

NAOS safeguarding and child protection policy and procedures September 2023

This policies and procedures document is structured as follows

- 1. Safeguarding children and young people: Policy statement
- 2. Safeguarding Vulnerable Adults: Policy Statement
- 3. Safeguarding children and young people: Procedures, roles and responsibilities

***If you have an immediate safeguarding concern, go to page 6 to look for procedures to follow. If in doubt, use the contacts below to seek help**

Designated safeguarding lead

Kimberley Fuller, 07739129584, kimberleyfuller@naos.org.uk and safeguarding@naos.org.uk

Deputy safeguarding lead(s)

Donna Taylor, 07908 122461 donnataylor@naos.org.uk

Jo Walker, 07808 543022 jowalker@naos.org.uk

We are committed to reviewing our procedures and policy annually.

This policy was last reviewed in: October 2023 and will be reviewed and September 2024 after the next KCSIE review and updates, unless there is cause to do so earlier.

Signed,

Jo Walker, Operations Director.

Donna Taylor, Clinical Director

NAOS child protection and safeguarding policy statement

The purpose of this policy statement is:

- to protect children and young people who receive services from NAOS from harm. This includes the children of adults who use our services;
- to provide practitioners, as well as children and young people and their families, with the overarching principles that guide our approach to safeguarding and child protection.

This policy applies to all practitioners working on behalf of

NAOS. We aim to:

- regard the welfare of the child (and all our clients) as paramount within our work.
- work sensitively with children and young people to empower them, to listen to their voices, to
 value and respect them, to continually develop a 'child focused approach' in our safeguarding,
 and to sustain this over a long period of time in our work with them.
- safeguard all children and young people, whilst recognising the exceptional vulnerability of some of those we work alongside.
- ensure children and young people receive the right help at the right time to address risks and prevent issues escalating, aiming to intervene at the earliest possible stage.
- play an active role in fostering cultures of safety within our relationships with children, young
 people and families to help prevent harm, playing particular attention to the needs of those who
 are most vulnerable and who may have multiple and often intersecting disadvantages (i.e.
 children from BAME communities, children with disability, LGBTQ+ young people, children and
 young people SEN etc).
- identify children and young people who are at risk of and/or likely to suffer significant harm and take appropriate action with the aim of making sure they are kept safe both at NAOS premises, at home and elsewhere.
- take any disclosure of abuse extremely seriously as children and young people rarely lie about abuse.
- ensure a safe environment is provided for our clients at all times.
- ensure all practitioners are made aware of issues relating to the welfare of children and young people and know their responsibilities to report concerns appropriately.
- maintain best practice in regard to safeguarding and comply with our legal responsibilities.
- ensure that safeguarding is a key responsibility of every adult involved in our organisation and that everyone who comes into contact with children and young people is confident and willing to promote safer practice.
- prevent people with a history of relevant and significant offending from having contact with children and young people and continually develop an ongoing culture of vigilance within our practitioners that recognises 'it could happen here.
- ensure all suspicions and allegations of abuse by practitioners will be taken seriously and responded to swiftly and appropriately.
- proactively ensure that our processes work holistically to expose the full extent of any abuse, keeping in mind that it's possible that practitioners may only have one small piece of the jigsaw; and to work collaboratively and cooperatively in partnership with other organisations, children

- and young people and their parents, sharing information appropriately and, where necessary, professionally challenge to ensure best practice.
- Supporting contextual safeguarding practice, recognising that the setting's site can be a location where harm can occur.

Webelieve that:

- children and young people should never experience abuse of any kind
- we have a responsibility to promote the welfare of all children and young people, to keep them safe and to practise in a way that protects them

We recognise that:

- safeguarding's primary consideration of serving the best interests of the child, and the welfare of children and young people is paramount in all the work we do and in all the decisions we take
- working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare
- all children, regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation have an equal right to protection from all types of harm or abuse
- some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues
- extra safeguards may be needed to keep children who are additionally vulnerable safe from abuse (i.e. children from BAME communities, or children and young people with special education needs).

We will seek to keep children and young people safe by:

- valuing, listening to and respecting them
- appointing a nominated safeguarding lead and ensuring there is always a Director available to act as DSL when the lead if not available
- adopting child protection and safeguarding best practice through our policies, procedures and code of conduct for practitioners
- providing effective management for practitioners through supervision, support, training and quality assurance measures so that all practitioners know about and follow our policies, procedures and behaviour codes confidently and competently
- recruiting practitioners safely, ensuring all necessary checks are made
- recording and storing and using information professionally and securely, in line with data protection legislation and guidance [more information about this is available from the Information Commissioner's Office: ico.org.uk/for- organisations]
- sharing information about safeguarding and good practice with children and their families
- making sure that children, young people and their families know where to go for help if they
 have a concern
- using our safeguarding and child protection procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, parents, families and carers appropriately
- using our procedures to manage any allegations against practitioners appropriately
- ensuring that we have effective complaints and whistleblowing measures in place
- ensuring that we provide a safe physical environment for our children, young people, staff and volunteers
- building a safeguarding culture where practitioners, children, young people and their families, treat each other with respect and are comfortable about sharing concerns.

Our policy, procedures and practice are framed by and in accordance with:

• Keeping Children Safe in Education (KCSIE): September 2022

- The Keeping Bristol Safe Partnership (KBSP) model policy
- Legislation, policy and guidance that seeks to protect children in England. A summary of current legislation and statutory guarantees can be found here: <u>Working Together to Safeguard</u> Children: statutory framework
- The South West Safeguarding and Child Protection Group Procedures. (www.swcpp.org.uk).
- Practitioners are also advised to refer to the BACP Guidelines https://www.bacp.co.uk/
- Specific topical safeguarding issues a collection of up-to-date guidance can be found on the Safeguarding in Education Team's guidance page. Key Guidance: Safeguarding in Education

Equalities and Rights Statement

With regards to safeguarding we will consider our duties under the Equality Act 2010 this includes:

- 1. Eliminate discrimination, harassment, victimisation, and other conduct that is prohibited by the Equality Act 2010.
- 2. Advance equality of opportunity between people who share a protected characteristic and people who do not share it.
- 3. Foster good relations across all protected characteristics between people who share a protected characteristic and people who do not share it.

We adhere to both the <u>Bristol Equality Charter</u> and <u>Bristol Childrens Charter</u> with a view to contribute towards the <u>One City Plan</u>.

Practitioners are aware of the additional barriers to recognising abuse and neglect in children with Special Educational Needs and Disabilities (SEND).

NAOS also adheres to the principals of and promotes anti-oppressive practice in line of the <u>United Nations</u> Convention of the Rights of the Child and the Human Rights Act 1998.

Safer touch policy

Research shows clearly that healthy pro-social brain development requires access to safe touch as one of the means of calming, soothing and containing distress for a frightened, sad or angry child.

In recognition of this, under agreed and supervised conditions, practitioners will consider using safe touch as one of the means available to them for:

- Calming a distressed or dysregulated child
- Contain an angry child
- Affirm or encourage an anxious child or a child with low self-esteem.

Our policy rests on the belief that each staff practitioner must appreciate the difference between appropriate and inappropriate touch and will need to demonstrate a clear understanding of the difference, acknowledging both the damaging and unnecessary uses of touch in a therapeutic or educational context.

At no point and under no circumstances should staff practitioners use touch to satisfy their own need for physical contact or reassurance. Practitioners must always be particularly sensitive to children who are demonstrating that they are not comfortable with touch. Should any such touch be used it would be deemed as a serious breach and will warrant the highest level of disciplinary action.

This should be read in conjunction with the full NAOS Safer Touch policy.pdf

NAOS safeguarding vulnerable adults policy statement

NAOS is committed to safeguarding and promoting the welfare of all adults at risk, which includes many of

the vulnerable adults we work with.

Safeguarding can also be undertaken to protect adults with care and support needs to keep them safe. We are committed to practice in a way that protects them and recognises that all adults, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse. This Policy Statement is for individuals over the age of 18, but needs to be read in conjunction with the NAOS Child Protection and Safeguarding Policy Statement.

This policy aims to:

- To prevent harm and reduce the risk of abuse and neglect to adults with care and support needs
- To safeguard individuals who receive our services in a way that supports them making choices and having control in how they choose to live their lives
- To provide practitioners with the overarching principles that guide our approach to adults at risk

We aim to:

- regard the welfare of all our clients as paramount within our work.
- work sensitively with vulnerable adults to empower them, to listen to their voices, to value and respect them, to continually develop a 'client focused approach' in our safeguarding.
- recognise the exceptional vulnerability of some of those we work alongside.
- ensure vulnerable adults receive the right help at the right time to address risks and prevent issues escalating, aiming to intervene at the earliest possible stage.
- play an active role in fostering cultures of safety within our relationships with vulnerable clients to help prevent harm, playing particular attention to the needs of those who are most vulnerable and who may have multiple and often intersecting disadvantages (i.e. LGBTQ+ young people, adults with SEN or from BAME communities etc).
- identify vulnerable adult clients who are at risk of and/or likely to suffer significant harm and take
 appropriate action with the aim of making sure they are kept safe both at NAOS premises, at
 home and elsewhere.
- take any disclosure of abuse extremely seriously.
- ensure a safe environment is provided for our clients at all times.
- ensure all practitioners are made aware of issues relating to vulnerable adults and know their responsibilities to report concerns appropriately.
- maintain best practice in regard to safeguarding and comply with our legal responsibilities.
- ensure that safeguarding is a key responsibility of every practitioner involved in our organisation.
- ensure all suspicions and allegations of abuse by practitioners will be taken seriously and responded to swiftly and appropriately.
- proactively ensure that our processes work holistically to expose the full extent of any abuse, keeping in mind that it's possible that practitioners may only have one small piece of the jigsaw; and to work collaboratively and cooperatively in partnership with other organisations, sharing information appropriately and, where necessary, professionally challenge to ensure best practice.
- supporting contextual safeguarding practice recognising that the setting's site can be a location where harm can occur.

Our definition of a vulnerable adult

The safeguarding of adults supports the human rights of people who are unable to claim these for themselves. This includes having due regard to the need to eliminate discriminatory abuse, harassment and victimisation. Adult safeguarding prevents the abuse of power. Adults at risk are dependent on others to meet their everyday needs.

According to the Care Act (2014), an adult at risk is an individual over 18 who:

- Has care and support needs, whether or not the Local Authority is meeting any of those needs;
- Is experiencing, or at risk of, abuse or neglect; and as a result of those care and support needs is unable to protect themselves from abuse or neglect or the risk of it.

More information on adults are risk is available here: www.england.nhs.uk/wp-

content/uploads/2017/02/adult-pocket-guide.pdf

Who this policy applies to, and how we enact it

This policy applies to all practitioners of NAOS. People who use NAOS's services should be treated with dignity and respect, receive high quality, compassionate care and be safe from harm and abuse.

This policy should be read alongside NOAS' safeguarding procedures and practice document, which, while primarily designed to ensure we're protecting children and young people, also applies to our policy to protect vulnerable adults.

If in doubt and you are worried about a vulnerable adult client, talk to case managers, the DSL or a Director to also ensure that we protect vulnerable adults from harm or abuse.

Equalities and Rights Statement

With regards to safeguarding we will consider our duties under the Equality Act 2010 this includes:

- 1. Eliminate discrimination, harassment, victimisation, and other conduct that is prohibited by the Equality Act 2010.
- 2. Advance equality of opportunity between people who share a protected characteristic and people who do not share it.
- 3. Foster good relations across all protected characteristics between people who share a protected characteristic and people who do not share it.

We adhere to both the <u>Bristol Equality Charter</u> with a view to contribute towards the <u>One City Plan</u>.

Practitioners are aware of the additional barriers to recognising abuse and neglect in with vulnerable adults with Special Educational Needs and Disabilities (SEND).

NAOS also adheres to the principals of and promotes anti-oppressive practice in line with the <u>Human Rights Act 1998</u>.

NAOS safeguarding procedures and practice

Roles and responsibilities at NAOS

All practitioners are expected to adhere to the following principles:

- We all take an 'it can happen here' approach where safeguarding is concerned.
- Safeguarding and promoting the welfare of children, young people and vulnerable adults is everyone's
 responsibility. Everyone who comes into contact with children, vulnerable adults, their families, or carers,
 has a role to play. In order to fulfil this responsibility effectively, all professionals should make sure their
 approach is child centred (i.e. that they should always consider what is in the best interests of the child)
 and their knowledge on child protection and safeguarding it up to date.
- Everyone who comes into contact with children has a role to play in identifying concerns, sharing information, and taking prompt action.
- Training: All practitioners working with clients must evidence they have current and up to date safeguarding training at Level 3. New practitioners will receive induction training into NAOS's policies and procedures too.
- Victims of harm should never be given the impression that they are creating a problem by reporting abuse, sexual violence, or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

The role of NAOS is:

- Adhere to Safer Recruitment policies and practice in hiring new practitioners. This includes scrutinising
 applicants, verifying identity and academic or vocational qualifications, obtaining references, and checking
 previous employment history. It also includes undertaking appropriate checks through the Disclosure and
 Barring Service (DBS), the barred list checks and prohibition checks (and overseas checks if appropriate),
 dependent on the role and duties performed, including regulated and non-regulated activity
- Provide clear and detailed procedures on decision making, accountability and recording safeguarding situations and child protection concerns.
- Provide thorough and effective training to staff on child protection policies and procedures.
- Appoint a Designated Safeguarding Lead to ensure policies and procedures are being followed and developed in NAOS.
- Provide regular and consistent case management to support practitioners in assessing and processing safeguarding risks on an ongoing basis and ensure that a Director and/or a Designated Safeguarding Lead is available across the work week to handle urgent safeguarding concerns.
- Recruiting staff safely, by following Safer Recruitment policies, ensuring practitioners have enhanced DBS checks and two references before they start work in the organisation.
- Sharing concerns and relevant information as necessary with agencies who need to know and involving
 parents/carers and children appropriately. Ensure that the organisation is able to learn from specific child
 protection situations and review policy and procedures as a result if necessary.
- Maintain a current knowledge of child safeguarding procedures nationally and within the South West.

Deputy Safeguarding Lead and Duty Safeguarding Team

The designated safeguarding lead in NAOS is Kimberly Fuller. The directorship holds ultimate responsibility for safeguarding thorough the DSL.

The DSL is the person appointed to take lead responsibility for child protection issues in NOAS. She is supported by the Directors in this role, with the lead Director for Safeguarding being Donna Taylor. The DSL role manages the overall safeguarding concerns/referrals within NAOS, and supports day-to-day safeguarding in NAOS managing the safeguarding email inbox, and safeguarding notes as they go up on Power Diary. The DSL is specifically responsible for:

- Providing the first point of safeguarding consultation, referral, and leadership to all practitioners.
- Knowing which outside agencies to contact in the event of a concern.
- Providing information and advice on safeguarding within NAOS.
 - Ensuring that appropriate information is available at the time of referral and that the referral is confirmed in writing under confidential cover.
 - Liaising with local social services and other agencies, as appropriate.
 - Keeping relevant people within NAOS informed about any action taken and any further action required; for example, disciplinary action against a practitioner of staff.
 - Ensuring that a proper record is kept of any referral and action taken, and that this is kept safely and in confidence.

In addition, NAOS always has one person available for emergency safeguarding concerns over the week during work hours:

Kimberly Fuller: Mondays and Fridays
 Donna Taylor: Tuesdays and Thursdays

Jo Walker: Wednesdays

Procedures for raising safeguarding concerns in NAOS

Managing a disclosure

NAOS may be working with a child client who discloses abuse, or child protection needs. In this situation

we have to assess:

- The seriousness of the likely harm
- How imminent the risk is to the child or others?
- The effectiveness and impact of disclosure.
- Whether we are referring with client consent or making a referral without consent in the public interest.

In cases where this disclosure is deemed to require further action a referral to others may be necessary in the interests of the child client, or for the protection of other children.

NAOS operates a confidential service but if it is assessed that a child is being harmed or is likely to be harmed in any way, then confidentiality MUST be breached within procedural guidelines. Where possible, the practitioner will seek the consent of the client regarding the need to break confidentiality before the referral is made. If it is their professional assessment that discussing this with the client would place the child at greater risk, then this should be discussed with the DSL. Wherever possible, disclosures should be made with the consent and co-operation of the child concerned. However, there are some child protection situations where seeking prior consent from carers or others might put the child or others at greater risk of significant harm or risk jeopardizing a police investigation or social care enquiry (for example, where parents or carers are perpetrators of alleged abuse). In these circumstances the therapist/mentor practitioner should first seek advice from DSL and/or directors on how to proceed.

If confidentiality cannot be maintained, only relevant and necessary information will be shared with the appropriate people. When sharing information staff should use their judgement when making decisions on what information to share and when and should follow the established procedure. The most important consideration is whether sharing information is likely to safeguard and protect a child. Abiding by the following principles will help this process:

- Necessary and proportionate. When taking decisions about what information to share, you
 should consider how much information you need to release. The Data Protection Act 1998 requires
 you to consider the impact of disclosing information on the information subject and any third
 parties. Any information shared must be proportionate to the need and level of risk.
- **Relevant.** Only information that is relevant to the purposes should be shared with those who need it. This allows others to do their job effectively and make sound decisions.
- Adequate. Information should be adequate for its purpose. Information should be of the right quality to ensure that it can be understood and relied upon.
- Accurate and factual. Information should be accurate and up to date and should clearly
 distinguish between fact and opinion—using factual information only, providing a clear list of events
 and using the child/young person's own words where possible. Be clear when stating your own
 opinion e.g. "in my opinion John looked..." All notes should be dated and signed by the person
 completing them and stored safely in the client's case file.
- **Timely.** Information should be shared in a timely fashion to reduce the risk of harm. Timeliness is key in emergency situations and it may not be appropriate to seek consent for information sharing if it could cause delays and therefore harm to a child. Practitioners should ensure that sufficient information is shared, as well as consider the urgency with which to share it.

In the event of a disclosure

- Make sure the individual is safe.
- Assess whether emergency services are required and if needed call them.
- Offer support and reassurance.
- Ascertain and establish the basic facts.
- If in school (or other institution), contact the in-house Safeguarding Lead/DSL. If on outreach, contact your Case Manager- If unable to get through Text a highlighted message stating you have a safeguarding incident and need to speak to them ASAP or send this to the DSL etc.
- Make careful notes and obtain agreement on them.
- Ensure notation of dates, times and persons present are correct and agreed.
- If relevant take all necessary precautions to preserve any forensic evidence.
- Explain areas of confidentiality and the procedure to the individual making the allegation.
- Remember the need for ongoing support.
- Ensure the child/ YP is supported by a trusted adult before you leave
- If referral has been made to safeguarding lead in school /another organisation contact your case manager as soon as possible and within 24 hours following the disclosure.
- All information (facts) should be written up onto power diary (with case manager and safeguarding lead notified)
- Please ensure your own safety and wellbeing.
- If necessary, cancel next appointment or ask case manager to do this.

Raising safeguarding concerns within NAOS – how we support each other

No practitioner should have to make a decision on a disclosure on their own. If a client makes a disclosure, where appropriate, always discuss with the client to explain you will need to discuss this with your line/case manager, in the first instance, and then, possibly, with the relevant services e.g. social services, education, and police.

Try to talk over your concerns with your case manager or project manager, to decide on your collective sense of the best course of action (you will be given your case manager and project leads numbers directly, please ensure you have these and are aware of their availability for safeguarding concerns).

Once a decision has been made on the course of action:

- 1. Fill in Safeguarding form on Power Diary (do not finalise at this point).
- 2. Alert the Safeguarding Lead, Kimberley Fuller (contacts below) that the form has been filled in, and email safeguarding@naos.org.uk, and copy in your case manager/project lead, highlighting this with an alert mark and putting "safeguarding" in the title
- 3. The safeguarding lead will then call the practitioner back before updating and finalising the form on Power Diary, following the discussion with practitioner and agreeing any actions.

In circumstances where urgent action/ or a decision is required, contact the safeguarding lead on duty (below). Please highlight the need for a call back by marking the email, text, safeguarding - High priority. If, in exceptional circumstances, an urgent safeguarding action required, and the designated safeguarding lead (or a deputy) is not available, or this is outside of normal hours (9am-5pm), this should not delay appropriate action being taken, go to www.proceduresonline.com/swcpp/. This has a direct link to the local safeguarding board and procedures for the area in which you are working, including guidance on reporting. Please inform your case manager and the DSL immediately if you've had to report a child protection concern directly.

Safeguarding duty team contacts

 NAOS Designated Safeguarding Lead can be contacted as follows: Kimberley Fuller safeguarding@naos.org.uk

Deputy safeguarding lead (to be contacted on above days/hours for urgent safeguarding concerns and will check the safeguarding inbox while on duty) is

- Donna Taylor, 07908 122461 donnataylor@naos.org.uk
- Jo Walker, 07808 543022 jowalker@naos.org.uk

Record keeping

All concerns, discussions and decisions made, and the reasons for those decisions, should be recorded in writing. This will also help if/when responding to any complaints about the way a case has been handled. Information should be kept confidential and stored securely on PowerDiary. It is good practice to keep concerns and referrals in a separate client file for each child.

Records should include:

- a clear and comprehensive summary of the concern
- · details of how the concern was followed up and resolved, and
- a note of any action taken, decisions reached and the outcome.

If in doubt about recording requirements, practitioners should discuss with the designated safeguarding lead (or a deputy).

Contact details for "First Referral"

Once it is agreed that we will make a referral onwards as a result of a disclose to other services the practitioner will make this directly, with support from the DSL. The South West shared core procedures are available at www.swcpp.org.uk and offer a clear guide and step by step approach to what to do if you are concerned about a child or young person under 18.

If a child is at immediate risk or in danger ring the Police on 999. Police Child Abuse Investigation Team (CAIT): 0117 945 4320 13

Multi-agency working

NAOS is a relevant agency in the Keeping Bristol Safe Partnership and will work together with appropriate agencies to safeguard and promote the welfare of children including identifying and responding to their needs. This is in compliance with statutory guidance Working Together to Safeguard Children 2018.

In some cases the practitioner may be working in an education setting. in which case, they should follow the schools procedures and report to the DSL at Referrals in these cases should be made by the DSL (or Deputy DSLs) but also logged onto the system in NAOS as outlined above. In other cases it may be deemed necessary to also contact the social workers at Children's Social Care in the local authority in which that child resides. The list of safeguarding contact and other key agencies are listed in Annex C.

Where the child already has a social worker, the request for service should go immediately to the social worker involved or, in their absence, to their team manager. NAOS will co-operate with any statutory safeguarding assessments conducted by children's social care: this includes ensuring representation at appropriate interagency meetings such as integrated support plan meetings initial and review child protection conferences and core group meetings.

Allegations made against a practitioner of NAOS

If the information you have regarding risk to a child relates to abuse by a practitioner of NAOS, you should immediately inform the Directors Safeguarding Lead (currently Donna Taylor). If an allegation of abuse is made against a practitioner of staff, the referral procedures above will be followed.

The Directors will immediately inform the individual concerned that they are suspended from duties pending investigation. This is not an assumption of guilt but serves to allow the appropriate investigation to take place 10

and protects the practitioner of staff or volunteer support worker from further allegations. The Director will arrange for an investigation to be completed as swiftly as possible. This is to be in line with the Bristol Safeguarding Children Board (BSCB) procedure 'Managing allegations against people who work with children'. Can refer to: https://bristolsafeguarding.org/media/1283/allegations-management-guidance-document.pdf. The appropriate Local Authority Designated Officer (LADO) also needs to be informed that an allegation has been made and an investigation is ongoing.

If the outcome of any investigation shows there are safeguarding concerns, NAOS, as a freelancer, they will then be offboarded immediately, with due diligence and NOAS will also take responsibility for notifying practitioners, the practitioners professional body, supervisors etc.

If the allegation concerns one of the Directors, you should speak directly to the Local Authority Designated Officer (LADO).

Low level concerns

This should be read in conjunction with Keeping children Safe in Education (2022, Part 4). A low-level concern is not insignificant. If a practitioner has a safeguarding concern or an allegation about another practitioner that does not meet the harm threshold, then this should be shared in accordance with the settings low-level concerns policy

- Reports should be made in accordance with NAOS own processes
- NAOS creates an environment where staff are encouraged and feel confident to self-refer where they have found themselves in a situation.
- The DSL and case manager will address unprofessional behaviour and support the individual to correct it at an early stage providing a responsive, sensitive, and proportionate handling of such concerns when they are raised.
- Review and correct any deficits in the setting's safeguarding system.

Whistleblowing

Where a practitioner feels unable to raise an issue with NAOS, or feels that their genuine concerns are not being addressed, other whistleblowing channels are open to them:

- general guidance on whistleblowing can be found via: Advice on Whistleblowing
- the NSPCC's what you can do to report abuse dedicated helpline is available as an alternative route
 for staff who do not feel able to raise concerns regarding child protection failures internally, or have
 concerns about the way a concern is being handled by their school or college. Staff can call 0800 028
 0285 line is available from 8:00 AM to 8:00 PM, Monday to Friday and email: help@nspcc.org.uk

We encourage all practitioners who have concerns they do not believe are being addressed to follow whistleblowing routes: always practice with in best interests of the child.

Please read the accompanying NAOS Whistle blowing policies and procedures.pdf for more information on our Whistleblowing Policy and processes.

LADO processes

All organisations have arrangements to safeguard (keep safe) and promote the welfare of children. This includes having policies for dealing with allegations against people who work with children.

An allegation may relate to a person who works with children who has:

- behaved in a way that has harmed a child, or may have harmed a child or possibly committed a criminal
 offence against or related to a child
- behaved in a way that indicates they may pose a risk of harm to children
- behaved or may have behaved in a way that indicates they may not be suitable to work with children

All local authorities have a Local Authority Designated Officer (LADO) who is involved in the management and oversight of individual cases.

They will:

- provide advice and guidance on whether the LADO threshold is met. This is to manage individual allegations of harm and abuse made against staff or volunteers who work with children.
- oversee and coordinate multi agency involvement. This is to ensure relevant information sharing.
 Providing a timely, fair and reasonable outcome for the child and person against whom an allegation is made.
- identify practical steps that can be taken to improve organisational safeguarding. This is to minimise the risk of further incidences of abuse.
- provide reports to the Keeping Bristol Safe Partnership (KBSP) on the effectiveness of local safeguarding arrangements.

The LADO should be informed within one working day of all allegations that come to an employer's attention, including those made directly to the police.

Each Local Authority has different Lado procedures as NAOS works in Bristol, South Gloucestershire and North Somerset we have included details for each these are

In Annex Two is the LADO procedures and details for making a referral in Bristol as way of an example. We have also included the flowchart of decision making for LADO referrals in the same Annex.

For each local authority policies and procedures please go to

- 1. Bristol https://bristolsafeguarding.org/children/lado-concerns-about-professionals/
- 2. North Somerset: https://sscb.safeguardingsomerset.org.uk/working-with-children/allegations-management/
- 3. South Gloucestershire: https://edocs.southglos.gov.uk/safeguardingchildrenboard16/pages/local-authority-designated-officer-lado/

Annex One. Indicators of Abuse and Neglect in Children and Young People

Abuse: 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. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse. 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: 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: 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 or preventing the child from participating in normal social interaction. It 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: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving 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. The sexual abuse of children by other children is a specific safeguarding issue in education and all staff should be aware of it and of their school or college's policy and procedures for dealing with it.

Neglect: 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. 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 care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

In Annex Two. LADO procedures and details for making a referral in Bristol

Bristol LADO process



ALLEGATIONS MANAGEMENT PROCESS

Concern about a practitioner of staff or a volunteer working with children

If a professional receives an allegation or has a concern about the behaviour of a practitioner of staff working or volunteering with children and that concern may amount to:

- a) behaved or may have behaved in a way that has harmed a child, or may have harmed a child
- b) committed or may have committed a criminal offence against or related to a child
- c) behaved or may have behaved towards a child or children in a way that indicates they may pose a risk of harm to children
- d) behaved or may have behaved in a way that indicates they may not be suitable to work with children

Report the concerns

Report the concern to the Designated Safeguarding Lead or most senior person not implicated in the allegation.

Completion of written record

Complete a written record of the nature and circumstances surrounding the concern, including any previous concerns. Include where the concern came from and give brief details only.

Seek advice before proceeding – Initial Discussion

Always contact the Local Authority Designated Officer (LADO) for advice prior to investigating the allegation. This is because it might meet the criminal threshold and so your investigation could interfere with a police or social care investigation

Local Authority Designated Officer (LADO) - Tel: 0117 903 7795 - Email: LADO@bristol.gov.uk

Complete the LADO referral form within one working day of becoming aware of the allegation

The LADO will offer advice on any immediate action required and will assist with employment and safeguarding issues

Allegations Management Process

If, after your Initial Discussion with the LADO, it is agreed that the allegation meets the criteria, a multi-agency meeting may be convened and you will be invited. This might result in a criminal investigation, a social care investigation and/or an investigation to inform whether disciplinary action is required.

If it is agreed that the allegation does not meet the criteria, the LADO will record the Initial Discussion. Any further action will be taken within your setting if necessary.

Further action

Further meetings might be required and these will be convened by the LADO, with your input at all times. Further information on the Allegations Management process can be found in the government document Working Together to Safeguard Children 2018 and the South West Child Protection Procedures

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Annex C. If you have concerns about a child/young person in Bristol (or related counties)

Totaled Countries			
If a child is at immediate risk call the POLICE	POLICE 999		
To make an URGENT referral, i.e. a child is likely to suffer or is suffering significant harm, call children's social care.	FIRST RESPONSE - 0117 9036444		
Out of Hours Referrals	EMERGENCY DUTY TEAM - 01454 615 165		
To make a NON-URGENT referral, contact FIRST RESPONSE using the online form	FIRST RESPONSE Online form https://www.bristol.gov.uk/social-care-health/make-a-referral-to-first-response		
To raise concerns and ask for advice about radicalisation (also contact First Response).	PREVENT DUTY - 01278 647466 PreventSW@avonandsomerset.police.uk		
To liaise with the specialist Safeguarding Police unit	Lighthouse Safeguarding Unit (Avon and Somerset police) 01278 649228 LighthouseBristol@avonandsomerset.police.uk		
For advice and guidance about whether to make a referral	Families in Focus (Targeted Support)		
South 0117 9037770	East Central 0117 3576460	North 0117 3521499	

If you have concerns about a professional working with a child...

To raise concerns and ask for guidance in relation to the conduct of someone who works with children

Local Authority Designated Officer - (LADO)

T: 0117 9037795

KBSP LADO notification form

For information, advice and guidance in relation to safeguarding policy and procedures.

Safeguarding in Education Team T: 0117 9222710 E: Safeguardingineducationteam@bristol.gov.uk South Advisor **East Central Advisor North Advisor** Elisabeth Clark Jess Curtis Sarah Wooding Elisabeth.clark@bristol.gov.uk jessica.curtis@bristol.gov.uk sarah.wooding@bristol.gov.uk 07785475173 07824503572 07788363338 **Operation Topaz (Avon and Somerset Police)** Child sexual exploitation & child criminal exploitation https://www.avonandsomerset.police.uk/forms/vul

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South	East Central	North Ross.Moody@bristol.gov.uk	
Ingrid.Hooper@bristol.gov.uk	Calum.Paton@bristol.gov.uk		
Report a Child Missing from Education	Bristol City Council – Education Welfare		
	https://www.bristol.gov.uk/schools-learning-early- years/children-missing-education-cme		
Children affected by Forced Marriage	Forced Marriage Unit		
	т: (0) 20 7008 0151		
	E: fmu@fco.gov.uk		
	Professional Online Safeguarding Helpline		
Online Safety Advice	т: 0344 381 4772		
	E: helpline@saferinternet.org.uk		
Reporting online abuse and	Child Exploitation and Online Protection command		
grooming	https://www.ceop.police.uk/ceop-	reporting/	
	NSPCC FGM Helpline		
FGM advice	T: 0800 028 3550		
Daniel's Alexandra	E: fgmhelp@nspcc.org.uk		
Domestic Abuse support (Bristol)	Directorate of local and national services https://www.bristol.gov.uk/crime-emergencies/abuse-violence		
(DIISTOI)		e-entergencies/abuse-violence	
Young Carers – advice and	Carers Support Centre T: 0117 958 9980		
support.	W:https://www.carerssupportcentre.org.uk/young-		
ουρρ υ τι.	carers/contact-young-carers/		
	NSPCC Whistleblowing hotline		
Whistleblowing professional	T: 0800 028 0285		
policy	E: help@nspcc.org.uk		
Child and Adolescent	Mental health (CAMHS)		
Primary Mental Health Specia	llists (advice) Child and Adolescent I	Mental Health	
South	East Central	North	
0117 3408121	0117 3408600	0117 3546800	
	Be Safe		
Advice around harmful sexualised behaviour.	0117 3408700 W: https://www.awp.nhs.uk/camhs/camhs-services/HSB-services/be-		
	safe	y curring Scr vices/ 1130-361 vices/ De-	
	Brook Traffic Light Tool		
	CPD: Brook Sexual Behaviours Traffic Light Tool (RSE) Course		

Other Local Authorities Contacts

Local Authority in which the child is resident	Contact details	Out of hours/ Weekend
South		Emergency Duty Team
Gloucestershire	5.00, 4.30 on Friday	01454 615165

	 accessandresponse@southglos.gov.uk
	Website: Access and Response Teams (ART) South Gloucestershire Council (southglos.gov.uk)
	Single Point of Access
North Somerset	• 01275 888 808 – Monday-Thursday 8.45am-5pm, Friday 8.45am-4.30pm
	Website: Children, young people and families North Somerset Council (n-somerset.gov.uk)
	Children's Social Work Services
Bath and North East Somerset (BANES)	 01225 396312 or 01225 396313 weekdays, 8.30am to 5pm, except Fridays when we're closed from 4.30pm
	• ChildCare_Duty@bathnes.gov.uk
	Website: Report a concern about a child Bath and North East Somerset Council (bathnes.gov.uk)