Policy	Safeguarding Adults Policy & Procedure SS52
Document owner	Safeguarding Manager
Date first implemented	November 2024
Date last reviewed	
Date of next review	September 2025
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Associated documents	Safeguarding is embedded throughout College policies; these are considered to be the most relevant: - Anti-Bullying Policy - Accommodation Allocation Policy - Attendance and Punctuality Policy - Behaviour Incident Reporting Policy - Complaints and Concerns Policy - Care Quality Commission (CQC) Notifications Policy - Notification - Charity Commission - Reporting Serious Incidents Policy - Data Protection (GDPR) Policy - Disclosure and Barring Service Policy - Duty of Candour Policy - Disciplinary Policy - Missing Student Policy - Online Safety Policy - Positive Touch Policy - Whistleblowing Policy (Public Interest Disclosure) - Prevent Policy - Professional Boundaries Policy - Safer Recruitment Policy - Sharing Information Policy - Learning Review Policy - Social, Emotional and Mental Health Policy - Safeguarding Children Policy
Reference documents	This policy and associated procedures have been developed in accordance with the following statutory frameworks and local safeguarding guidance: - The Care Act (2014) - The Mental Capacity Act (2005) - Safeguarding Vulnerable Groups Act (2006) - Working Together to Safeguard Children (2023) - Keeping Children Safe in Education (KCSiE; 2024) - Making Safeguarding Personal Guide (Local Government Association, 2014) - The Education Act (2002) - The Domestic Abuse Act (2021) - The Equality Act (2010)

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	- The Human Rights Act (1998) - The General Data Protection Regulation (GDPR) and Data Protection Act (2018) - The Female Genital Mutilation Act (2003) - The Serious Crime Act (2015) - Adult Safeguarding: Multi-Agency policy & procedures for the protection of adults with care & support needs in the West Midlands (2016) - West Midlands Safeguarding Adults Threshold Guidance; Telford & Wrekin Council (2013) - Marriage and Civil Partnership (Minimal Age) Act (2022) - Care and support statutory guidance (Department of Health and Social Care, 2024) - Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers (HM Government, 2018) - Making Safeguarding Personal: Supporting increased involvement of service users (Local Government Association, 2017). - Shropshire Safeguarding Community Partnership (SSCP) - Telford & Wrekin Safeguarding Partnership (TWSP).
Initial reviewing body	Safeguarding & Prevent Committee
Final approval body	Board of Governors
Published on website	Yes

Purpose	This policy has been introduced to follow the principles of the Care Act (2014) and associated statutory guidance. The purpose of this policy is to provide all staff and volunteers with a framework to prevent and minimise the risk of harm to adults who attend Derwen College. All staff and volunteers share this responsibility and must always have safeguarding at the heart of their practice.
Scope	This policy applies to anyone working on behalf of Derwen College, including the board of governors, paid staff, volunteers, sessional workers, agency staff and further education students. This policy should be implemented for students, day or residential, who are adults and therefore, over the age of 18. Where the term 'student' is used, it refers to day or residential students, clients (Derwen Care) and guests (Short Breaks). There is a separate **Safeguarding Children Policy and Procedure**, which must be read in conjunction to this policy.
Equality & Diversity	*"Derwen College is committed to promoting equality, good relations and to challenging discrimination. This is reflected in all College policies, procedures, processes and practices."*

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	Derwen College Equal Opportunities Policy Derwen College's ethos is to embrace diversity, to offer equality of opportunity, and to treat every individual fairly and with respect. Equality, diversity and inclusivity are embedded throughout the organisation. This policy should be applied in accordance with this ethos. If you would like a copy of this document in a different format, such as large print, please contact the Human Resources Department who will provide help with alternative formats.
Definition(s)	**Adult(s) with care and support needs** The adult safeguarding duties under the Care Act 2014 apply to an adult, aged 18 or over, who: • has needs for care and support (whether or not the local authority is meeting any of those needs) and; • 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 either the risk of, or the experience of abuse or neglect. **Wellbeing** The Care Act 2014 introduces a duty to promote wellbeing when carrying out any care and support functions in respect of a person. This is sometimes referred to as 'the wellbeing principle' because it is a guiding principle that puts wellbeing at the heart of care and support. **Abuse or Neglect** Abuse or neglect occur when someone causes another person or people harm or distress. Abuse and neglect are often the result of deliberate intent to cause harm, but sometimes abuse isn't intentional. It can happen because someone doesn't have the skills or support needed to care for someone. **Exploitation** The West Midlands (Metropolitan) Area Definition for Exploitation is: An individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child, young person or adult and exploits them: a) through violence or the threat of violence, and/or b) for financial or other advantage of the perpetrator or facilitator and/or c) in exchange for something the victim needs or wants. The victim may have been exploited even if the activity appears consensual and exploitation does not always involve physical contact; it can also occur through the use of technology.
Index of Policy	1. Important Contacts 2. Policy Statement 3. Roles and Responsibilities

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	4. A person-centred approach to Adult Safeguarding 5. Recognising and responding to abuse 6. Information Sharing 7. Training 8. Safer Recruitment Appendix 1: Key Safeguarding Contacts Appendix 2: Signs and indicators of abuse Appendix 3: Information Sharing Guidance Appendix 4: Reporting a Safeguarding Concern Flowchart Appendix 5: How to Report a Safeguarding Concern in MyConcern Appendix 6: A quick guide to Professional Curiosity

1. IMPORTANT CONTACTS

Refer to Appendix 1 for a list of important safeguarding contacts.

2. POLICY STATEMENT

Derwen College acknowledges it has a statutory and moral duty of care to safeguard and promote the welfare of children, young people and adults at risk of harm and is fully committed to ensuring safeguarding practice reflects statutory responsibilities and government guidance.

Safeguarding and protecting an adult's right to live in safety, free from abuse and neglect is paramount in all the work we do and in all the decisions we take.

We recognise that safeguarding is everybody's responsibility. Everyone who comes into contact with young people and adults at risk of harm has a role to play in identifying concerns, sharing information and taking prompt action and should adopt a 'see something, say something, do something' approach to keeping people safe.

Key Principles

In order to safeguard and promote the welfare of young people and adults at risk of harm, Derwen College will:

- Appoint a Designated Safeguarding Lead (DSL), Deputy Leads (DDSL's) and Lead Governors to take lead responsibility for adult safeguarding.
- Ensure all staff, governors and volunteers within our organisation understand their individual responsibilities to prevent, identify and report abuse.
- Act appropriately to any allegations, reports or suspicions of abuse, neglect or exploitation.
- Support students in developing their understanding of how to keep themselves safe.
- Develop a person-centred and outcome focused approach to safeguarding, by involving the person (adult at risk) with all aspects of decision making and ensuring their wishes and views are respected.
- Promote an organisational culture of openness so that staff, volunteers and students can raise concerns and know they will be listened to and that their concern will be taken seriously.
- Create strong multi-agency partnerships that provide timely and effective prevention of and responses to abuse or neglect.
- Ensure appropriate online filtering and monitoring systems and processes in place, to limit student's exposure to risks online.

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- Provide effective management for staff and volunteers through supervision, support and training.
- Keep up-to-date with local and national safeguarding developments, and share key information and knowledge.
- Record, store and use information professionally and securely, in line with data protection legislation and guidance.
- Follow the safer recruitment and vetting of staff, including volunteers and anyone who comes into direct contact with people we support.
- Ensure that we have effective complaints and whistleblowing measures in place.
- Create and maintain an anti-bullying environment, and deal with any bullying that does arise effectively in line with policy and procedures.

3. ROLES AND RESPONSIBILITIES

The **Designated Safeguarding Lead (DSL)** is the person appointed to take lead responsibility for ensuring that appropriate arrangements for keeping children, young people and adults at risk safe are in place at Derwen College.

The DSL at Derwen College is **Paul Bradshaw**; Head of Student Services (Gobowen Campus).

The DSL will:

- Take a lead role in developing, reviewing and implementing safeguarding policies and procedures at Derwen College.
- Ensure all safeguarding issues and concerns are responded to appropriately. Where appropriate, this should be in line with procedures agreed by local Safeguarding Adults Boards.
- Ensure that all staff and volunteers understand the safeguarding policies and procedures, and know what to do if they have concerns about a student's welfare.
- Ensure all staff receive adequate safeguarding training that is relevant to their role, and provide advice and guidance where necessary.
- Take a lead role in providing a safe environment for students to learn and work, including online.
- Ensure that online filtering and monitoring systems and processes are in place, and work closely with the IT team to ensure filtering and monitoring reports and online safeguarding concerns are responded to appropriately.
- Take a lead role in responding to early help and adult protection concerns and liaise with, or make referrals to statutory organisation such as multi-agency safeguarding hubs and the police.
- Store and retain safeguarding records according to legal requirements, including decisions and rationales.
- Work closely with Designated Safeguarding Governors to ensure they are kept up to date with safeguarding issues, providing termly update reports.
- Inform Designated Safeguarding Governors and the Senior Leadership Team of any significant safeguarding concerns.
- Be familiar with and work within adult protection procedures developed by Shropshire Safeguarding Community Partnership.
- Be alert to national and local issues relating to abuse and neglect, and acknowledge the importance of contextual safeguarding, which considers wider environmental factors in a person's life which may threaten their safety and/or welfare.
- Attend regular training in issues relevant to adult safeguarding and share knowledge appropriately.

The DSL must have received relevant safeguarding training that is specific to their role. This training should be refreshed every two years and they should keep up to date with any changes in safeguarding legislation and guidance.

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In the absence of the DSL, the above duties and responsibilities will be carried out by the Deputy DSL's (DDSL's).

The Deputy DSL's are:

- **Jessica Thompstone**; Safeguarding Manager (Gobowen Campus)
- **Samantha Brown**; Head of Satellite Provision
- **Ben Blackwell;** Deputy Manager (Telford Campus)

The **Board of Governors** is collectively responsible for ensuring that safeguarding arrangements are fully embedded within the College's ethos and reflected in the College's day-to-day practice.

The Designated Safeguarding Governors at Derwen College are **Liz Leigh** and **Helen Smith**.

The Designated Safeguarding Governors will:

- Lead on the governance of safeguarding at Derwen College.
- Ensure that the College has effective safeguarding policies and procedures in place, which are in line with regulatory and statutory guidance.
- Work alongside the DSL, to ensure the College has an effective range of safeguarding policies and procedures in place, which include child protection, online safety and anti-bullying.
- Undertake training and refresh their knowledge, in line with the latest government guidance.
- Ensure all staff and volunteers are trained in safeguarding, and that training is regularly updated.
- Meet the DSL and DDSL's regularly to discuss any significant safeguarding concerns, and ensure procedures are up-to-date and remain effective.
- Play an active role in supporting the DSL to review the College's safeguarding policies annually.
- Be an active member of the Safeguarding and Prevent Committee.

All staff and volunteers will:

- Share our commitment to safeguarding and promoting the welfare of adults.
- Adopt a person-centred approach and ensure their practice is in line with the best interests of the adult at all times.
- Be aware of their individual responsibilities to prevent, identify and report abuse when providing care and treatment.
- Understand their roles and associated responsibilities in relation to safeguarding policies and procedures.
- Be familiar with safeguarding policies and procedures and and know how to recognise, report and respond to abuse or neglect.
- Receive safeguarding training that is relevant, and at a suitable level for their role.
- Read, understand and comply with our safeguarding policies and procedures.

4. A PERSON-CENTRED APPROACH TO ADULT SAFEGUARDING

At Derwen College, we strive towards a person-centred approach to safeguarding. Staff will always act in the best interests of the student, and aim to keep them at the centre of any decisions which are made about their lives, working in partnership with them, their families and local agencies.

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We recognise the importance of creating an environment where students feel comfortable about speaking out if anything is worrying them, and have a designated Student Services and Safeguarding Team to offer support, advice and guidance to students. We will support dialogue with students who may not be able to convey their wishes and feelings as they may want to, for example, those who have communication difficulties, do not speak English, or for whom English is not their first language. This includes the use of communication aids such as augmentative and alternative communication (AAC) devices and talking mats.

We will ensure student's wishes and feelings are taken into account when determining what safeguarding action to take and what services to provide.

Wellbeing Principle

Derwen College acknowledges its duty to promote wellbeing when carrying out care and support functions in respect of an adult. This is often referred to as the 'wellbeing principle' because it is a guiding principle that puts wellbeing at the heart or care and support, and must be applied to all safeguarding practice and decisions (Care Act, 2014).

Wellbeing is a broad concept, and is described as relating to the following areas in particular:

- Personal dignity (including treating people with respect);
- Physical and mental health and emotional wellbeing;
- Protection from abuse and neglect;
- Control by the individual over day-to-day life (including care and support and the way it is provided);
- Participation in work, education, training or recreation;
- Social and economic wellbeing;
- Domestic, family and personal relationships;
- Suitability of living accommodation;
- The individual's contribution to society.

In line with the Care Act (2014) and for the purposes of this policy, Safeguarding Adults is defined as:

'Protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances' *(Care and support statutory guidance; Department of Health and Social Care, 2024).*

The safeguarding duties apply to an adult, aged 18 and above, who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- 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 either the risk of, or the experience of abuse or neglect.

Derwen College recognises that people with care and support needs are more likely to be abused or neglected due to their vulnerability. In some cases, an adult may not even be aware that they are being abused; this is especially likely if they have a learning disability or cognitive impairment.

Individual characteristics which may increase the risk of abuse, include:

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- Dependence on others, including physical dependency for personal care and activities of daily life
- Poor physical health
- Poor mental health
- Low income
- Not having the mental capacity to make certain decisions about safety including adults who have fluctuating mental capacity
- Low self-esteem; experience of abuse; childhood experience of abuse

Social/situational factors that increase the risk of abuse may include:

- Being cared for in a care or health setting where the right amount or the right kind of care is not provided
- Isolation and social exclusion
- Bereavement
- Stigma and discrimination
- Being the focus of anti-social behaviour
- Lack of access to information and support

Although abuse and neglect can happen anywhere, an adult is most likely to experience abuse in their own home.

The person causing the harm is often someone that the adult knows and feels safe with, such as a member of their family, a friend or neighbour. The person causing harm could be in a position of trust, such as a health or care professional, social worker or police offer. In some cases, it might be a stranger that harms the adult.

Six Principles to Adult Safeguarding

The following six principles, embedded within the Care Act (2014) underpin all adult safeguarding work at Derwen College:

Empowerment	People are supported and encouraged to make their own decisions and informed consent.	"I am asked what I want as the outcomes from the safeguarding process and this directly informs what happens".
Prevention	It is better to take action before harm occurs.	"I receive clear and simple information about what abuse is. I know how to recognise the signs, and I know what I can do to seek help".
Proportionality	The least intrusive response appropriate to the risk presented.	"I am sure that the professionals will work in my interest and they will only get involved as much as is necessary".
Protection	Support and representation for those in greatest need.	"I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want".
Partnership	Services offer local solutions through working closely with their communities. Communities have a	"I know that staff treat any personal and sensitive information in confidence, only

	part to play in preventing, detecting and reporting neglect and abuse.	sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me".
Accountability	Accountability and transparency in delivering safeguarding.	"I understand the role of everyone involved in my life and so do they".

Making Safeguarding Personal

Making Safeguarding Personal (MSP) is an initiative which aims to develop a person-centred and outcome focused approach to safeguarding work.

Derwen College values the importance of incorporating MSP as the recommended approach to safeguarding, alongside the six safeguarding principles.

To achieve this, we will:

- Engage students in meaningful conversations about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.
- Adopt a 'no decision about me, without me' approach to supporting adults to keep safe.

Risk Management

We recognise our duty to support students to keep themselves safe, yet manage risk in a way that maximises choice and control over their lives.

It is recognised that not every situation or activity will entail a risk that needs to be assessed, however, there are situations where what constitutes a minor risk for most people may present a significant risk to another person.

Where there are potential or current safeguarding risks to a student, staff must ensure that any intervention is proportionate to the level of harm caused, or the possibility of future harm and that the views and wishes of the student have been considered.

In the right circumstances, risk can be beneficial and positive risk-taking should be supported and encouraged whilst embedding the principles of the Mental Capacity Act (2005).

Risk Assessments are documented alongside the students' Person-Centred Plan (PCP) in Nourish.

Mental Capacity and Consent

The Mental Capacity Act (2005) is designed to protect and empower people who may lack the mental capacity to make their own decisions about their care and treatment. It also explains how consent to care and treatment should be obtained.

People must be assumed to have capacity to make their own decisions and be given all practicable help before they are deemed as not capable of making their own decisions. Where an adult is found to lack capacity to make a decision, then any action taken, or any decision made for, or on their behalf, must be made in their best interest.

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All staff must comply with the statutory principles of the Mental Capacity Act and should refer to the Mental Capacity Policy for further guidance.

Professional Curiosity

Professional Curiosity is the capacity to explore and understand what is happening for a person, rather than make assumptions or accepting things at face value.

This approach is important in helping to identify abuse and neglect which can be less obvious, and can ensure that the right information is gathered and shared to assess both needs and risks.

It requires staff to:

- Dig deeper into areas where there is little or no information;
- Be flexible and open-minded;
- Think the unthinkable; believe the unbelievable;
- Pay attention to how people look and behave as to what they say;
- Have empathy of the person to consider the situation from their lived experience;
- Never make assumptions.

Staff should refer to Appendix 6 for further guidance.

Contextual Safeguarding

We recognise the importance of adopting a contextual safeguarding approach at Derwen College. Contextual safeguarding recognises that a range of social contexts can impact a young person's life, and consequently their safety.

We are committed to creating and embedding a safe whole-college culture, and seek to identify and respond to harm and abuse posed to young people outside of their family (extra-familial-harm).

The 'Think Family' initiative supports the idea that co-ordinating the support and delivery of services from all organisations leads to better outcomes for people.

Early Help

Early help means providing support to a student or their family as soon as a problem emerges.

Staff should discuss early help requirements with the DSL or DDSL to provide help for students and their families and prevent concerns from escalating further.

Where there is a need for multi-agency working to support the student and their family, the DSL or DDSL will co-ordinate a referral with the appropriate local authority safeguarding adults board.

Online Safety

Derwen College is committed to providing a safe environment to learn and work, including when online. A filtering and monitoring system, Smoothwall, is in place to safeguard students from potentially harmful and inappropriate online material.

The DSL will take lead responsibility for safeguarding and online safety, which includes overseeing and acting upon:

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- Filtering and monitoring reports
- Online safeguarding concerns
- Checks to filtering and monitoring systems

The DSL will work closely with the IT team to ensure systems and processes remain effective and will review the College's provision on an annual basis.

All staff should refer to the College's Online Safety Policy for further guidance.

Preventing Radicalisation and Extremism

Radicalisation is the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Derwen College recognises the specific need to safeguard children, adults and families from violent extremism.

If staff are concerned that a student is susceptible to radicalisation or might be at risk of becoming involved in terrorism or supporting terrorism, this should be reported to the DSL's in the first instance.

Where appropriate, a prevent referral may be warranted and if an individual is found to represent a security threat, this will be referred to the police for further investigation.

Staff should refer to the Prevent Policy for further guidance.

5. RECOGNISING AND RESPONDING TO ABUSE

Safeguarding Issues

All staff will have an awareness of safeguarding issues that can put students at risk of harm, and should maintain an attitude of 'it could happen here'.

The College acknowledges that these issues include, but are not limited to:

Bullying refers to the repetitive, intentional hurting of one person or group by another person or group, and can include name calling, hutting, pushing, spreading rumours and threatening behaviour. Cyberbullying is a form of bullying which takes place online, via social networks, gaming and mobile phones.

Bullying of any kind is not tolerated at College. Staff should report any incidents or bullying or unacceptable behaviour in line with the Anti-Bullying (Student) Policy.

Peer-on-peer abuse (also known as child-on-child abuse) applies to abuse by one student of another student, and can include physical and sexual abuse, sexual harassment, violence, emotional harm, on and offline bullying and teenage relationship abuse.

Staff should recognise that peer-on-peer abuse is harmful to both the perpetrator and the victim, as children or young people who harm others may have significant disruption in their own lives such as witnessing or suffering abuse, or being involved in crime.

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional. Students may see, hear or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships.

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So-called 'honour'-based abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community including Female Genital Mutilation (FGM), Forced Marriage and practices such as Breast Ironing.

Female Genital Mutilation (FGM) comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of abuse (The Female Genital Mutilation Act, 2003).

Forced Marriage is where violence, threats or any other form of coercion is used to cause a person to enter into a marriage without the full and free consent of one or both parties.

As of February 2023, the legal age of marriage changed to 18 in England and Wales and it is illegal and a criminal offence to cause a child to marry, whether or not force is used (Marriage and Civil Partnership (Minimal Age) Act, 2022).

Other safeguarding issues which students may experience are:

- Drug taking and/or alcohol misuse
- Serious violence
- Homelessness
- Mental health
- County Lines
- Online abuse
- Consensual and non-consensual sharing of nude and semi-nude images and/or videos
- Fabricated or induced illness
- Sexual harassment
- Human trafficking and modern slavery
- Influences of extremism leading to radicalisation

The College recognises that in most cases, abuse, neglect and other safeguarding issues will overlap and cannot be covered by one single definition.

Additional information, including signs and indicators of abuse, is included in Appendix 2.

All staff and volunteers must follow the procedures set out below in the event of a safeguarding concern.

If a student is considered to be in immediate danger

If you believe a student is in immediate danger, contact the Police on 999.

As soon as possible, inform the DSL or DDSL.

If in expectational circumstances, the DSL or DDSL are not available, this should not delay appropriate action being taken. Staff should inform a member of the Senior Leadership Team and/or take advice from the local authority safeguarding adults board. In these circumstances, any action taken should be shared with the DSL or DDSL as soon as is practically possible.

Refer to Appendix 1 for key safeguarding contacts.

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5.2 If a student makes a disclosure

Disclosure is the process by which adults with care and support needs start to share their experience of abuse with others.

All disclosures should be treated seriously.

All staff must be aware that people may not feel ready or know how to tell someone that they are being abused, exploited or neglected. Adults with care and support needs may not recognise that their experience is harmful, and may feel embarrassed or humiliated.

People may disclose abuse in different ways, and this may be a slow process that takes place over a long period of time.

The types of disclosures are:

- **Direct disclosure**
  This is a specific statement made by an adult about the abuse that is happening to them.

- **Indirect disclosure**
  One or more statements, which imply that something is wrong.

- **Behavioural disclosure**
  Deliberate or inadvertent behaviour that indicates something is wrong.

- **Non-verbal disclosure**
  The person may write letters, draw pictures or communicate in other non-verbal ways to let someone know that something is wrong.

Staff should always demonstrate a **professional curiosity** and speak with the DSL if they have concerns about a student. Staff should:

- Remain open-minded and expect the unexpected
- Look, listen, ask and reflect on information received
- Use their professional judgement at all times

This is vital for the early identification of abuse, neglect or exploitation, and providing help to students who may be in need of protection.

What to do during a disclosure

In the event of a student disclosing abuse, neglect or exploitation, staff must follow the procedures set out below:

Listen

- Listen carefully to what the student is telling you.
- Remain calm and avoid expressing your own views.
- Communicate with the student in a way that is appropriate to their needs and level of understanding.
- Consider whether additional resources are required to further aid communication.
- Questions should only be asked to clarify what has been said.

Reassure

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- Reassure the student that they have done the right thing in telling someone.
- Inform the student that they are being taken seriously and that they will be supported and kept safe.
- Explain what will happen next, and that you will need to share what they have told you in order to keep them safe.

Never agree to keep secrets or promise confidentiality or agree to keep secrets; you have a duty to report all concerns.

React

- Let the student explain to you in their own words, but don't ask leading questions.
- Do not talk to the alleged perpetrator of the abuse, as this could put the student at further risk.
- Maintain an appropriate level of confidentiality by only involving those who need to be involved such as the DSL or DDSL.
- Do not investigate, interrogate or decide if a student is telling the truth. An allegation of abuse can lead to a criminal investigation so it is important not to act in a way that could jeopardise a police investigation, especially in cases of alleged sexual abuse.
- Preserve any potential evidence by placing items in a clear plastic bag.

Staff should not assume that somebody else is dealing with a student's concern. If you receive information that a student may be at risk of, or experiencing harm, you must report it immediately.

Record

Derwen College uses a secure digital safeguarding software called MyConcern which enables effective recording, reporting and management of all safeguarding concerns.

All staff should 'report a concern' via MyConcern as soon as possible (see Appendix 4 & 5 for further guidance).

It is important that you:

- Accurately record everything a student tells you and what you have observed.
- Record the date, time, place of the disclosure, their behaviour and the exact words used by the student. This should include any swear words or slang.
- Use a body map to record any visible bruises or injuries.
- Keep records factual; record observations and statements, not your interpretations or assumptions.
- Attach any supporting files to the concern such as written statements from the student, drawings or pictures.
- Do not delay in reporting the concern. A swift response to safeguarding concerns is of paramount importance to protect the student and prevent further harm to them, or to others.

If staff are unable to access MyConcern for any reason, or need to raise a concern for a guest at Short Breaks or client at Derwen Care, the Safeguarding Cause for Concern Form (located on SharePoint) should be completed and emailed to safeguarding@derwen.ac.uk.

It is recognised that staff may need support after receiving a disclosure from a student, and information about appropriate support will be offered by the College.

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If you suspect peer-on-peer abuse

If you are worried that a student is abusing another student, you must report it to the DSL or DDSL so that appropriate action can be taken.

All staff must challenge inappropriate behaviours between students that are abusive in nature. Staff should never downplay certain behaviours, for example, dismissing sexual harassment as 'just banter' or 'part of growing up' and must take peer-on-peer abuse as seriously as any other form of abuse.

If you have concerns about a student

If you are worried about a student, you must always raise your concerns, even if you are unsure.

You can speak directly with the Safeguarding Team, who will advise you of what steps to take.

Safeguarding is everybody's responsibility, and staff should adopt a 'see something, say something, do something' approach to keeping adults safe

If you have concerns about a staff member

If you have safeguarding concerns or allegations made about a staff member or volunteer, you should report it immediately to the DSL or DDSL or in their absence, a Registered Manager or other senior manager. You should not discuss the allegation with the staff member involved.

During out-of-hours, you should contact the on-call senior manager, if you believe immediate action is needed to prevent abuse.

If your concern relates to the DSL/DDSL's or your Line Manager, you should inform a member of the Senior Leadership Team.

If your concern relates to a member of the Senior Leadership Team, you should speak directly with the Designated Safeguarding Governor's or Chair of Governors.

In any situation where there may be a conflict of interest, a concern should be reported directly to the Local Authority Safeguarding Adults Board.

Whistleblowing

All staff and volunteers have a duty to raise concerns about poor or unsafe practice, wrongdoing and/or potential failures in the College's safeguarding procedures, and should know that such concerns will be taken seriously.

All staff should be aware of the Whistleblowing Policy (Public Interest Disclosure).

Escalating your concerns

If you feel unable to raise an issue or concern, or feel that a reported concern is not being addressed appropriately, there are other whistleblowing channels available to you:

Inform your Line Manager or any Senior Manager of your concern, as soon as possible.

Contact the **Local Authority Safeguarding Adults Board**.

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Managing Safeguarding Concerns (DSL's)

The DSL's are responsible for the management of safeguarding concerns in MyConcern.

A new concern will be triaged by a DSL, to ensure appropriate actions are taken. A DSL may add a team member as a way of sharing information or assigning tasks.

Once a concern has been effectively dealt with, the DSL will file the concern.

Responding to concerns or allegations about a staff member (DSL's)

When a concern involving a staff member arises, the DSL or DDSL will liaise with Human Resources (HR) to conduct basic enquiries to establish the facts, and to help determine whether there is any foundation to the allegation.

If further internal investigation is required, this will be in accordance with the College's Disciplinary Policy. In some instances, formal disciplinary processes will be instigated which could result in formal disciplinary action. It may be necessary to suspend an employee while the circumstances of any complaint or allegation are investigated, for example, if the individual poses a risk of harm to an adult with care and support needs.

The DSL or DDSL is responsible for ensuring that the student is not at ongoing risk of harm, and referring cases of suspected abuse to the Local Authority Safeguarding Adults Board. Where a criminal offence is suspected, a Police referral will also be made.

The DSL or DDSL may also need to report to other external agencies such as the Care Quality Commission (CQC) and the Disclosure Barring Service (DBS).

Making a Safeguarding Referral (DSL's)

If a student is experiencing, or is at risk of experiencing abuse or neglect, steps must be taken to make them safe in the first instance. A safeguarding referral to the Local Authority should then be made at the earliest convenience. This must be the Local Authority where the actual or alleged abuse took place.

The following '7 essential adult safeguarding questions' should be considered when raising a safeguarding referral:

1. Does the person have care and support needs, regardless of who is meeting those needs?
2. Is the person experiencing or at risk of abuse or neglect?
3. Are they unable to protect themselves from abuse or neglect as a result of their care and support needs?
4. Do they want to raise the safeguarding concern themselves? If not;
5. Do they want you to support them to raise the concern? If not;
6. Do they want you to raise the concern on their behalf?
7. Is there a public or vital interest that means you need to override their decision not to raise a concern?

Public interest includes:

- Risk to other adults or children
- Situations where a person in a position of trust is implicated
- Preventing a crime from being committed
- The potential source of risk has care and support needs, and may also be at risk

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Vital interests include where the risk is considered unreasonably high and there is serious harm to someone's life.

In some instances, a safeguarding referral will not be required and alternative action will be taken. This may be because:

- There is no current and ongoing level of danger to the adult (or others) as a result of abuse or neglect, and appropriate action has been taken to minimise the risk in the future.
- There is a current and ongoing level of danger to the adult (or others) but the adult has not consented to a concern being raised, and there is no public or vital interest to override their choice.

As such, the DSL's must accurately record all decision making and rationales for not making a safeguarding referral, and should utilise the 'Alternatives Actions Proforma' tool (Shropshire Safeguarding Community Partnership).

6. INFORMATION SHARING

Adults have a general right to independence, choice and self-determination including control over information about themselves.

Derwen College recognises that early sharing of information is key to providing an effective response where there are emerging concerns.

The Data Protection Act (2018) and the General Data Protection Regulation (GDPR) enables the lawful sharing of information.

- Information will only be shared on a 'need to know' basis when it is in the interests of the adult
- Confidentiality must not be confused with secrecy
- Informed consent should be obtained but, if this is not possible and other adults are at risk of abuse or neglect, it may be necessary to override the requirement
- It is inappropriate to give assurances of absolute confidentiality in cases where there are concerns about abuse, particularly in those situations when other adults may be at risk

Where an adult has refused to consent to information being disclosed for these purposes, it is important to consider whether there is an overriding public interest that would justify information sharing (e.g. because there is a risk that others are at risk of serious harm).

Decisions about who needs to know and what needs to be known should be taken on a case by case basis.

The government's information sharing advice for safeguarding practitioners includes 7 'golden rules' for sharing information, and will support staff in making decisions regarding sharing information for the purposes of keeping people safe (Appendix 3).

If staff are in any doubt about sharing information, they should speak with the DSL or DDSL for advice.

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7. TRAINING

All staff and volunteers

All staff and volunteers will undertake safeguarding adults training (and safeguarding children training) at induction to ensure they understand the safeguarding systems in place and their responsibilities, and can identify signs of possible abuse, neglect and exploitation.

Training takes place at all levels and is updated regularly to reflect current best practice.

The DSL and DDSL's

The DSL and DDSL's will undertake refresher safeguarding training at least every 2 years.

In addition, they will update their knowledge and skills at regular intervals and at least annually.

Level	Groups	Training
Level 1	All staff that are employed by Derwen College Volunteers Governors	To complete the following: - Safeguarding and Protection of Adults (Care Skills Academy) - Prevent Extremism and Radicalisation (Care Skills Academy)
Level 2	All staff that work directly with Students: - All Support Practitioners - All curriculum staff - Student Engagement Officers and Duty Managers - On-call rota - Admission teams - Personal tutors - Trips and club staff	To complete all Level 1 training and the following: - Face-to-face Safeguarding Adults Awareness Training (Shropshire Council, Joint Training)
Level 3	All staff with a specific safeguarding role: - Designated Safeguarding Leads - Student Services and Safeguarding Team - Governors - Registered Managers - PHSE Teachers - Lead Practitioners - Senior Support Practitioners	To complete all Level 1 & 2 Training and the following (depending upon role): - NSPCC DSL Course (core or advanced) – DSL's only - Safeguarding Adults for Provider Managers (Shropshire Council, Joint Training) - CEOP and online safety training (roles with online safety focus) - Safeguarding Adults enquiry training - Safeguarding for Governors and Board members - Bespoke Safeguarding training for Leads and Seniors (internal)

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8. SAFER RECRUITMENT

Derwen College recognises that safer recruitment is a vital part of creating a safe and positive environment and is committed to recruiting staff and volunteers who are suitable to work with adults with care and support needs.

The College maintains an accurate Single Central Record (SCR) in line with statutory guidance.

Our safer recruitment procedures can be found within our Safer Recruitment Policy.

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Appendix 1

Key Safeguarding Contact Details

Key Contacts	Name	Title	Contact Details
Designated Safeguarding Lead (DSL)	Paul Bradshaw	Head of Student Services; Registered Manager	paul.bradshaw@derwen.ac.uk 01691 661234 Ext. 251
Deputy DSL's (DDSL's)	Jessica Thompstone	Safeguarding Manager	jessica.thompstone@derwen.ac.uk 01691 661234 Ext. 337
	Samantha Brown	Head of Satellite Provision	samantha.brown@derwen.ac.uk 01691 661234 Ext. 222
	Ben Blackwell	Assistant Manager (Telford Campus)	ben.blackwell@derwen.ac.uk 01691 661234 Ext. 222
Chair of Governors	K Kimber	Lead Governor	k.kimber@derwen.ac.uk
Nominated Safeguarding Governors	Liz Leigh	Designated Safeguarding Governor	liz.leigh@derwen.ac.uk 01691 661234
	Helen Smith	Designated Safeguarding Governor	helen.smith@derwen.ac.uk 01691 661234
Local Authority (Shropshire Council)	First Point of Contact (FPOC)		0345 678 9044
	Adult Social Care & Safeguarding Concerns		
	Emergency Duty Team		0345 678 9040 01743 249544 (Out of Hours)
	Ellie Jones	Local Authority Designated Officer (LADO)	lado@shropshire.gov.uk 0345 678 9021
Local Authority (Telford and Wrekin)	Family Connect		01952 385385
	Emergency Duty Team		01952 676500 (Out of Hours)
West Mercia Police	Emergency		999
	Non-Emergency		101

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Appendix 2

Types and Indicators of Abuse, Neglect and Exploitation

The information within this Appendix is in accordance with the Care and Support statutory guidance.

Type of Abuse	Definition	Indicators of Abuse
Physical Abuse	This includes: • Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing • Rough handling • Scalding and burning • Physical punishments • Inappropriate or unlawful use of restraint • Making someone purposefully uncomfortable (e.g. opening a window and removing blankets) • Involuntary isolation or confinement • Misuse of medication (e.g. over-sedation) • Forcible feeding or withholding food • Unauthorised restraint, restricting movement (e.g. tying someone to a chair)	• No explanation for injuries or inconsistency with the account of what happened • Injuries are inconsistent with the person's lifestyle • Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps • Frequent injuries • Unexplained falls • Subdued or changed behaviour in the presence of a particular person • Signs of malnutrition • Failure to seek medical treatment or frequent changes of GP
Sexual Abuse	This includes: • Rape, attempted rape or sexual assault • Inappropriate touch anywhere • Non-consensual masturbation of either or both persons • Non-consensual sexual penetration or attempted penetration of the vagina, anus or mouth • Any sexual activity that the person lacks the capacity to consent to • Inappropriate touching, sexual teasing or innuendo or sexual harassment • Sexual photography or forced use of pornography or witnessing of sexual acts • Indecent exposure	• Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck • Torn, stained or bloody underclothing • Bleeding, pain or itching in the genital area • Unusual difficulty in walking or sitting • Foreign bodies in genital or rectal openings • Infections, unexplained genital discharge, or sexually transmitted diseases • Pregnancy in a woman who is unable to consent to sexual intercourse • The uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude • Incontinence not related to any medical diagnosis • Self-harming • Poor concentration, withdrawal, sleep disturbance

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		• Excessive fear/apprehension of, or withdrawal from, relationships • Fear of receiving help with personal care • Reluctance to be alone with a particular person
Emotional abuse	This includes: • Enforced social isolation – preventing someone accessing services, education and social opportunities and seeing friends • Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance • Preventing someone from meeting their religious and cultural needs • Preventing the expressions of choice and opinion • Failure to respect privacy • Preventing stimulation, meaningful occupation or activities • Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse • Addressing a person in a patronising of infantilising way • Threats of harm of abandonment • Cyber-bullying	• An air of silence when a particular person is present • Withdrawal or change in the psychological state of the person • Insomnia • Low self-esteem • Uncooperative and aggressive behaviour • A change of appetite, weight loss/gain • Signs of distress: tearfulness, anger • Apparent false claims, by someone involved with the person, to attract unnecessary treatment
Domestic abuse	Domestic violence or abuse can be characterised by any of the indicators of abuse relating to: • Psychological • Physical • Sexual • Financial • Emotional	• Low self-esteem • Feeling that the abuse of their fault when it is not • Physical evidence of violence such as bruising, cuts, broken bones • Verbal abuse and humiliation in front of others • Fear of outside intervention • Damage to home or property • Isolation – not seeing friends and family • Limited access to money Domestic violence and abuse includes any incident or pattern or incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who have been, intimate partners of family members regardless of gender or sexuality. It also includes so called 'honour'-based violence, female genital mutilation and forced marriage.

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		Coercive or controlling behaviour is a core part of domestic violence. Coercive behaviour can include: • Acts of assault, threats, humiliation and intimidation • Harming, punishing or frightening the person • Isolating the person from sources of support • Exploitation of resources or money • Preventing the person from escaping abuse • Regulating everyday behaviour
Financial Abuse	This includes: • Theft of money or possession • Fraud, scamming • Preventing a person from accessing their own money, benefits or assets • Employees taking a loan from a person using the service • Undue pressure, duress, threat or undue influence put on the person in connection with loans, wills, property, inheritance or financial transactions • Arranging less care than is needed to save money to maximise inheritance • Denying assistance to manager/monitor financial affairs • Denying assistance to access benefits • Misuse of personal allowance in a care home • Misuse of benefits or direct payments in a family home • Someone moving into a person's home and living rent free without agreement or under duress • False representation, using another person's bank account, cards or documents • Exploitation of a person's money or assets, e.g. unauthorised use of a car • Misuse of a power of attorney, deputy, appointeeship or other legal authority • Rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship	• Missing personal possessions • Unexplained lack of money or inability to maintain lifestyle • Unexplained withdrawal of funds from accounts • Power of attorney or lasting power of attorney (LPA) being obtained after the person has ceased to have mental capacity • Failure to register an LPA after the person has ceased to have mental capacity to manage their finances, so that it appears that they are continuing to do so • The person allocated to manage financial affairs is evasive or uncooperative • The family or others show unusual interest in the assets of the person • Signs of financial hardship in cases where the person's financial affairs are being managed by a court appointed deputy, attorney or LPA • Recent changes in deeds or title to property • Rent arrears and eviction notices • A lack of clear financial accounts held by a care home or service • Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person • Disparity between the person's living conditions and their financial resources, e.g. insufficient food in the house • Unnecessary property repairs

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Modern Slavery	This includes: • Human trafficking • Forced labour • Domestic servitude • Sexual exploitation, such as escort work, prostitution and pornography • Debt bondage – being forced to work to pay off debts that realistically they never will be able to	• Signs of physical or emotional abuse • Appearing to be malnourished, unkempt or withdrawn • Isolation from the community, seeming under the control or influence of others • Living in dirty, cramped or overcrowded accommodation and or living and working at the same address • Lack of personal effects or identification documents • Always wearing the same clothes • Avoidance of eye contact, appearing frightened or hesitant to talk to strangers • Fear of law enforcers
Discriminatory Abuse	This includes: • Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as 'protected characteristics' under the Equality Act 2010) • Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic • Denying access to communication aids, not allowing access to an interpreter, signer or lip-reader • Harassment or deliberate exclusion on the grounds of a protected characteristic • Denying basic rights to healthcare, education, employment and criminal justice relating to a protected characteristic • Substandard service provision relating to a protected characteristic	• The person appears withdrawn and isolated • Expressions of anger, frustration, fear or anxiety • The support on offer does not take account of the person's individual needs in terms of a protected characteristic
Organisational Abuse	This includes: • Discouraging visits or the involvement of relatives or friends • Run-down or overcrowded establishment • Authoritarian management or rigid regimes • Lack of leadership and supervision	• Lack of flexibility and choice for people using the service • Inadequate staffing levels • People being hungry or dehydrated • Poor standards of care • Lack of personal clothing and possessions and communal use of personal items • Lack of adequate procedures • Poor record-keeping and missing documents

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	• Insufficient staff or high turnover resulting in poor quality care • Abusive and disrespectful attitudes towards people using the service • Inappropriate use of restraints • Lack of respect for dignity and privacy • Failure to manager residents with abusive behaviour • Not providing adequate food and drink, or assistance with eating • Not offering choice or promoting independence • Misuse of medication • Failure to provide care with dentures, spectacles or hearing aids • Not taking account of individuals' cultural, religious or ethnic needs • Failure to respond to abuse appropriately • Interference with personal correspondence or communication • Failure to respond to complaints	• Absence of visitors • Few social, recreational and educational activities • Public discussion of personal matters • Unnecessary exposure during bathing or using the toilet • Absence of individual care plans • Lack of management overview and support
Neglect or Acts of Omission	This includes: • Failure to provide or allow access to food, shelter, clothing, heating, stimulation and activity, personal or medical care • Providing care in a way that the person dislikes • Failure to administer medication as prescribed • Refusal of access to visitors • Not taking account of individuals' cultural, religious or ethnic needs • Not taking account of educational, social and recreational needs • Ignoring or isolating the person • Preventing the person from making their own decisions • Preventing access to glasses, hearing aids, dentures etc • Failure to ensure privacy and dignity	• Poor environment – dirty or unhygienic • Poor physical condition and/or physical hygiene • Pressure sores or ulcers • Malnutrition or unexplained weight loss • Untreated injuries and medical problems • Inconsistent or reluctant contact with medical and social care organisations • Accumulation of untaken medication • Uncharacteristic failure to engage in social interaction • Inappropriate or inadequate clothing
Self-Neglect	This includes: • Lack of self-care to an extent that it threatens personal health and safety • Neglecting to care for one's personal hygiene, health or surroundings • Inability to avoid self-harm	• Very poor personal hygiene • Unkempt appearance • Lack of essential food, clothing or shelter • Malnutrition and/or dehydration • Living in squalid or unsanitary conditions • Neglecting household maintenance

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	• Failure to seek help or access services to meet health and social care needs • Inability or unwillingness to manage one's personal affairs	• Hoarding • Collecting a large number of animals in inappropriate conditions • Non-compliance with health or care services • Inability or unwillingness to take medication or treat illness or injury
Grooming	Grooming is when someone builds a relationship, trust and emotional connection with an adult with care and support needs so they can manipulate, exploit and abuse them. Children, young people and adults at risk who are groomed can be sexually abused, exploited or trafficked. Grooming can take place over a short or long period of time, and can be online, in person or both – by a stranger or someone they know. This could be a family member, a friend or someone who has targeted them. Groomers may also build a relationship with the young person's family or friends to make them seem trustworthy or authoritative. When somebody is groomed online, groomers may hide their true identity by sending photos or videos or other people. A person can be groomed online through: • social media networks • text messages and messaging apps, such as WhatsApp and Messenger • Email • Text, voice and video chats in forums games and apps Whether online or in person, groomers can use tactics such as: • Pretending to be younger • Giving advice or showing understanding • Giving attention • Buying gifts • Taking them on trips, outings or holidays Groomers may try to isolate the person from their friends and family, making them feel dependent on them. They might use blackmail, or introduce the	Some of the signs include: • Being very secretive about how they are spending their time, including when online • Having an older boyfriend or girlfriend • Having money or new things like clothes and mobile phones that they can't, or won't explain • Underage drinking or drug taking • Spending more or less time online or on their devices • Being upset, withdrawn or distressed • Sexualised behaviour language or an understanding of sex that's not appropriate for their age • Spending more time away from home or going missing for periods of time Grooming can have long-term effects such as: • Difficulty sleeping • Difficulty concentrating or coping with stress • Anxiety and depression • Eating disorders • Self-harm or suicidal thoughts • Drug and alcohol problems • Pregnancy or sexually transmitted infections • Future relationship problems

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	idea of 'secrets' to control, frighten or intimidate. The person may not understand they have been groomed. They may feel loved, and want to show loyalty to the person grooming them.	
Bullying and Cyberbullying	Bullying is when individuals or groups seek to harm, intimidate or coerce someone who is perceived to be vulnerable. Bullying includes: • verbal abuse, such as name calling • non-verbal abuse, such as hand signs or glaring • emotional abuse, such as threatening, intimidating or humiliating someone • exclusion, such as ignoring or isolating someone • undermining, by constant criticism or spreading rumours • controlling or manipulating someone • racial, sexual or homophobic bullying • physical assaults, such as hitting and pushing • making silent, hoax or abusive calls Bullying can happen anywhere – at school, at home or online. When bullying happens online it can involve social networks, games and mobile devices. Online bullying can also be known as cyberbullying. Cyberbullying includes: • sending threatening or abusive text messages • creating and sharing embarrassing images or videos • 'trolling' - sending menacing or upsetting messages on social networks, chat rooms or online games • excluding someone from online games, activities or friendship groups • setting up hate sites or groups about a particular person • encouraging young people to self-harm • voting for or against someone in an abusive poll	It can be hard to know whether or not someone is being bullied. They might not tell anyone because they're scared the bullying will get worse. They might also think that the bullying is their fault. No one sign indicates for certain that somebody is being bullied, but you should look out for: • belongings getting 'lost' or damaged • physical injuries such as unexplained bruises • being afraid to go to school or college, being mysteriously 'ill' each morning, or skipping school or college • not doing as well at school or college • asking for, or stealing, money (to give to a bully) • being nervous, losing confidence or becoming distressed and withdrawn • problems with eating or sleeping • bullying others

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	creating fake accounts, hijacking or stealing online identities to embarrass a young person or cause trouble using their name	
Female genital mutilation (FGM)	Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. FGM is abuse, and a criminal offence.	A child or adult at risk of FGM may not know what's going to happen. But they might talk about or you may become aware of: • a long holiday abroad or going 'home' to visit family • relative or cutter visiting from abroad • a special occasion or ceremony to 'become a woman' or get ready for marriage • a female relative being cut – a sister, cousin or an older female relative such as a mother or aunt • missing school repeatedly or running away from home A child or adult who has had FGM may: • have difficulty walking, standing or sitting • spend longer in the bathroom or toilet • appear withdrawn, anxious or depressed • have unusual behaviour after an absence from school or college • be particularly reluctant to undergo normal medical examinations • ask for help, but may not be explicit about the problem due to embarrassment or fear
Romance scams or predatory marriage	A romance scam is where someone convinces the adult that they are romantically interested in them, usually after a short time, they convince the adult to send money to them. Often the adult will have met this person on social media, dating websites or gaming sites. Criminals use fake profiles to build a relationship with the adult – this is also known as catfishing. Predatory marriage is a form of economic abuse, or control wherein marriage is a cover for exploitation, economic gain or controlling behaviour. The adult may not have the mental capacity to consent to the marriage. A forced marriage is where one or both people do not (or in cases of people with learning disabilities or reduced capacity, cannot) consent to the marriage as they are pressurised, or abuse is used, to	Some signs include: • Absence and persistent absence from school/college • Request for extended leave of absence and failure to return from visits to country of origin • Fear about forthcoming school/college holidays • Decline in behaviour, engagement, performance or punctuality • Being withdrawn from school/college by those with parental responsibility • Not being allowed to attend extra-curricular activities • Sudden announcement of engagement to a stranger, either to friends or on social media

	force them to do so. It is recognised in the UK as a form of domestic or child abuse and a serious abuse of human rights.	
Breast ironing or flattening	Breast ironing is the process during which young pubescent girls' breasts are ironed, massaged, flattened and/or pounded down over a period of time in order for the breasts to disappear or delay the development of the breasts entirely. Large stones, hammers or spatulas that have been heated over scorching coals can be used to compress the breast issue. Other methods include using elastic belts or binder to press the breasts. In most cases, the method is carried out by female relatives and is believed to: • Make teenage girls look less 'womanly' • Prevent pregnancy and rape • Prevent dishonour being brought upon the family if the girl begins sexual relations outside of marriage • Deter unwanted attention Although there is no specific law within the UK around breast flattening or breast ironing, it is a form of physical abuse.	Some of the signs that a girl is at risk of, or has undergone breast ironing or breast flattening include: • A girl born to a woman who has undergone breast ironing • Having an older sibling or cousin who has undergone breast ironing • Being embarrassed about her body • Appearing withdrawn or anxious • Withdrawal from PSHE and/or Sex and Relationship Education • Fearful for changing for physical activities due to bandages being visible, or scars showing • Reluctance to undergo medical examinations • Pain or discomfort in chest area
Radicalisation	**Radicalisation** refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. **Extremism** is vocal or active opposition to fundamental British values, such as democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces. **Terrorism** is an action that: • Endangers or causes serious violence to a person/people • Causes serious damage to property; or • Seriously interferes or disrupts an electronic system	Some indicators include: • Refusal to engage with, or becoming abuse to, peers who are different from themselves • Becoming susceptible to conspiracy theories and feelings of persecution • Changes in friendship groups and appearances • Rejecting activities that they used to enjoy • Converting to a new religion • Isolating themselves from family and friends • Increased levels of anger • Increased secretiveness, especially around internet use • Expressions of sympathy for extremist ideologies and groups, or justification of their actions • Accessing extremist material online including on Facebook or Twitter

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Appendix 3

Information Sharing Guidance

HM Government (2018): [Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers).](#)

Information sharing is essential for effective safeguarding and promoting the welfare of children and young people. The most important consideration is whether sharing information is likely to support the safeguarding and protection of a child.

The 7 'golden rules' for sharing information

1. Necessary and proportionate

When making decisions about what information to share, consider how much information you need to release. Anything you share from the disclosure must be proportionate to the need and level of risk.

2. Relevant

Only share relevant information to those who need it. This will allow others to do their job effectively and make informed decisions.

3. Adequate

The information you share should be of the right quality to ensure that it can be understood and relied upon.

4. Accurate

Information should be accurate and up to date and should clearly distinguish between fact and opinion. If the information is historical then this should be explained.

5. Timely

To reduce the risk of missed opportunities and offer support and protection to a child, information should be shared in a timely manner. Timeliness is key in emergency situations and it might not be appropriate to seek consent for information sharing if it can cause delays and put a child or young person at an increased risk of harm. Ensure that enough information is shared as well as the urgency with which to share it.

6. Secure

Wherever possible, the information should be shared appropriately and securely. You must always follow policies and procedures on handling personal data.

7. Record

Information sharing decisions should be recorded, whether or not the decision is taken to share. If the decision is to share, reasons should be cited including what information has been shared and with whom, in line with organisational procedures. If the decision is not to share, it is good practice to record the reasons for this decision and discuss them with the requester. In line with each organisation's own retention policy, the information should not be kept any longer than is necessary. In some rare circumstances, this may be indefinitely, but if this is the case, there should be a review process scheduled at regular intervals to ensure data is not retained where it is unnecessary to do so.

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When you should share information

When you're asked to share information, you need to consider the following questions to help you decide if and when to share:

- Is there a clear and legitimate purpose for sharing information?
- Do you have consent to share?
- Does the information enable an individual to be identified?
- Have you identified a lawful reason to share information without consent?

How you should share information

In relation to how you should share information, consider these issues:

- Identify how much information you will share
- Separate fact from opinion
- Ensure you give the right information to the right individual
- Ensure that you share the information securely
- Be transparent and inform the child or young person that the information has been shared, as long as doing so does not create or increase the risk of harm to the child

The Data Protection Act (2018) includes 'safeguarding of children and individuals at risk' as a condition that allows practitioners to share information without consent.

Information can be shared legally without consent, if a practitioner is unable to, cannot be reasonably expected to gain consent from the individual, or if to gain consent could place a child or adult at risk.
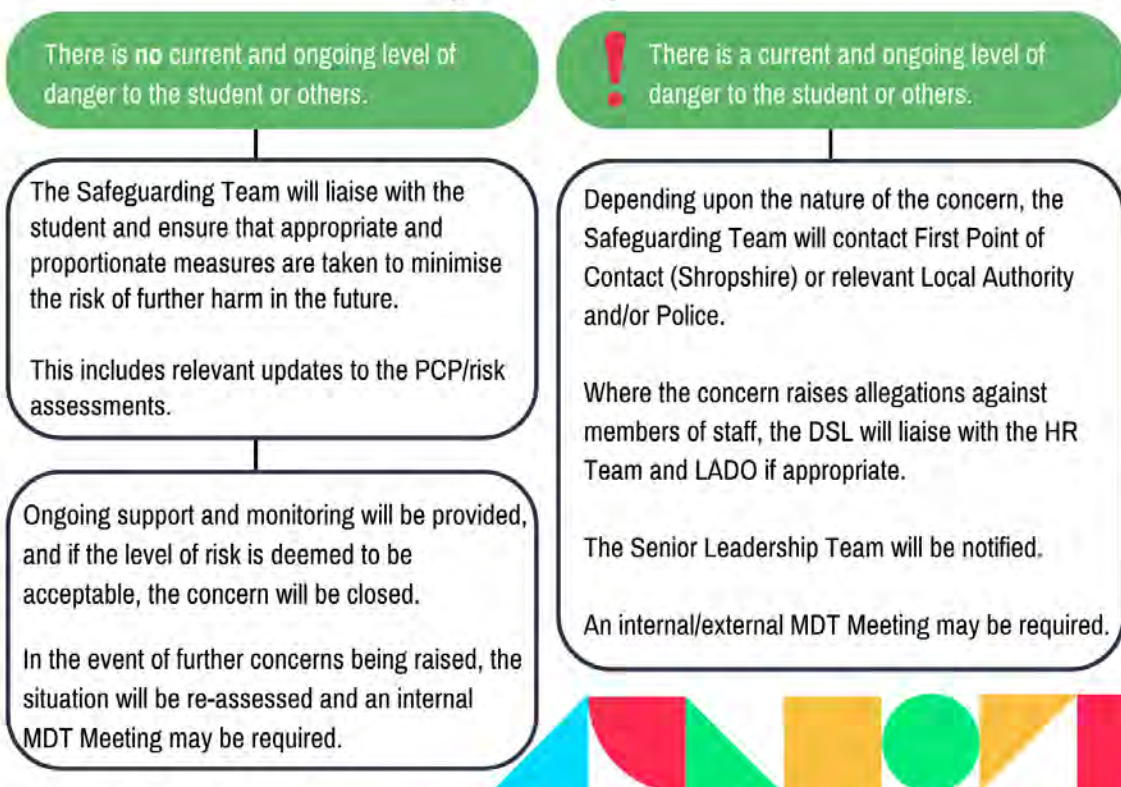
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Appendix 4

Reporting a Safeguarding Concern Procedure — Derwen College

As per policy, if you suspect somebody is in immediate danger, contact the Police on 999 and inform the DSL or DDSL as soon as possible.

If you have a concern about a student's safety or welfare, but they are not considered to be at significant risk of harm:

! If you are concerned that a student is at significant risk of harm or abuse:

You must contact the DSL/DDSL by telephone, or the On-Call Manager if out of hours, and then:

Report it via MyConcern

The DSL/DDSL will assess the concern and take appropriate action as follows:

There is **no** current and ongoing level of danger to the student or others.

! There is a current and ongoing level of danger to the student or others.

The Safeguarding Team will liaise with the student and ensure that appropriate and proportionate measures are taken to minimise the risk of further harm in the future.

This includes relevant updates to the PCP/risk assessments.

Ongoing support and monitoring will be provided, and if the level of risk is deemed to be acceptable, the concern will be closed.

In the event of further concerns being raised, the situation will be re-assessed and an internal MDT Meeting may be required.

Depending upon the nature of the concern, the Safeguarding Team will contact First Point of Contact (Shropshire) or relevant Local Authority and/or Police.

Where the concern raises allegations against members of staff, the DSL will liaise with the HR Team and LADO if appropriate.

The Senior Leadership Team will be notified.

An internal/external MDT Meeting may be required.

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Appendix 5

How to Report a Safeguarding Concern in MyConcern

Accessing your account for the first time:

1. You will be sent an activation email from One Team Logic.
2. Follow the instructions within the email to activate your account and change your password.
3. Once you have activated your account, you will be able to log-in to the MyConcern platform.

How to access MyConcern:

1. You can access MyConcern via this link https://login.thesafeguardingcompany.com/
2. Use the bookmark feature (star) in Google Chrome to save the page as a tab, for easy access.

How to report a concern:

1. On your homepage, click this button to open the concern form: **Report a Concern**
2. Complete each section as follows:

> Enter the name(s) of the student(s) who are the subject of the concern. You can leave this blank if you are raising a general concern.

Name(s) of Pupil(s)

Please enter at least 3 characters to search 🔍

ⓘ Please add the Pupil(s) who are the subject of this concern and add any other Pupil(s) you want associated to it.

3. Once the student(s) have been added, you will have the option to add a body map to record any associated physical injuries.

4. It is also optional to add the involvement type; such as alleged victim, alleged perpetrator or witness.

> Briefly indicate the reason for your concern here; will aid the triaging process.

Concern Summary

e.g. Injury – Megan arrived at School this morning with a badly bruised right eye.

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This should reflect the Date/Time of your concern, observation or incident.

Concern Date/Time

DD/MM/YYYY HH:MM

This is to highlight where the concern has originated from; who is raising the concern? E.g. Staff Member.

Origin of Concern

Please Select an Origin of Concern

This is where you should record the main body of your concern.

Details of Concern

There is no need to repeat the Concern Summary.

5. Remember to include the exact words of the child/young person (e.g. xx said "…"), including any slang words or offensive language.

6. Always adopt a person-centred approach and keep the student(s) at the centre of the concern.

7. You should indicate here whether or not the student(s) is/are aware that you are raising the concern, and whether they have requested any particular action as a result.

Select the most relevant location from the dropdown box.

Location of Incident

Not Applicable

8. If the location does not appear in the list, select 'other' and provide the location in the Details of Concern section above.

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☐ Is this Concern urgent?

9. Select this box if you deem the concern to be urgent. You will be prompted to provide a reason for urgency.

10. Please note, you should always contact the DSL/DDSL by telephone if you consider somebody to be at significant risk of harm.

> You should record what immediate actions you have taken, to ensure the student(s) are safe.

Action Taken

11. If you have spoken to the student(s) involved, consider whether this needs to be recorded on the student(s) timeline, on Nourish as a way of sharing information.

12. The 'My Conversation Record' interaction can be used (visible to all staff) to document your discussion or the 'Sensitive Care Record' may be more appropriate if the conversation topic is of a sensitive nature. This interaction will only be visible to staff within a care-based role.

13. If you are unsure, seek advice from your Line Manager or the Safeguarding Team.

> Upload any relevant documents, such as written statements from student(s), drawings or pictures, photographs or screenshots.

Attachment

Select File

ⓘ Please attach any media that is relevant to this concern.

14. Once you have completed all sections, click this button to save: **Submit Concern**

15. You will receive a concern reference number, as follows:

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Thank You

Your concern has been recorded successfully and a notification sent to the DSL

> **Concern Reference Number: 1**

(i) If the Concern you have submitted might result in serious or immediate risk of harm to the person you are concerned about then you SHOULD also report this verbally to your Safeguarding Lead as soon as possible and make them aware of the incident. Remember, they may not be in a position to receive or read the notification immediately.

Click here to view or update this and any other concern(s) you have reported

16. You can view or edit any of your reported concerns, via the 'My Concerns' tab on the homepage.

17. Any updates made after submission will notify the DSL and a full audit trail will be available.

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Appendix 6

A Quick Guide to Professional Curiosity

Professional Curiosity is good safeguarding practice.

It refers to the capacity and skills used to explore and understand what is happening with an individual or family.

It is about managers and practitioners:

- Maintaining respectful uncertainty rather than making assumptions or accepting things at face value.
- Listening and exploring uncertain thoughts and feelings generated when working with an individual or family.

It requires skills of looking, listening, asking direct questions and being able to hold difficult conversations.

This approach is important in helping to identify abuse and neglect which can be less obvious, and can ensure that the right information is gathered and shared to assess both needs and risks.

It helps us to:

- Understand the full picture
- Ensure that nothing is missed
- Improve practice outcomes
- Do our best to safeguard children and adults
- Support other professionals working with the family

Being more curious as professionals and 'digging deeper' into areas where there is little or no information will help inform assessment, and empower you to influence decision making to reduce risks for people you support.

Staff should consider the following:

Look

- Is there anything about what you see when you meet the Adult, Child or their Family that makes you feel uneasy or prompts questions?
- Do you see behaviours which indicate abuse or neglect including coercion and control?
- Does what you see contradict or support what you are being told?
- How do family members/ other people in the household interact with each other and with you?

Ask

- Do not presume you know what is happening in the family home, ask questions and seek clarity if you are not certain
- Do not be afraid to ask questions of families, and do so in an open way so they know that you are asking to keep their child or adult safe, not to judge or criticise
- Be open to the unexpected

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Listen

- Are you being told anything that needs further clarification?
- Is the adult or child or someone else in the family/household trying to tell you something verbally or by their non-verbal cues?
- Are you concerned about how family members interact and what they say?
- Making time and finding a safe space to have a private conversation with an adult or child at risk or, who is subject to coercion and control can support open conversations

Clarify

- Are there other professionals involved?
- What information do they have, is it useful to arrange a Multi-Disciplinary discussion?
- Are other professionals being told the same or different things?
- Are others concerned? If so what action has been taken so far and is there anything else which could or should be done by you or someone else to support the adult or child?

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