



BEYOND LIMITS

Beyond the limits of conventional support

Safeguarding Children Policy

This policy sets out the roles and responsibilities of Beyond Limits in working together with other professionals and agencies to protect children from harm or the potential for harm. This policy confirms our child protection procedures that must be followed by all colleagues who have contact with children.

April 2023

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IMPORTANT INFORMATION & INTRODUCTION

WORKING TOGETHER TO PROTECT CHILDREN & YOUNG PEOPLE FROM HARM

All colleagues should know from the onset that 'nothing is more important than children's welfare. Children who need help and protection deserve high quality and effective support as soon as a need is identified' (Working Together to Safeguard Children).

BEYOND LIMITS & CHILD PROTECTION

Beyond Limits is an organisation that provides support to adults and young people (16+) in transition with the label of learning disability or a diagnosis of mental health illness. Importantly, we may support people who have children of their own or may be around children within their families.

Beyond Limits are committed to the protection of children and regard the safeguarding and promoting of the interests and well-being of children as of paramount concern. We are clear that it is the duty of all those employed or involved with Beyond Limits to prevent the abuse and/or neglect of children and protect them from harm or the potential for harm. This applies to all children with whom colleagues have contact, and it means that if/where colleagues have any concerns about the welfare of a child, they must raise those concerns and take action.

All colleagues (i.e., employees/staff) must follow the aims and principles of this policy, along with the clearly defined procedures. There must be no doubt that if there are any concerns about the welfare of a child, colleagues must speak up and take action.

Safeguarding children and promoting their welfare includes:

- Protecting them from maltreatment or things that are bad for their welfare, health, and development.
- Promoting their safety and wellbeing.

REMEMBER:

No single practitioner can have a full picture of a child's needs and circumstances and, if children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information, and taking prompt action. (Working Together to Safeguard Children)

PARTNERSHIP WORKING

Our Safeguarding Children Policy aims to provide clear guidance and instruction to colleagues and volunteers on what must be done to protect children from abuse and/or neglect.

The policy references and reflects current legislation and guidance about safeguarding issues and other concerns relating to the protection of vulnerable children. The Care Standards Act 2000, The Children's Homes (England) Regulations 2015, The Children Act 1989, Care Act 2014, Safeguarding Vulnerable Groups Act 2006 and, where appropriate, the Mental Capacity Act 2005 provide the statutory underpinning of this policy. Working Together to Safeguard Children (WTSC) (July 2018), Keeping Children Safe in Education (KCSIE) (2022) and What to Do if You're Worried a Child is Being Abused (2015) are key drivers for ensuring our processes are effective and robust.

A key part of effective safeguarding is driven by purposeful and focused partnership working, which should be delivered through person-centred collaborative practice. This means:

- Individual colleagues must understand that they cannot singularly – on their own – meet the complex needs of children and young people. This means that they must work together to ensure that vulnerable children and young people remain safe from harm.
- In order that collaborative practice is effective, it is vital that every individual who has contact with children and young people remains aware of the role that they play and the role of other professionals.
- Being clear that effective safeguarding systems are person-centred (i.e., the needs and welfare of the child or young person must be central to agreed interventions, strategies, and risk mitigation).

OUR SAFEGUARDING AIMS

This policy aims to ensure children and young people who (a) access our support (i.e., post-16 years) and (b) live with adults receiving support are protected from harm. This means protecting children from emotional, physical, institutional, and domestic abuse, or substantiated indications of bullying, self-harm, and faltering growth.

CATEGORIES OF ABUSE & NEGLECT

ABUSE

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

PHYSICAL ABUSE

Physical abuse is a form of abuse which may involve hitting, shaking, throwing, poisoning, burning, or scalding drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, as well as preventing the child from participating in normal social interaction.

Emotional abuse may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

SEXUAL ABUSE

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

NEGLECT

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It includes self-neglect and any relate impact of financial abuse. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse.

Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing, and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

INDICATORS OF ABUSE & NEGLECT

The following may help you decide whether a child's welfare is at risk of abuse, harm, or neglect. Please remember that the examples below are non-exhaustive and should not always be considered in isolation.

SIGNS OF POTENTIAL PHYSICAL ABUSE:

- Any bruising to a baby.
- Multiple bruising to different parts of the body.
- Bruising of different colours indication repeated injuries.
- Fingertip bruising to the chest, back, arms or legs.
- Burns of any shape or size.
- An injury for which there is no adequate explanation.

SIGNS OF POTENTIAL EMOTIONAL HARM:

- Parents are over critical and emotionally distant, or who are unable to meet their child's emotional needs.
- Children whose behaviour is excessive, for example, excessive bedwetting, overeating, rocking, head banging.
- Children who self-harm, for example, they may cut or scratch themselves or overdose.
- Children who attempt suicide.
- Children who persistently run away from home.
- Children who show high levels of anxiety, unhappiness or who are withdrawn.

SIGNS OF POTENTIAL SEXUAL ABUSE:

- Something a child had told you.
- Something a child has told someone else.
- A child who shows worrying sexualised behaviour in their play or with other children.
- A child who seems to have inappropriate sexual knowledge for their age.
- A child who may be visiting or being looked after by a known or suspected sexual offender.

SIGNS OF POTENTIAL NEGLECT:

- Squalid, unhygienic, or dangerous home conditions.
- Parents who fail to attend to their children's health or development needs.
- Children who appear persistently undersized or underweight.
- Children who continually appear tired or lacking in energy.
- Children who suffer frequent injuries due to lack of supervision.

WHAT TO DO IF YOU HAVE CONCERNS ABOUT THE WELFARE OF A CHILD

If a concern is identified indicating possible abuse or harm to a child, colleagues must:

- Inform the DSL (Kathleen Griffiths) or the on-call manager (if out-of-hours).
- Be proactive, non-judgmental, and follow the procedures detailed in this policy.

If a child makes a disclosure or an allegation, colleagues must:

- Listen and take seriously what a child says and never express disbelief.
- Do not make any suggestions about what has taken place, or how it came about, or question the child except to clarify what they are saying.
- Allow the child time to express themselves' and do not press for detail beyond what is necessary.
- Do not ask a child to repeat what has been said to anyone else before referring.
- Be calm and reassuring.
- Do not make assumptions and judgements about what is being said.
- Do not promise to keep information secret. Be clear you'll have to refer the matter on and to whom.
- Tell the child that there are people who can help.
- Do not contact parents directly if the disclosure is made about a family member, take advice from the MASH/EDT.
- Record what has been said, using the child's exact words, and what you said in response. Be factual and state opinion, sign, date report and send to social worker. Although anybody can make a referral to the Multi-Agency Safeguarding Hub (MASH), we expect that colleagues will inform the DSL who will be able to lead the process and ensure that appropriate action is taken.

RESPONDING TO CONCERNS ABOUT POTENTIAL HARM OR ABUSE

The below diagram illustrates what action should be taken and who should take it where there are concerns about a child or young person. If, at any point, there is a risk of immediate serious harm to a child a referral should be made to Children's Services (Social Care). Anybody can make a referral.



AN ALLEGATION AGAINST A COLLEAGUE REGARDING A CHILD OR YOUNG PERSON WILL BE REFERRED TO THE LOCAL AUTHORITY DESIGNATED OFFICER (LADO).

THE POLICE MUST BE CALLED IF ILLEGAL ACTIVITY IS SUSPECTED, OR IT IS AN EMERGENCY.

PROTECTING CHILDREN FROM ABUSE & NEGLECT

KNOWING WHAT TO LOOK FOR IS VITAL TO THE EARLY IDENTIFICATION OF ABUSE & NEGLECT.

Colleagues should be aware of the categories and indicators of abuse and neglect, such as those illustrated on pages 3 through 5, so that they are able to identify cases of children who may need help or protection.

If colleagues are unsure, they should always speak to the Designated Safeguarding Lead (DSL).

THE DESIGNATED SAFEGUARDING LEAD (DSL)

The Designated Safeguarding Lead (DSL) is Kathleen Griffiths. Kathleen is responsible for ensuring that the practice of Beyond Limits is safe and effective.

You can call her on 07779 241386 or contact her via email at kathleen.griffiths@beyondlimits-uk.org

Kathleen is also the Registered Manager, she must be informed of all concerns, issues, or incidents regarding any of the individuals we support, or the children of those who receive support.

Upon receipt of any such concerns Kathleen must consult with Doreen Kelly (Managing Director) and Rebecca Chadwick (Senior Service Leader). The purpose is to ensure that all reasonable and practicable measures are set in place to keep children safe from abuse or neglect.

Ultimate legal responsibility for safeguarding rests with Doreen Kelly as Managing Director. Therefore, Doreen is the Nominated Safeguarding Lead (NSL) for Beyond Limits. Although Doreen is the NSL, day-to-day lead responsibility for safeguarding rests with Kathleen as the DSL.

By working together, both with colleagues and external agencies, we seek to ensure that children, young people, and adults are consistently:

- Protected from any form of maltreatment arising from harm.
- Prevented from suffering impairment of health or development.
- Provided with safe and effective care and support.
- Given every opportunity to secure optimum life chances.

This commitment extends to all colleagues regardless of their role and responsibilities. We expect that colleagues will speak up if they see or hear anything that could be a potential concern. The DSL will always seek to ensure that we work together to protect children who access our support or those who live with adults who access our support and their families.

WHAT ARE THE DSL'S MAIN DUTIES AND RESPONSIBILITIES?

The DSL will:

- Take a lead role in developing and reviewing safeguarding policies and procedures in partnership with the Nominated Safeguarding Lead (NSL).
- Take a lead role in implementing our safeguarding policies and procedures.
- Make sure that everyone working with or around children understands the safeguarding and child protection policy and procedures and knows what to do if they have concerns about a child's welfare.
- Make sure children who access our support know who they can talk to if they have a welfare concern and understand what action the organisation will take in response.
- Receive and record information from anyone who has concerns about a child.
- Store and retain child protection records.
- Work closely with the Nominated Safeguarding Lead (NSL) to ensure they are kept up to date with safeguarding issues and are fully informed of any concerns about organisational safeguarding and child protection practice.
- Take the lead on responding to information that may constitute a child protection concern, including a concern that an adult involved with Beyond Limits may present a risk to children. This includes:
 - i. Assessing and clarifying the information.
 - ii. Making referrals to statutory organisations as appropriate.
 - iii. Consulting with and informing the relevant members of the organisation's management, including the NSL.
 - iv. Following Beyond Limits safeguarding policy and procedures.
- Liaise with, pass on information to and receive information from statutory child protection agencies such as:
 - i. The local authority child protection services; and
 - ii. The Police.

This includes making formal referrals to agencies when necessary.

- Report regularly to the Senior Management Team (SMT) on issues relating to safeguarding and child protection, to ensure that child protection is seen as an ongoing priority issue and that safeguarding requirements are being followed at all levels of the organisation.
- Be familiar with and work within inter-agency child protection procedures developed by the local child protection agencies (i.e., the Local Safeguarding Partnership Board and the Local Authority Designated Officer (LADO) for example).
- Be familiar with issues relating to child protection and abuse, keeping up to date with new developments in this area.
- Attend training in issues relevant to child protection and share knowledge from that training with everyone who works or volunteers with or for children and young people at the home, and throughout the organisation.

LOCAL AUTHORITY CHILD PROTECTION SERVICES

When child protection processes indicate that there are significant concerns about the safety or wellbeing of a child. The DSL (Kathleen Griffiths) must be notified if colleagues have concerns about the welfare of a child. If the DSL is not available, colleagues should inform the Management On-Call Service.

The DSL/Senior On- Call will co-ordinate a response. In all such cases it is imperative that the following agencies are notified:

MASH – MULTI-AGENCY SAFEGUARDING HUB

The Multi Agency Safeguarding Hub (MASH) brings key professionals together to facilitate early, better quality information sharing, analysis, and decision-making, to safeguard children, young people, and vulnerable adults more effectively. Within the MASH, information from different agencies will be collated and used to decide what action to take. As a result, the agencies will be able to act quickly in a coordinated and consistent way, ensuring that children and vulnerable adults are kept safe. Please note: Not all local authorities use the term Multi-Agency Safeguarding Hub (MASH) and have provisions that meet “MASH” duties under a different name.

The MASH acts as the first point of contact, receiving new safeguarding concerns/enquiries relating concerns about abuse, neglect, or concerns about potential/actual harm impacting upon children.

EMERGENCY DUTY TEAM (EDT)

The Emergency Duty Team (EDT) deals with social care emergencies outside office hours involving vulnerable children or adults.

THE POLICE

Call 999 if the child is at immediate risk of harm. If colleagues know or suspect that a child is in danger, the Police must be called. All colleagues notifying the Police must inform the DSL/senior On-Call immediately. Accurate records must be taken and retained within the child’s case files.

LOCAL AUTHORITY DESIGNATED OFFICER (LADO)

Every local authority should have a Local Authority Designated Officer (LADO) or team of officers (either as part of multi-agency arrangements or otherwise). Their role is to be involved in the management and oversight of allegations against people who work with children.

Arrangements should be put in place to ensure that any allegations about those who work with children are passed to the LADO without delay.

MULTI-AGENCY SAFEGUARDING ARRANGEMENTS (MASA)

Every Local Authority in the country must have Multi-Agency Safeguarding Arrangements (MASA) in partnership with the Police and Health. The below table provides a list of relevant Local Safeguarding Partnership Boards:

DORSET

If you have a serious concern about a child or family, contact the Children's Advice & Duty Service (ChAD) by calling [01305 228558](tel:01305228558)

The Local Authority Designated Officer (LADO) for Dorset can be contacted on [01305 221122](tel:01305221122) or by email: LADO@dorsetcouncil.gov.uk

CORNWALL

If you have a serious concern about a child or family, contact the Multi-Agency Referral Unit by calling [0300 123 1116](tel:03001231116) or [01208 251300](tel:01208251300) for the Out of Hours Service

The Local Authority Designated Officer (LADO) for Cornwall and the Isles of Scilly can be contacted on [01872 326536](tel:01872326536)

PLYMOUTH

If you have an urgent child protection concern, then please call Plymouth Gateway on [01752 668000](tel:01752668000) (or [01752 346984](tel:01752346984) out of hours). You will be asked to follow up your call by submitting a MASH Contact form the same day.

The Local Authority Designated Officer (LADO) for Plymouth can be contacted on [01752 306758](tel:01752306758) or by email: LADO@plymouth.gov.uk

TORBAY

If you have a serious concern about a child or family, contact MASH@torbay.gov.uk or phone [01803 208100](tel:01803208100)

The Local Authority Designated Officer (LADO) for Torbay can be contacted on [01803 208541](tel:01803208541)

SOMERSET

If you have a serious concern about a child or family, contact childrens@somerset.gov.uk or phone [0300 123 2224](tel:03001232224). Consultation line for DSLs: [0300 123 3078](tel:03001233078)

A notification to the LADO should be made by completing an Allegations Reporting Form (ARF) found on Somerset Safeguarding Children Partnership website: www.sscb.safeguardingsomerset.org.uk/working-with-children/allegations-management

PROCEDURES: ABUSE OF TRUST

It is important for colleagues to understand the conditions applied to abuse of trust, along with the related mandatory responsibilities.

The Sexual Offences Act 2003 (Sections 16 and 17) respectively are defined as ‘Abuse of position of trust: sexual activity with a child’ and ‘Abuse of position of trust causing or inciting a child to engage in sexual activity.’

WHAT IS AN ABUSE OF TRUST?

Abuse of Trust:

- Can occur in a number of settings, for example, in an education establishment, a residential establishment, a foster home, a social club or other activity.
- Relates to all relationships where one person is in a position of responsibility (and power) in relation to another person, who is either under 18 years or is a vulnerable adult, whether the relationship is of a heterosexual or homosexual nature.
- Relates to paid employees, ex-employees, unpaid colleagues (for example trainees and students), volunteers, foster carers, consultants, and contractors.
- Occurs where the person in a position of trust betrays the trust and enters into a relationship, particularly a sexual relationship, but also other abusive relationships, with a child/young person or vulnerable adult (referred to as service user), for whom they have responsibility.

Abuse of Trust is distinct and different from sexual abuse or other abuse. Sexual and other forms of abuse take place where the victim does not or cannot consent to his or her treatment. There need not be any abuse of a relationship of trust. Any sexual activity which is not freely consenting is criminal. In contrast, the sexual activity covered by ‘Abuse of Trust’ may seem consensual, but it is rendered unacceptable because of relative positions of power. This refers to the potential for people in a ‘relationship of trust’ to misuse or abuse that relationship.

Colleagues and volunteers are in a relationship of trust because they have the potential to hold power or influence over children and young people, or other vulnerable groups. This must never be abused.

WHAT ARE OUR RESPONSIBILITIES?

Basic Principles:

- The need to safeguard and promote the welfare of children and protect them from sexual activity from those supporting them within a relationship of trust is paramount.
- All adults have a duty to raise concerns about the behaviour of colleagues, managers, volunteers, or others which may be harmful to a child, without prejudice to their own position.
- This applies to all adults, regardless of gender, race, religion, sexual orientation, or disability.

All colleagues must be aware that:

- Any form of sexualised activity or behaviour involving a child will not be tolerated. Any colleague proven to be engaged in such activities will be subject to the full rigor of the law.
- Any other inappropriate activities or conduct, such as irregularities with financial support or psychological/emotional abuse, will not be tolerated.

Colleagues must ensure that:

- Any concerns about the behaviour or activities of a colleague, visitor, or contractor towards a child must be escalated (without delay) to the DSL.

It is noted that if there are concerns about a family member or friend of an individual accessing our support, the DSL must be informed, and child protection procedures will be invoked.

PROCEDURES: MANAGING ALLEGATIONS & DISCLOSURES

For the avoidance of doubt, if an allegation or a disclosure is made by a child or young person, the procedures clarified in this policy must be followed. A disclosure or allegation made against or about a colleague, regarding their conduct or behaviour towards a child or young person, must be taken seriously and escalated as a priority. This will result in an investigation.

The following definitions should be used when determining the outcome of allegation investigations:

- **SUBSTANTIATED:** There is sufficient evidence to prove the allegation.
- **MALICIOUS:** There is sufficient evidence to disprove the allegation or a deliberate act to deceive.
- **FALSE:** There is sufficient evidence to disprove the allegation.
- **UNSUBSTANTIATED:** There is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.

- **UNFOUNDED:** To support cases where there is no evidence or proper basis which supports the allegation being made.

Details of allegations that are found to have been malicious should be removed from personnel records.

For all other allegations, it is important that a clear and comprehensive summary of the allegation, details of how the allegation was followed up and resolved, and a note of any action and decisions reached, is kept on the confidential personnel file of the accused person. A copy of which must be provided to the person concerned.

MANDATORY PROCEDURES: MANAGING ALLEGATIONS

This part refers to managing cases of allegations that might indicate a person would pose a risk of harm if they continue to work in regular or close contact with children and young people in their present position, or in any capacity. It should be used in respect of all cases in which it is alleged that a colleague, agency staff or volunteer has:

- Behaved in a way that has harmed or may have harmed a child.
- Possibly committed a criminal offence against or related to a child.
- Behaved towards a child in a way that indicates s/he would pose a risk of harm.
- Behaved in a way that indicates they make not be suitable to work with children, young people or vulnerable adults.

An allegation against a colleague regarding a child will be referred to the Local Authority Designated Officer (LADO). In all cases, the Police must be called if illegal/criminal activity is suspected, or it is an emergency. This includes historical allegations, as well as allegations against a former colleague. In all cases, if criminality is alleged, the allegation should be referred to the Police.

INITIAL CONSIDERATIONS

The procedures for dealing with allegations need to be applied with common sense and judgement. Some allegations may be so serious they require immediate intervention by Children's Services Social Care and the Police as appropriate to the circumstances.

CONFIDENTIALITY

It is extremely important that when an allegation is made, all colleagues involved make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered. This is particularly important because an allegation can have a range of outcomes and:

- Gossip and/or assumption about the allegation(s) can (and will) compromise the process; and
- We all have a duty to safeguard the welfare of colleagues.

Colleagues must note that any such inappropriate comment or discussion will be taken extremely seriously in the event of an allegation.

RESIGNATIONS & “SETTLEMENT AGREEMENTS”

If the accused person resigns, or ceases to provide their services, this will not prevent an allegation being followed up. A referral to the DBS will be made by the DSL. If the accused person resigns or their services cease to be used, and the threshold criteria for making a DBS referral is met, it will not be appropriate to reach a settlement or compromise agreement. This is because not complying with a legal duty to make a referral is a criminal offence.

PLEASE NOTE:

We have a shared responsibility to safeguard children. For the purposes of this policy if you become aware that, or suspect that, an agency professional has harmed a child or presents in a way that indicates a risk of potential harm, the following procedure still applies.

STEP-BY-STEP PROCEDURE

If an allegation is made, or it is suspected or reported that a colleague has mistreated or caused significant harm to a child, it is imperative that this is taken seriously. The following details action that must be taken.

STEP ONE

Upon receipt of an allegation, colleagues must report all details to the manager (i.e., DSL) as soon as possible, taking full account of records completed in line with ‘What to do if you have concerns about the welfare of a child (Page 5).’ If “out-of-hours,” colleagues must inform the manager on call, who will in turn notify the DSL at the first available opportunity.

In all cases where it is alleged that a colleague has potentially harmed, actually harmed, or presented in a way that indicates a risk of harm, the Managing Director (Doreen Kelly) must be informed. Doreen is the Nominated Safeguarding Lead (NSL). For clarification see next page:

IF THE ALLEGATION INVOLVES:	YOU MUST IMMEDIATELY NOTIFY:
A colleague or an agency professional	The DSL or On-Call Manager. The On-Call Manager will notify the DSL at the first available opportunity, handing over “case responsibility” to them.
The DSL	The On-Call Manager, who will inform the NSL (Managing Director). N.B. If the DSL is on Rota as the On-Call Manager, you should go directly to the NSL.
The On-call Manager	The DSL
The NSL	The DSL, who must notify either Rob Finney (Tristone’s Chief Operating Officer) or Daryl Holkham (Tristone’s Director of Operational Corporate Governance).
The DSL & the NSL	Either Rob Finney (Tristone’s Chief Operating Officer) or Daryl Holkham (Tristone’s Director of Operational Corporate Governance).

Beyond Limits colleagues have the option of notifying either Rob Finney (Tristone’s Chief Operating Officer) or Daryl Holkham (Tristone’s Director of Operational Corporate Governance) if they feel unable to raise a whistleblowing concern with the DSL and NSL (as illustrated in the above table).

Rob and Daryl can be contacted when colleagues feel unable to raise the concern internally (i.e., within Beyond Limits) and/or where an allegation involves the DSL and/or NSL. You can contact:

- Rob by phone on 07340 356371 or by email using rob.finney@tristone.healthcare
- Daryl by phone on 07969 973920 or by using daryl.holkham@tristone.healthcare

In all circumstances it is crucial that any allegation made against any colleague is escalated as a priority. Although dependent upon individual circumstances, the DSL will likely co-ordinate a referral to the relevant Safeguarding Adults Board/Partnership.

ESSENTIAL ACTION

In keeping with procedures outlined in this policy, allegations must be reported within 1 working day to the relevant Local Authority Designated Officer (LADO). The LADO will advise on the actions and/or measures that must be taken. This will be either:

- No further actions required. (LADO has communicated that the allegation does not reach the threshold for escalation).

- An internal investigation with outcomes fed back to LADO for a decision of how to proceed.
- A strategy discussion.

ADDITIONAL NOTIFICATIONS

The DSL (or relevant case manager if the DSL is the subject of the allegation) must notify:

- The Police (if criminal behaviour is suspected, such as alleged abuse for example).
- The child's social worker.
- Any appropriate parents (as agreed and detailed in the child's care planning).
- The NSL or Rob Finney/Daryl Holkham if the allegation relates to the NSL.
- The relevant regulator (if the context of service is regulated).

STEP TWO

It is imperative that every reasonable effort is made to ensure that the rights of the child, and colleagues, are protected and promoted. All action taken must be recorded in a safeguarding log, and the welfare of the child/ren concerned must be treated as a priority.

The colleague who is the subject of the allegation may be suspended from work or asked to take 'garden leave.' Suspended colleagues or those on garden leave will remain on full pay during the period of suspension from duties or garden leave (excluding any payments made for sleeping in, etc.).

NOTE: Agency professionals will be asked to leave the premises as soon as it is safe to do so, and the agency will be notified of the allegation. The agency will be informed that the LADO will be informed, and the agency will be named as the employer.

Colleagues subject to these measures will be provided with a single point of contact to support their welfare and respond to any queries (some of which may not be addressed due to any ongoing sensitivities). We are clear that colleagues must be fully supported during the investigation process.

STEP THREE

The colleague who is the subject of the allegation should only be informed about the allegation after consulting with the LADO.

Colleagues must note that where a Strategy Discussion is needed, or the Police or other statutory agencies may need to be involved, this should not be done until all relevant agencies have been consulted and critically, they have agreed upon what information can be disclosed to the person.

If the person is a member of a trade union or a professional association, they should be advised to seek support from that organisation.

STEP FOUR

During the enquiry, the colleague concerned will be told not contact or discuss the matter with colleagues or children.

STEP FIVE

If there is cause to reasonably believe the child has suffered or is likely to suffer significant harm a Strategy Meeting will be convened.

A Section 47 'Strategy Meeting' will involve all relevant professionals (including any agency staff provider). They will discuss the allegation and decide the next steps to take. This may involve an "interview under caution" carried out by the Police, and a joint interview of the child by the Police and local authority.

STEP SIX

Once the enquiry is complete, the colleague who is the subject of the allegation shall be informed of the outcome(s), where it is appropriate to do so. The decision will be made in consultation with relevant agencies.

Depending upon the outcome of the enquiry, disciplinary measures may be invoked.

Colleagues should note that even if the threshold for a child protection concern has not been reached, Beyond Limits may still proceed with disciplinary measures if there is evidence of behaviour that is consistent with misconduct or gross misconduct. This also applies if the Police decide there are insufficient grounds for a criminal investigation or conviction.

STEP SEVEN

If the outcome of the process confirms that the allegation was malicious, unsubstantiated, false, or unfounded, the colleague will be debriefed and asked to participate in a 'Back to Work' interview.

Likewise, if there have been grounds for disciplinary measures that have not resulted in dismissal, the colleague will be debriefed and asked to participate in a 'Back to Work' interview.

In both scenarios, the returning colleague will have the opportunity to discuss any unresolved feelings or concerns with a manager.

If the outcome of the process is substantiated (and the colleague has deliberately harmed a child), Beyond Limits will follow any recommendations and required actions arising from relevant agencies. This will likely include a notification to the Disclosure and Barring Service (DBS).

Colleagues should be aware that it possible that the colleague who is the subject of the concern will be dismissed on the grounds of gross misconduct, and the Police will progress their involvement accordingly.

PLEASE NOTE:

If an allegation of historical abuse is made, the DSL will refer the matter to the MASH, LADO (where appropriate) and the Police. If you witness harmful practice by a colleague, you must speak up and follow the conditions of our Allegations Policy.

IMPORTANT REMINDER: RAISING CONCERNS & SPEAKING UP

There may arise situation(s) where colleagues have concerns about:

- Any child's welfare and/or wellbeing.
- Any colleague or the practice of any colleague.
- Any other persons' working with the child.
- Any other person who has contact with the child (e.g., sport coach, scout leader, etc.).
- Any other concerns

If so, you must SPEAK UP. Colleagues are reminded that failure to speak up [regarding concerns identified or witnessed] will necessitate disciplinary action.

WHISTLEBLOWING

If colleagues are in any way concerned about raising a using any of the above options, they can raise a concern in confidence with the CQC:

Email: enquiries@cqc.org.uk or call 03000 616161

You can also write directly to:

CQC National Correspondence, Citygate, Gallowgate, Newcastle-Upon-Tyne, NE1 4PA

Whistleblowing guidance for people who work for CQC registered providers:

www.cqc.org.uk/whistleblowing

Please note that all colleagues have a duty to raise concerns internally (i.e., within Beyond Limits) first. If they feel unsatisfied or they do not feel they are being listened to, only then should they use the options provided above. For clarity, CQC guidance states:

Ideally, such concerns should be dealt with by the employer. However, if the management have not dealt with those concerns by responding appropriately to them, perhaps by using the employer's own whistleblowing policy, or the worker does not feel confident that the management will deal with those concerns properly, they can instead make a disclosure to a 'prescribed body', such as a regulator like CQC.

The Public Interest Disclosure Act 1998 (PIDA) protects workers by providing a remedy if they suffer a workplace reprisal for raising a concern which they believe to be genuine. Disclosures could be about the safety of patients or people who use services, the failure of a provider to comply with the law or the national standards of quality and safety, financial malpractice or risks to staff or other people.

