Reassure the person – tell the person that s/he did the right thing in telling you;
- Let the person know that the information will be taken seriously and provide details about what will happen next, including the limits and boundaries of confidentiality;
- If urgent medical/police help is required, call the emergency services on 999 or 101;
- Ensure the immediate safety of the person;
- If you think a crime has occurred be aware that medical and forensic evidence might be needed. Consider the need for a timely referral to the police service and make sure nothing you do will contaminate it;
- Let the person know that they will be kept involved at every stage;
- Record in writing (date and sign your report) and report as per your organisation's procedures at the earliest possible time to the designated officer. If they are not available phone the safeguarding office or police if immediate action is required;
- Act without delay.

### Do Not

- Stop someone disclosing to you;
- Promise to keep secrets;
- Press the person for more details or make them repeat the story;
- Gossip about the disclosure or pass on the information to anyone who does not have a legitimate need to know;
- Contact the alleged person to have caused the harm;
- Attempt to investigate yourself;
- Leave details of your concerns on a voicemail or by email;
- Delay

It is important for everyone to be aware that the person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred. That is a task for statutory authorities. The primary responsibility for the person

who first suspects or is told of abuse is to report it in line with the organisation's reporting procedures and to ensure that their concern is taken seriously.

The CASC, Line Manager or designated officer or their deputy in charge will take any immediate action required to ensure the child, young person or 'adult at risk' of harm is safe and make a decision as to when it is appropriate to speak with the person at risk of harm about the concerns and any proposed actions.

They must then report the concerns and any action taken to the appointed person or Child & Adult Safeguarding Champion (CASC). Under no circumstances should any individual member of staff or volunteer or the organisation itself attempt to deal with the problem of abuse alone or investigate the situation.

They should not ask questions that relate to the detail, or circumstances of the alleged abuse, beyond initial listening, expressing concern and checking out.

## 6.7 Reporting and Recording

All concerns, disclosures and allegations should be recorded on incident form provided by the organisation. An accurate record should be made of the date and time that the member of staff/volunteer became aware of the concerns, the parties who were involved, and any action taken.

If there is a disclosure it is important to record what was said as soon as possible in the person's own words. The record should be clear and factual, since any information may be valuable to safeguarding professional investigating the incident and may at some time in the future be used as evidence in court. This kind of information should always be kept in a secure place (including electronic filing) and shared only with those who need to know about the concerns, disclosures, allegations or suspicions of abuse. This information will be used to complete the UNOCINI form for the referral. UNOCINI is available here:

<https://www.health-ni.gov.uk/publications/understanding-needs-children-northern-ireland-unocini-guidance>

## 6.8 Child and Adult Safeguarding Champion (CASC)

[insert org name] Youth Centre has nominated:

[insert name] (CASC)

[insert name] (Deputy CASC)

These people have responsibility for dealing with child and adult safeguarding concerns, disclosures or allegations about actual or suspected abuse.

Organisations which do not have staff or volunteers subject to vetting or have people in regulated positions, are not required to nominate a CASC. Although the organisation may wish to do so, to adhere to good practice. The role of the CASC, set out in "Our Commitment

to Safeguarding Children, Young People and ‘Adults At Risk’ 2019” has both strategic and operational components.

In larger organisations the CASC and their deputy may delegate the operational day to day responsibility for safeguarding to an appointed person(s) within their organisation when absent. For example, a provider with a number of units throughout Northern Ireland may choose to delegate some of the tasks of an CASC to a member of staff in each facility. They will then report to the CASC on safeguarding matters on a regular basis and assist in the compilation of reports, training needs analyses and data analysis. Organisations who delegate operational tasks to appointed person(s) must have sufficient numbers to ensure they are accessible to all service areas in the organisation as a source of advice and guidance.

In smaller organisations the CASC may be responsible for all actions relating to child and ‘adults at risk’ safeguarding situations, including working with the children, young people and ‘adults at’ risk and making referrals to PSNI and/or HSC Trusts. The relevant name(s) and contact details of the CASC and the deputy are included in the safeguarding policy, be widely available and ‘out of hours’ contact included.

## 6.9 What is a Child and Adult Safeguarding Champion (CASC)?

The CASC provides the strategic and operational leadership and oversight in relation to child and adult safeguarding for an organisation or group and is responsible for implementing its child and adult safeguarding policy statement.

The CASC should ensure that, at a minimum, the organisation safeguards children, young people and adults at risk by:

- Recognising that children, young people and adult harm is wrong and should not be tolerated;
- Being aware of the signs of harm from abuse, exploitation and neglect;
- Reducing opportunities for harm, abuse, exploitation and neglect to occur; and
- Knowing how and when to report safeguarding concerns to HSC Trusts and/or the PSNI. What are the key responsibilities of an CASC?
- To provide information, support and advice for staff and volunteers on child and adult safeguarding within the organisation;
- To ensure that the organisation’s safeguarding policy is disseminated and support implementation throughout the organisation;
- To advise within the organisation regarding safeguarding training needs;
- To provide advice to staff or volunteers who have concerns about the signs of harm and ensure a report is made to HSC Trusts where there is a safeguarding concern;
- To support staff to ensure that any actions take account of what the child and adult wishes to achieve – this should not prevent information about any risk of serious

harm being passed to the relevant HSC Trust Gateway Service for assessment and decision-making;

- To establish contact with the HSC Trust Designated Officer (DO), PSNI and other agencies as appropriate;
- To ensure accurate and up to date records are maintained detailing all decisions made, the reasons for those decisions and any actions taken;
- To compile and analyse records of reported concerns to determine whether a number of low-level concerns are accumulating to become more significant; and make records available for inspection.

## 6.10 What sort of Information Should a CASC Monitor?

Most CASC's will already have daily access to a great deal of information that will assist the organisation or group improve the services it provides to children and or adults at risk or in need of protection. To meet the governance requirements set out in the Policy, the CASC should compile an Annual Safeguarding Position Report using the following core data:

- Number of referrals made to HSC Trusts involving both children and 'adults at risk' or;
- Number of child and adult safeguarding discussions where the decision taken was to not refer to HSC Trust;
- Any untoward event that triggered a child or adult protection investigation;
- Child or adult safeguarding training opportunities provided and uptake across staff groups; and
- Any action that your organisation plans to take to ensure it is compliant with Our Commitment to Safeguarding Children, Young People and 'Adults At Risk' 2019 and to implement the organisation's own safeguarding policy.

## 6.11 What does the CASC do with the Safeguarding Position Report?

The Position Report is an important overview and governance tool for all organisations and groups supporting children and adults at risk or in need of protection. As such, it contains significant information for your organisation's Senior Management Team and/or Management Committee/Board of Directors. It should be scrutinised by them on an annual basis. It would also be appropriate to provide core information from the Position Report in any organisational annual reports or updates.

The Position Reports should also be made available for any external audit purposes, for example any audits undertaken by the Local Safeguarding Partnership, and to demonstrate compliance with policies as specified within any contracts with HSC Trusts. If the service or group you represent is contracted to provide services by the HSC Trust, as part of your

normal contract monitoring process you should provide confirmation to the relevant Trust(s) that the Safeguarding Position Report is available for scrutiny.

## 6.12 Reporting Safeguarding Concerns

We now have procedures in place to report child, young person or adult safeguarding concerns to the appropriate authorities. This important role needs to be carried out by someone who, in addition to being in a senior position and having a good knowledge of the organisation, can communicate well internally with staff and volunteers and externally with the appropriate authorities.

We have a CASC, it will be their responsibility to provide advice to staff and volunteers who have concerns about the signs of harm and ensure a report is made to the HSC Trust where there is a safeguarding concern.

When an alert is raised within the organisation in relation to a safeguarding concern or disclosure, the CASC, or appointed person where the tasks have been delegated, will ensure the following actions occur:

- Consider whether the concern is a safeguarding issue or not. This may involve some 'checking out' of information provided whilst being careful not to stray into the realm of investigation;
- Where immediate danger exists or the situation warrants immediate action, ensure any medical assistance has been sought and refer to the HSC Trust Adult Protection Gateway Service or PSNI;
- Support staff to ensure that any actions take account of the person's wishes;
- Where it has been deemed that it is not a safeguarding issue, other alternative responses should be considered such as monitoring, support or advice to staff and volunteers. A record should be made of the concern and the details kept on file, including any action taken; the reasons for not referring; and the situation monitored on an ongoing basis;
- If it is decided that it is a safeguarding issue, the situation will be reported to the HSC Key Worker where known. If unaware of HSC Key Worker contact details, a referral will be made to the HSC Trust Adult Protection Gateway Service. The HSC Trust will then conduct a risk assessment and decide what response is appropriate;
- If a crime is suspected or alleged, contact the HSC Trust Gateway Service directly;
- Act as the liaison point for any investigative activity which is required and will ensure easy access to relevant case records or staff;
- Ensure accurate and timely records and any child or adult safeguarding forms required have been completed. Where there is any doubt or uncertainty about whether there is a safeguarding issue this should be discussed with the HSC Key Worker (if known) or HSC Trust Gateway Service.

## 6.13 What Information Will be Required for a Referral?

If a referral is made, as a minimum on the UNOCINI (<https://www.health-ni.gov.uk/publications/understanding-needs-children-northern-ireland-unocini-guidance>) form or by phone, the information required will include:

- The name and address of the child, young person or adult at risk and his/her current location;
- The nature of the harm;
- The need for medical attention (if any);
- The reasons for suspicions of abuse;
- Any action already taken;
- Any other information that may be useful to an investigation e.g. information related to the alleged perpetrator and his/her location.

## 7. Allegations Against Staff or Volunteers

One of the most difficult situations for an organisation to deal with is an allegation of abuse against a member of staff or volunteer. In many cases the person may be a close colleague, friend or neighbour. Nevertheless, the response from the organisations to allegations of abuse must at all times be consistent, regardless of relationships as the primary interest must always be the safety and well-being of the child or adult at risk.

When responding to an allegation that has been made against a member of staff or volunteer, our organisation has a dual responsibility; firstly to the child or 'adult at risk', and, secondly, to the staff member or volunteer.

Our organisation has a procedure for dealing with an allegation made against a member of staff or volunteer which, in the case of a concern about a child or 'adult at risk', should run parallel to the procedure for reporting a safeguarding concern. In the first instance the details of the allegation should be fully recorded by the CASC or appointed person and passed on (depending how the organisation is constituted) to the Line Manager of the individual whom the allegation has been made against or the Head of the organisation.

The individual's Line Manager/Head of the organisation should take the actions outlined below. It is possible that the actions outlined will occur virtually simultaneously and not necessarily sequentially:

- Through the organisation's CASC or appointed person, consult with the HSC Trust and/or PSNI to ensure that any subsequent action taken by the organisation does not prejudice the HSC Trust or PSNI investigation;
- Following the above consultation, inform the staff member/volunteer that an allegation has been made against him/her and provide them with an opportunity to respond to the allegation. His/her response should be recorded fully;



- Through the organisation's CASC or appointed person, consult with the HSC Key Worker (if known) or the HSC Trust Gateway Service (if Key Worker is not known) to agree the most appropriate way forward;
- Take protective measures which may involve transferring the staff member/volunteer to another post without contact with children, young people or 'adults at risk', or suspension. It should be noted that suspension is a neutral act to allow the investigation to proceed and to remove the staff member/volunteer from the possibility of any further allegation.

If it is necessary to suspend a staff member or volunteer, the allegation should be dealt with as quickly and sensitively as possible. All actions taken should be in accordance with your organisation's disciplinary procedure and have due regard to guidance from the HSC Trust and/or PSNI so as not to prejudice any investigation. It is recommended that the CASC or appointed person is not the person who carries out the disciplinary procedure. This is the responsibility of the Management Committee or Board of Directors.

## 8. Critical Incidents

### 8.1 Definition of a Critical Incident

A Critical Incident can be defined as a sudden and unexpected event that is distressing to the youth centre/organisation. It can be a physical incident or psychological trauma that has a severe immediate impact and likely long-term effect on young people, staff or parents. This constitutes a serious disruption arising with little or no warning on a scale beyond the coping capacity of a youth centre operating under normal conditions and requires the assistance of the emergency services and other agencies. (See Critical Incident Policy)

This may include:

- Death of young person/staff member
- Suicide
- Disappearance of a young person or staff member
- Death or injury of a young person or a staff member during an outing
- Traffic accident resulting in severe injury or death
- Serious assault on a young person or member of staff
- Violent/disturbed intruder on centre premises during operating session
- Serious damage to centre building or property through fire, flood or vandalism
- Young person/staff member with contagious illness
- Explosion
- Civil disturbance in the youth centre community
- Death of a young person at a sports-type event
- Death of a young person through drugs/substances
- A deliberate act of violence
- Civil disturbance

- Immediate evacuation from the youth centre with no likelihood of return for number of hours

## 8.2 Aims and Objectives of the Policy

- To respond to critical incidents in an informed manner.
- To create a positive, open, communicative climate where the needs of staff and young people are met in critical incident situations.
- To create a safe centre environment whereby the physical, social and psychological health of young people and staff is prioritised.
- To outline, monitor and review the management plans for dealing with different emergencies.
- To promote active coping skills within the curriculum.
- To establish positive working relationships and dialogue with outside agencies, thus enabling full and effective collaboration in the event of a critical incident
- To provide information for dealing with all emergencies

## 8.3 Critical Incident Management Team

The Critical Incident Management Team for [insert org name]'s Centre is:

3. [insert Name & role]
4. [insert Name & role]
5. [insert Name & role]
6. [insert Name & role]
7. [insert Name & role]

In the event of a critical incident the main Contact Person and spokesperson is the Senior Youth Worker.

## 9. Whistleblowing Policy and Procedure

Whistleblowing occurs when a member of staff or volunteer raises a concern about misconduct, illegal or underhand practices by individuals and/or an organisation; or about the way care and support is being provided, such as practices that cause harm or risk of harm to others or are abusive, discriminatory or exploitative. This will include situations where a staff member's or volunteer's concerns are not acted upon by the Child & Adult Safeguarding Champion or appointed person, or Chair of the organisation.

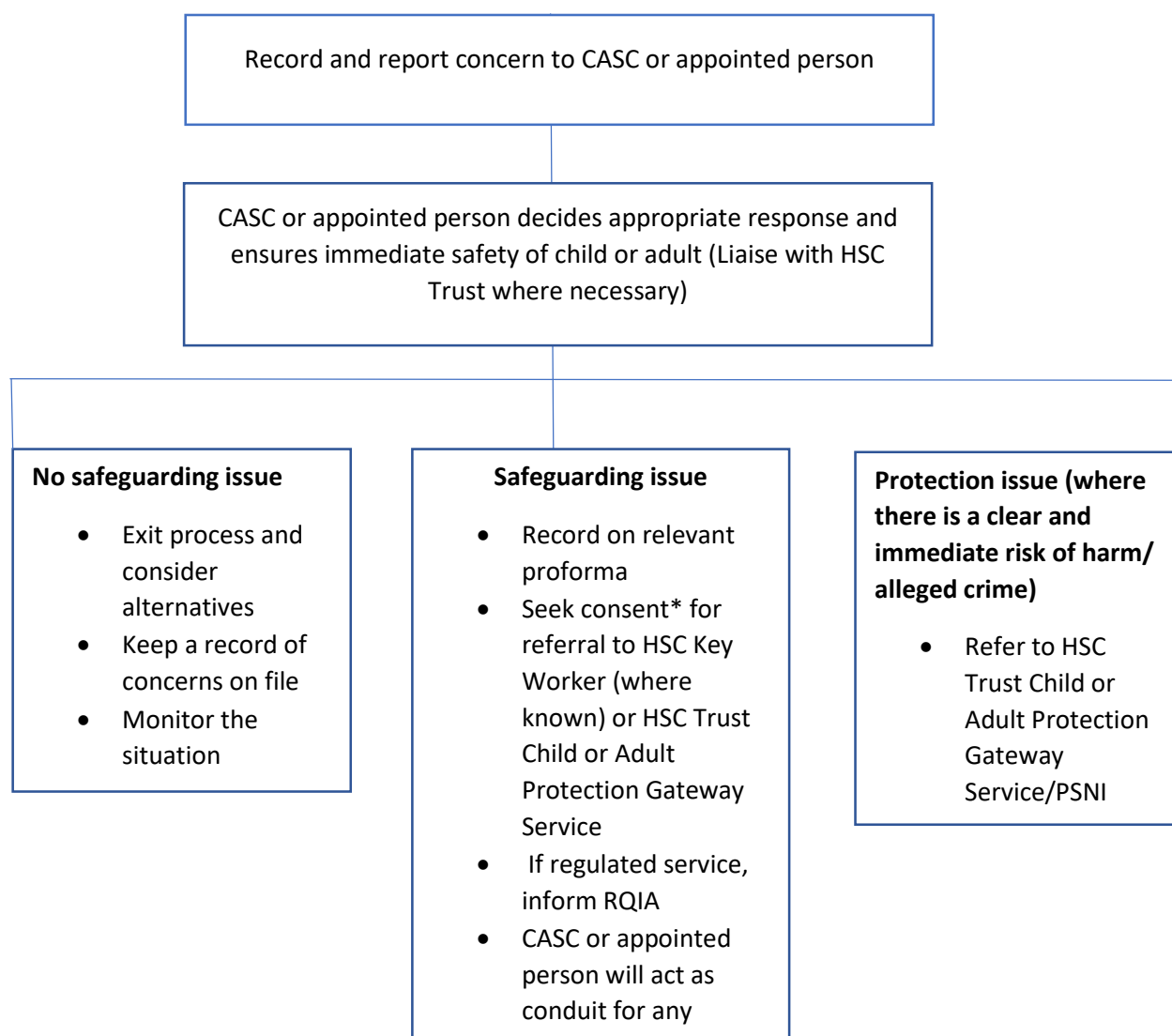
Our organisation whistleblowing policy and procedure are in place and makes it clear that:

- The organisation is committed to the highest possible standards of conduct, openness, honesty and accountability;
- The organisation takes poor or malpractice seriously, giving examples of the types of concerns to be raised e.g. Bullying, to ensure that a whistleblowing concern is clearly distinguished from a grievance;
- Staff or volunteers have the option to raise concerns outside of line management structures;
- Staff or volunteers are enabled to access confidential advice from an independent source;
- The organisation will, where possible, respect the confidentiality of a member of staff raising a concern through the whistleblowing procedure; and
- It is a disciplinary matter both to victimise a bona fide whistle-blower and for someone to maliciously make a false allegation.

There may be situations in which concerns or allegations turn out to be unfounded. It is important that everyone in the organisation knows that if they raise a concern which, through the process of investigation, is not validated, they have not in any way been wrong in their initial action. Responsible action needs to be encouraged in the organisation and whistle-blowers should be confident of support. The whistleblowing policy needs regularly reviewed to ensure the procedures work in practice. It is everyone's duty to be vigilant in preventing abusive practice.

## 10. Reporting Procedure Flow Chart

### Allegations of abuse against staff and volunteers – Flow Chart

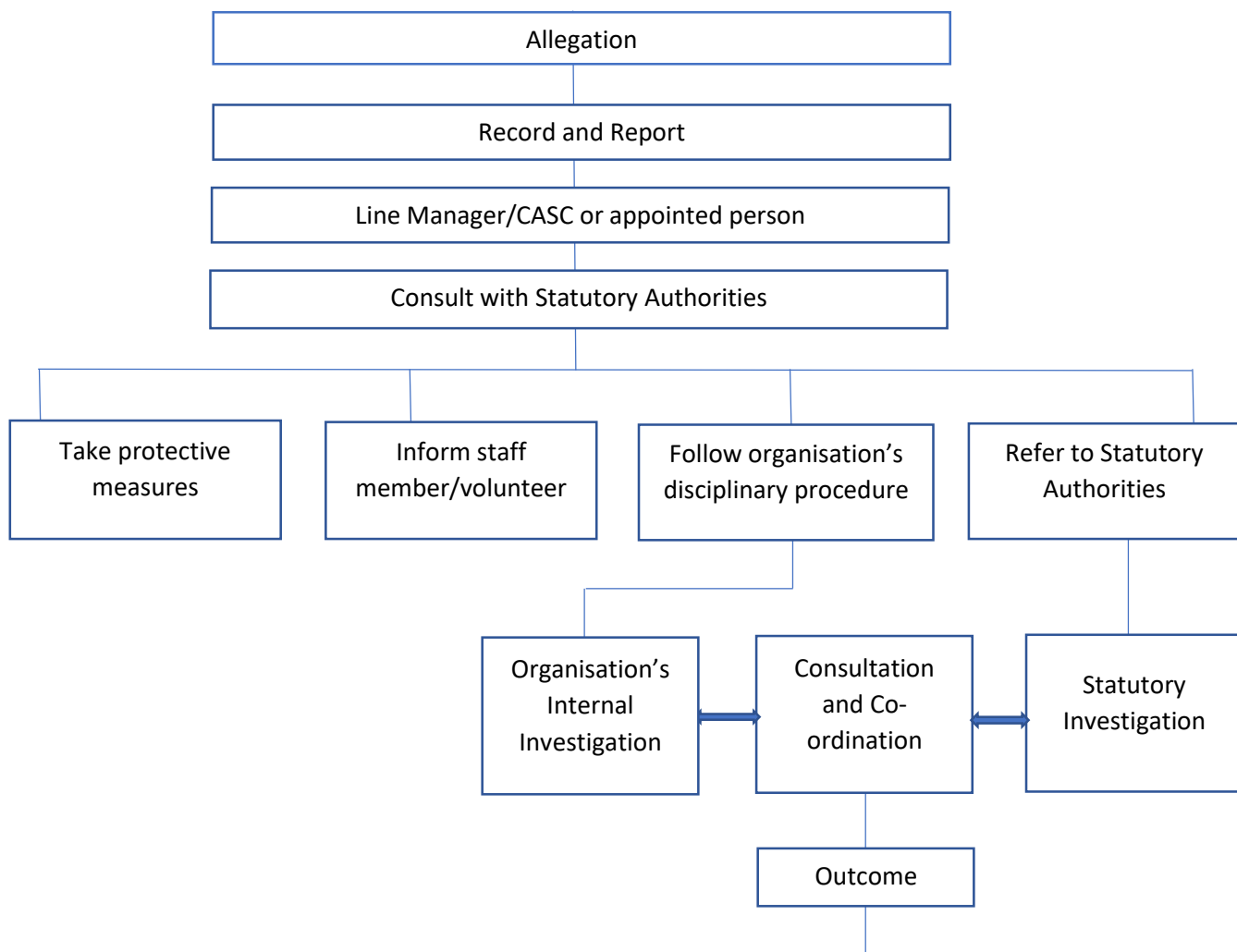


#### 10.1 HSC Trust Contact Details

Office	9am – 5pm	Out of Hours Contact No
Belfast	028 9504 1744	028 9504 9999
Northern	028 9441 3659	028 9504 9999
South Eastern	028 9250 1227	028 9504 9999
Southern	028 3754 4423	028 9504 9999
Western	028 7161 1366	028 9504 9999

## 10.2 Allegations of Abuse Flow Chart

### Allegations of abuse against staff and volunteers – Flow Chart



1 <u>or</u>	Allegation of harm/risk of harm substantiated – individual removed from regulated activity.	Refer the individual to the DBS and if relevant, inform appropriate professional body.
2 <u>or</u>	Allegation of harm/risk of harm substantiated – individual reinstated to regulate activity.	Appropriate disciplinary sanction should be applied, training/retraining undertaken, appropriate support and supervision provided. If relevant, inform appropriate professional body.
3 <u>or</u>	Allegation of harm/risk of harm unsubstantiated – ongoing concerns, e.g. practice concerns.	Staff member should be offered additional support, training/retraining and supervision if necessary. If relevant, inform appropriate professional body.
4	Allegation of harm/risk of harm unsubstantiated – no ongoing concerns.	Staff member should be offered additional support, training/retraining and supervision if necessary.

## 11. Assessing and Managing Risk

This organisation operates an effective procedure for assessing and managing risks with regards safeguarding children, young people and ‘adults at risk’:

1. A risk assessment is carried out to identify and evaluate risks to children and ‘adults at risk’ using services or participating in activities.
2. The identified risks are managed by putting in place risk-reducing measures.
3. All identified risks and risk-reducing measures are recorded and reviewed at least once per year.
4. The organisation recognises that all children, young people and adults have the right to take risks and should provide help and support to enable them to identify and manage potential and actual risks to themselves and others.
5. This organisation has a procedure in place for reporting, recording and reviewing accidents, incidents and near misses, which should in turn inform practice and the risk assessment and management procedure.

Assessing and managing risks to children, young people and ‘adults at risk’ is integral to our organisation’s risk management strategy. Risks are related to the working of the organisation; its provision of services; its delivery of individual activities; or its social guardianship responsibility.

### 11.1 Why Assess and Manage Risk?

In assessing and managing risks, our aim is to minimise either the likelihood of risk or its potential impacts. In safeguarding terms, the aim of risk assessment and management is to prevent abuse occurring, to reduce the likelihood of it occurring and to minimise the impacts of abuse by responding effectively when it does occur. An organisation should always take time to identify, evaluate and put in place risk-reducing measures.

### 11.2 Principles of Working with Risk

A number of important issues are considered by staff and volunteers who carry out risk assessments and risk management:

- The assessment and management of risk should promote the independence, real choices and social inclusion of children, young people and ‘adults at risk’;
- Risks change as circumstances change;
- Risk can be minimised, but not eliminated;
- Information relating to children, young people and adults, activities, relationships and circumstances will sometimes be incomplete and possibly inaccurate;

- Identification of risk carries a duty to do something about it, i.e. risk management;
- Involvement of children, young people and adults who use services, their families, advocates and practitioners from a range of services and organisations helps to improve the quality of risk assessments and decision-making;
- ‘Defensible’ decisions are those based on clear reasoning;
- Risk-taking can involve everybody working together to achieve positive outcomes;
- Confidentiality is a right, but not an absolute right and may be breached in exceptional circumstances when people are deemed to be at serious risk of harm, or it is in the public interest;
- The standards of practice expected of staff and volunteers must be made clear by their team manager/supervisor to give them the confidence to support decisions to take risk;
- Sensitivity should be shown to the experience of people affected by any risks that have been taken and where an event has occurred.

### 11.3 The Risk Assessment Process

There is a clear and regularly used risk assessment methodology used to assess and manage activities, or that is acceptable to the Education Authority. The risk assessment process involves:

- The identification of risks; and
- Determining the level of risk by evaluating its potential impact and the likelihood of it happening.

### 11.4 The Identification of Risks

This involves identifying in advance what risks may be associated with all of the activities of our organisation and the services we provide. Risks may vary for individuals and can depend on the nature and extent of an individual’s vulnerability. Identification of risk involves a balanced approach which looks at what is and what is not an acceptable risk. When identifying risks, there should be a specific focus on safeguarding risks, for example, by identifying the circumstances where abuse or exploitation are more likely to occur.

- Risk to children and adults at risk is known to be greater when:
  - The child or adult is emotionally or socially isolated;
  - A pattern of violence exists or has existed in the past;
  - Drugs or alcohol are being misused;
  - Relationships are placed under stress or bullying occurs

When care services are provided, abuse is more likely to occur if staff and volunteers are:

- Inadequately trained;
- Poorly supervised;
- Lacking support or working in isolation.
- In addition, to the known risk factors, a range of other factors may increase the likelihood of abuse:
- Where an illness causes unpredictable behaviour;
- Where the person is experiencing communication difficulties;
- Where the person concerned demands more than the worker can offer;
- Where the family dynamics undergo a change in circumstances (for example the sudden death of family member, recent unemployment, divorce, bereavement, etc);
- Where a member has been forced to change their lifestyle;
- Where a member's experiences disturbed nights on a regular basis;
- Where a member becomes isolated and is offered no relief from a demanding role;
- Where other relationships are unstable or placed under pressure;
- Where persistent financial problems exist;
- Where a family member abuses drugs (especially alcohol), is unemployed or under-employed, is poorly educated or has been in a previous, perhaps turbulent, relationship with the victim;
- Where a victim seeks to disclose abuse; get support; or to leave an abusive relationship.

The circumstances and factors listed above are neither exhaustive nor placed in order of priority. The number of staff and volunteers available is crucial, and, for Regulated Activities, the need for an appropriate number of suitably qualified, skilled, competent and experienced staff is a requirement. How and where services and activities are organised can also heighten or lessen the level of risk.

### 11.5 The Management of Risk

The next step is to look at what can be done to reduce the likelihood and lessen the impact of the identified risks. Risks can be managed in a number of ways. It is the responsibility of a named individual (the risk owner, normally youth worker in charge) to ensure that each identified risk is properly managed.

Risk ownership is an ongoing process for the lifetime of the identified risk. The risk owner will normally be the senior person within the organisation and s/he will be named in the



organisation's risk log/register/assessment, alongside the risk(s) for which s/he is responsible.

For the organisation, the primary aim of the Safeguarding Policy is to manage the risk of abuse to children, young people or 'adults at risk' by establishing an organisational culture in which the rights of all users are fully respected and by putting in place a range of procedures which support that culture.

Establishing a culture, which is mindful of and has a 'zero tolerance' of abuse wherever it occurs and whoever causes it and putting in place robust procedures are all part of an organisation's risk-reducing armoury. If properly implemented, the Safeguarding Policy will reduce both the likelihood and impact of abuse by, for example:

- Preventing unsuitable people from joining the organisation through good recruitment and selection practice;
- Making staff and volunteers aware of risk of harm, the possible signs of abuse and equipping them to respond quickly to concerns about actual, alleged or suspected abuse;
- Ensuring that staff and volunteers are properly inducted, trained, supported and supervised in their work with adults at risk;
- Ensuring that staff and volunteers know what constitutes acceptable behaviours and good practice and that they are supported when they challenge poor practice;
- Promoting a culture of inclusion, transparency and openness throughout the organisation and its services and activities;
- Making staff and volunteers aware of how information about children, young people and adults at risk should be handled; and
- Having in place good overall organisational management and practice supported by a range of organisational policies and procedures.

## 11.6 Risk Reducing Measures

It is essential that all risks and risk-reducing measures are recorded. Typically, this will take the form of a Risk Register/Assessment template. Our organisations works with children, young people and or 'adults at risk' and has a section of the Risk Register that deals specifically with safeguarding risks.

We keep risks and risk-reducing measures constantly under review. It is recommended that a risk review should be carried out at least once per year. Also, a risk review may be necessary at the point an organisation undergoes a process of change, for example, in circumstances where organisations with different cultures or experience merge or an organisation takes on a new activity or service.

## 12. Reporting, Recording and Reviewing Accidents, Incidents and Near Misses

Very often, there are lessons to be learned from accidents, incidents or near misses, which occur within our organisation. As a result, the organisation has in place a procedure for reporting and recording accidents, incidents and near misses that occur. These involve service users; they also involve staff members or volunteers.

Staff and volunteers should be aware of the reporting and recording procedure. Accidents, incidents and near misses, particularly those which are recurring, can be indicators of organisational risk, including a risk to safeguarding, which needs to be managed. It is important, therefore that the risk identification exercise makes reference to reported accidents, incidents and near misses and that the learning from these is:

- (a) identified and disseminated to staff and volunteers; and
- (b) used to inform changes in practice, policy and procedures.

Where the accident, incident or near miss is in some way connected to a safeguarding matter, it should be drawn to the attention of the Child and Adult Safeguarding Champion (CASC) for appropriate action.

## 13. Dealing with Complaints

**[insert org name] Youth Centre has clear standards and systems for enable, recording and dealing with complaints by either children, young people or adults.**

1. Our organisation has an ethos of inclusion, transparency and openness which is communicated to everyone involved in the organisation, including children, young people and adults at risk.
2. There are appropriate procedures in place to share concerns or make complaints about the organisation and these are sent to parents in the parent information leaflet. A poster is also erected in the hall for parents to better understand the systems used to make complaints.
3. Complaints procedures are communicated appropriately to everyone involved in the organisation, including adults at risk through the parent's information leaflet and social media.

Having a culture of inclusion, transparency and openness means that the organisation has nothing to hide in terms of its practice, and that it is open to feedback from service users, carers, advocates, staff and volunteers with a view to improving how it carries out its activities and delivers its services.

It is important to communicate that our organisation is committed to this principle through having a statement to this effect in our Safeguarding Policy. A statement is prominently displayed in our premises and in information materials about the organisation.

Our organisation, which purports to treat everyone with dignity and respect and is committed to safeguarding them from harm, will encourage and enable them to take an active role in planning and decision-making.

Some ways this can be achieved are through:

- A commitment to a listening environment within the organisation;
- A suggestion box to give everyone an opportunity to make suggestions about how things could be improved;
- A member's forum for those who use our services and staff/volunteers who discuss matters affecting their interests;
- Maintaining a record of matters and suggestions made by members and their representatives and actions taken;
- Involvement of member representatives on interview panels;
- Providing regular feedback on actions taken and developments in the organisation.

It is also important to establish and maintain contact with the parents and legal guardians who are involved in your organisation. Users will have a wealth of knowledge about the emotional, physical and cultural needs of the participants whom they care for or work with.

## **14. Management of records and sharing information – Data Protection**

- This policy is based on an expectation of confidentiality in the recording, use and management of personal information (See GDPR Policy).
- This policy informs staff and volunteers what information needs to be recorded and the limitations around the sharing of information.
- The policy informs staff and volunteers how written records should be secured, stored and eventually disposed of.
- The policy outlines what and how information is shared with relevant people within and outside of the organisation.
- Children, young people and adults involved with the organisation should have access to information held about them.

Our organisation has a clear statement about confidentiality and how this is to be respected in the context of safeguarding work. It is important that staff and volunteers in the organisation know that personal and sensitive details about the lives of children young

people and adults at risk with whom they work or who are in their care and their families should not be the subject of gossip.

They should also know that information cannot be passed on to others without good cause or reason and we all have a fundamental right to privacy of information and confidentiality. Care should be taken to ensure that when cases do have to be discussed with colleagues, the details cannot be overheard by others.

Information of a confidential nature should only be communicated on a need-to-know basis and, in most circumstances, with the consent of the child, young person or adults involved. Where the decision is made to share information without consent, the organisation must ensure that the persons involved is clearly informed of what information will be shared, why it will be shared, and who it will be shared with, providing this does not increase risks.

Our organisation will avoid asking for consent to share information when it is likely that a decision will be taken to share the information regardless of whether consent is given. The DOH Code of Practice on Protecting the Confidentiality of the Service User Information (2009) provides practical guidance to assist decision-making about the disclosure of personal information and the legal context in Northern Ireland in relation to confidentiality and disclosure. As stated in the Code: ‘...the obligation to protect confidentiality can be expressed in terms of three core ethical principles which underpin the law:

- Individuals have a fundamental right to the confidentiality and privacy;
- Individuals have a right to control access to the disclosure, withholding or withdrawing consent;
- For any disclosure of confidential information, staff should have regard to its necessity, proportionality and any risks attached to it.’

## 14.1 Data Protection Principles

With regards personal data [insert org name]’s Youth Centre:

- Shall be processed fairly and lawfully;
- Shall be obtained only for one or more specified and lawful purposes, and shall not be further processed in any manner incompatible with that purpose or those purposes;
- Shall be adequate, relevant and not excessive in relation to the purpose or purposes for which they are processed;
- Shall be accurate and, where necessary, kept up to date;
- Shall not be kept for longer than is necessary for the purpose or those purposes for which it was obtained;
- Shall be processed in accordance with the rights of the data subject under the Data Protection Act;

- Shall be protected against accidental loss or destruction of, or damage to, personal data by way of appropriate technical and organisational measures;
- Shall not be transferred to a country or territory outside the European Economic Area, unless that country or territory ensures an adequate level of protection of the rights and freedoms of data subjects in relation to processing of personal data.

We will therefore ensure that our confidentiality policy specifies:

- What personal information is needed and why;
- How that information should be securely stored;
- Who should have access to information;
- How long information should be kept;
- With whom information should be shared;
- A person's right of access to his/her own records; and
- How records will be disposed of.

## 14.2 What Needs to be Recorded

Our organisations will ensure that we will have essential personal details of all members for whom they provide services or activities. Essential joining information should include:

- The name, address and contact number of all members and where appropriate their carers, advocates or next of kin name(s) and contact details;
- Any medical and health issues or particular requirements;
- Contact with other professionals/agencies, if any.

Our organisation has a standard registration form for this information. This will be completed before the person accesses any service from our organisation so that reasonable adjustments can be made if appropriate. We give careful consideration to the storage of, and access to, this information. Members have the right to know why information is required and how it will be used.

## 14.3 Storage of Records

All written records are stored in a secure location and accessed by authorised personnel only. Electronic records held on computers should also be appropriately secured by way of password protection and restricted access. Information is disposed of within timescales that are in keeping with the requirements of the Data Protection Act.

## 14.4 Sharing Information Guidelines

Within our organisation Information is shared within the organisation on a 'need to know' basis only. Line Managers will have access to information to check that records are being made and maintained appropriately and to enable them to identify patterns of behaviour

emerging from incident reporting, which might give rise to the need to make a report to the local HSC Trust in accordance with procedures.

Children, young people and adults at risk, carers & advocates of members will be told how information will be used before they are asked to provide it and should be given an opportunity to discuss such uses. We communicate in a way which is clearly understood in our parent's information leaflet and using alternative means of communication where necessary including social media.

All information is sought sensitively and with privacy. When information needs to be shared, for example, in cases of emergency or in the case of suspected abuse, the member and/or their carer or advocate should be told what information was shared as soon as possible, ensuring that this does not expose the member to further risk of harm.

While information is confidential, it may be disclosed to external agencies to ensure the care and safety of an individual or of others, or where a crime is suspected. This includes the disclosure of information to the HSC Trust or PSNI for such purposes.

Good record keeping of decision making is essential in cases where information sharing is being considered. Our organisation maintains records of the information gathered which explains and justifies any decisions.

Agencies and organisations which are required to share information on a regular basis to safeguard members at risk must have Information Sharing Agreements (ISAs) in place which identify key members of staff and contact points within the organisation through which information can be channelled, including out of normal working hours, normally through the CASC. These agreements when necessary will be agreed at Board/Director level and subject to regular review. This agreement will outline how organisations have agreed to share information and ensure compliance with legal requirements. It should stipulate when information may be shared without the adult's consent.

## 14.5 User Access

Members at risk should normally expect to see any information held by the organisation about them and should be so informed. This applies to paper and electronic records and should extend to access of any record, unless any of the reasons for limiting access set out below apply.

Access should be provided, if requested, to the member, and, with his/her consent to another person acting on his/her behalf (where possible all such requests should be received in writing). In any case, a record should be made of all requests received and their outcomes. Where access is limited, this should also be recorded. For example, it may be necessary to limit access if: any part of the record contains confidential information about other people; or information was provided by another person or agency (such as doctor or other professional) and you have not been able to obtain their permission.

It might also be necessary to limit access to information in circumstances where a care professional thinks access would cause serious harm to the member's or someone else's physical or mental well-being. Information may be put, for example to:

- Better manage, plan and improve the services/activities provided;
- Help train staff and volunteers;
- Help with research, but only with the member's agreement; and
- Provide statistics about services/activities delivered by the organisation, noting that personal information is not used in this way and not shared with anyone other than in the circumstances set out above.

## 14.6 Destruction of Records

[insert org name] Youth Centre will hold all records for seven years where it involves young people's participation as per the data protection policy. All other records and evidence can be held for three years and will be shredded ensuring that no personal details of any participant or staff/volunteer can be accessed.

## 15. Code of Behaviour

**[insert org name] Youth Centre has a code of conduct and standards for its staff and volunteers.**

Our Code of Behaviour (the Code) contains positive statements about how staff and volunteers are expected to behave towards all users.

1. This Code outlines behaviours to be avoided.
2. This Code outlines unacceptable behaviours.
3. This Code contains guidelines relating to physical contact and any elements of care i.e medication.
4. This Code contains guidelines relating to physical intervention and restraint.
5. This Code contains guidelines relating to diversity and additional care and support needs that may be needed from time to time.
6. This Code contains guidelines on the handling of money.
7. This Code contains guidelines on the use of technology, including photography.
8. This Code outlines sanctions in the case of staff and volunteers breaching the Code.
9. This Code sets out an expectation that everyone involved in the organisation should relate to each other in a mutually respectful way.
10. This Code is tailored to organisational activities or services.

Our Code of Behaviour for the organisation will minimise the opportunity for members to suffer harm. It will also help to protect members, staff and volunteers by ensuring they are clear about the behaviour that is expected of them and the boundaries within which they should operate.

Many aspects of the Code of Behaviour are common sense, but it is worth formalising these to ensure consistency of practice throughout the organisation. In terms of encouraging ownership, we have involved members, staff, volunteers and adults at risk and their parents/carers/advocates in drafting and reviewing the Code for the organisation.

The Code is reviewed every three years or earlier if organisational changes make it necessary. It provides a clear guide to our staff and volunteers on how they should behave when working with children, young people and or adults at risk. It is a positive document encouraging members, staff and volunteers to take a rights-based approach.

However, the Code also highlights behaviours to be avoided and those which are unacceptable. Staff and volunteers must:

- Promote and protect the human rights of all members and visitors in every aspect of their work;
- Treat all members and visitors with dignity and respect;
- Be patient and listen;
- Communicate clearly, in whichever way best suits the individual and check their understanding;
- Adopt a person-centred approach;
- Treat all people fairly and equally;
- Promote independence and choice;
- Encourage participation;
- Help all people to fulfil their ability and potential;
- Involve all stakeholders in decision-making to the fullest possible extent.

### 15.1 Catering for Diversity and Young People with Additional Needs

Our organisation will make every effort to ensure that all elements of the organisation's management, services and facilities are open to all young people regardless of their abilities, background, faith, political opinion or economic abilities. We will strive to create a climate of diversity and interdependence that celebrates difference.



## 15.2 Behaviours to be Avoided

This Code also highlights the behaviours that should be avoided when working with children, young people and adults at risk. These refer to behaviours that staff and volunteers may slip into through lack of experience or training. While not intentionally harmful, such behaviour might be misconstrued, which ultimately could lead to allegations of abuse being made. For example:

Staff and volunteers should not:

- Spend excessive amounts of time alone with a child, young person or adult at risk;
- Take a child, young person or adult at risk to your own home;
- Take a child, young person or adult at risk alone on car journey, unless this forms part of the organisation's core activities. If it is unavoidable or necessary, these kinds of behaviours should only occur with the full knowledge and consent of a manager and an appropriate record maintained. Staff should always have another adult present where possible.

## 15.3 Unacceptable Behaviours

Unacceptable behaviours are those that should always be avoided in the interests of the safety of all those involved in the organisation. Staff and volunteers should never engage in any of the following behaviours with children, young people or adults at risk:

Abuse, neglect or harm a child, young person or adult, or place them at risk of harm, whether by omission or commission;

- Engage in rough physical games including horseplay;
- Engage in sexually provocative games e.g. spin the bottle, strip poker;
- Make sexually suggestive comments;
- Form inappropriate relationships;
- Gossip about personal and sensitive information; or
- Make/accept loans or gifts of money.
- Become involved in bullying of any kind

## 15.4 Physical Contact and Intimate Care

Staff and volunteers should ensure that:

- Physical contact is person-centred and appropriate to the task required;
- They are trained to understand and implement any necessary care plan, where required;

- When providing intimate care, it is done sensitively and with respect for the individual's dignity and privacy;
- They involve the individual as far as possible in his/her own intimate care;
- If they are concerned about anything during intimate care, they report it at the earliest opportunity.

## 15.5 Physical Intervention and Restraint

When situations arise that violence and restraints are required staff and volunteers should:

- Seek to defuse a situation, thereby avoiding the need to use any form of restraint;
- Only use restraint where it is absolutely necessary to protect the individual or others from harm;
- Ensure that any restraint used is proportionate to the risk of harm;
- Only use forms of restraint for which they have received training and which follow current best practice;
- Record and report any use of restraint immediately to the line manager and CASC;
- Review any situation that led to the need for restraint with their Line Manager, with a view to avoiding the need for restraint in the future

## 15.6 Handling Money

Staff and volunteers should:

- Maintain records of personal allowances, receipts and expenditure in line with organisational policy;
- Never deny a person access to his/her money;
- Never gain in any way when using the member's money on his/her behalf or guiding them in the use of their own money;
- Never borrow money from, or lend money to, a member you are working with or caring for;
- Report any suspicions of financial abuse

## 15.7 Use of Social Media & Mobile Phones

New technologies, such as social networking websites and mobile phones (see mobile phone policy), can be misused by those who are intent on harming or exploiting children, young people and or adults at risk. Staff and volunteers should:

- Not photograph/video a child, young person and or adult, even by mobile phone, without the person's valid consent;
- Ensure that any photographs/videos taken are for appropriate use within the consent;
- Report any inappropriate use of images;
- Report any inappropriate or dangerous behaviour on the internet that involves risk.

It is important that children, young people and adults at risk are made aware of the dangers associated with new technology, such as social networking sites, mobile phones and the internet, and know to tell someone if they encounter anything that makes them feel unsafe or threatened.

## 15.8 Breaching the Code

Staff and volunteers should understand that:

- If staff or volunteers are unsure of their actions and feel they may have breached the Code, they should consult with their Line Manager;
- Breaching the Code is a serious issue that will be investigated;
- Breaching the Code may result in disciplinary action and ultimately dismissal and if it constitutes harm/risk of harm, referral to the HSC Trust, PSNI, DBS and regulatory bodies, as appropriate.