




SAFEGUARDING (VULNERABLE ADULTS) POLICY

MIDAYE SOMALI DEVELOPMENT NETWORK

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Signature: 

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1. POLICY STATEMENT

- 1.1. Midaye Somali Development Network (“Midaye”) is a charity that works to improve the lives of families. We believe that every individual who accesses our services should be treated with dignity and respect, have their choice respected and not be forced to do anything against their will.
- 1.2. Midaye Somali Development Network is committed to safeguarding all adults coming into contact with the charity, regardless of gender, ethnicity, disability, sexuality or beliefs as all adults have the right to be safe from harm and must be able to live free from fear of abuse, neglect and exploitation.
- 1.3. The aim of this policy is that all Midaye’s staff will be able to, within their working role, recognise where there is a safeguarding concern for an adult and respond by accessing and following the agreed safeguarding procedure(s) in order to protect that person and to fully comply with all aspects of their responsibility.
- 1.4. An adult is defined as anyone who is aged 18 years or over.
- 1.5. Midaye Somali Development Network personnel may come into direct and indirect contact with children through the delivery of a range of services.

2. PURPOSE

- 2.1. The purpose of this policy is:
 - 2.1.1. To protect adults who benefit from Midaye’s services.

- 2.1.2. To provide Midaye's staff and volunteers with the overarching principles that guide our approach to adult safeguarding protection.

3. APPLICATION, AVAILABILITY AND REVIEW

Application

- 3.1. This policy applies to everyone employed directly or indirectly by Midaye Somali Development Network and includes Trustees, staff, volunteers, sessional workers, work placements, trainers and consultants.
- 3.2. This policy should be provided to independent contractors and should be implemented as good practice.
- 3.3. While this policy focuses on the workplace responsibilities of staff, responsibilities to safeguard and promote the welfare of vulnerable adults extend to an individual's personal and domestic life.
- 3.4. Safeguarding must be considered everyone's responsibility and all staff who, during the course of their employment have direct or indirect contact vulnerable adults, or who have access to information about them, have a responsibility to safeguard and promote their welfare.

Availability

- 3.5. This policy and the Safeguarding Children policy will be made available to all stakeholders and interested parties through the following channels:
 - 3.5.1. In downloadable form on the Midaye website (<http://midaye.org.uk>).

- 3.5.2. By email on request. Please contact the Safeguarding Officer (see section 14 below).
- 3.5.3. As a printed document from the Midaye office

Review

- 3.6. This policy must be reviewed, approved and endorsed by the Board of Trustees on an annual basis.
- 3.7. An annual audit of safeguarding concerns, action taken and staff training and support will be conducted annually and safeguarding policy and procedures will be reviewed every three years or in the light of significant changes to best practice or legislation.

4. GUIDANCE AND LEGISLATION

- 4.1. This policy has been written to comply with the guidance and requirements the following legal frameworks:
 - 4.1.1. The Care Act 2014 (Department of Health)
 - 4.1.2. Human Rights Act 1998, the Mental Capacity Act 2005 and Public Interest Disclosure Act 1998
 - 4.1.3. GDPR 2016, Freedom of Information Act 2000, Safeguarding Vulnerable Groups Act 2006, Deprivation of Liberty Safeguards, Code of Practice 2008
 - 4.1.4. The Mental Capacity Act 2005, covering England and Wales, provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to prepare for a time when they may lack capacity in the future. It

sets out who can take decisions, in which situations, and how they must go about this.

4.1.5. The Human Rights Act 1998 gives legal effect in the UK to the fundamental rights and freedoms contained in the European Convention on Human Rights (ECHR).

4.1.6. The Public Interest Disclosure Act 1998 (PIDA) created a framework for whistle blowing across the private, public and voluntary sectors. The Act provides almost every individual in the workplace with protection from victimisation where they raise genuine concerns about malpractice in accordance with the Act's provisions.

5. DEFINITION AND NATURE OF SAFEGUARDING

5.1. Safeguarding is a broad term which aims to protect a person's right to live in safety, free from abuse and neglect. Safeguarding works to prevent and reduce the risk and experience of abuse or neglect. It is important to note that the individual or individuals must fit within the statutory criteria of an adult at risk, please see section 5.51 for definition for this criterion.

5.2. Safeguarding includes adults wellbeing is supported and their views, wishes, feelings and beliefs are respected when agreeing on any action. Wellbeing can encompass personal dignity, physical health, mental health and emotional well-being, amongst other things.

5.3. An adult at risk is someone who may be in need of help because they have care and support needs. They may also be unable to prevent someone from harming, abusing or exploiting them.

- 5.4. An adult at risk can include those with learning disabilities, mental health problems, older people and people with a physical disability or impairment. It may also include victims of abuse, hate crime, homelessness and anti-social behaviour.
- 5.5. An adult's vulnerability may be increased with complicated additional factors such as physical or chronic illnesses, sensory impairment, challenging behaviour, drug or alcohol problems, social and emotional problems, poverty and homelessness.
- 5.5.1 Abuse is described as a violation of an individual's human and civil rights by any other person or persons which results in significant harm. Abuse may consist of a single act or repeated acts. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. Types of abuse include:
- 5.5.2 Physical abuse: including hitting, slapping, pushing, unnecessary restraint or misusing medications.
- 5.5.3 Domestic violence: including all types of abuse between family members or partners; so called 'honour' based violence.
- 5.5.4 Sexual abuse: including inappropriate touching, indecent exposure, rape, harassment or any sexual acts the adult has not consented to.
- 5.5.5 Psychological abuse: including emotional abuse, threats of harm, attempts to control, coercion, verbal abuse and bullying.
- 5.5.6 Financial or material abuse: including theft, fraud, coercion with regard to financial affairs
- 5.5.7 Modern slavery: including forced labour and human trafficking.

- 5.5.8 Discriminatory abuse: harassment or slurs due to someone's race, gender, age, disability, sexual orientation, religion or gender identity.
 - 5.5.9 Organisational abuse: including neglect and poor care practice within a care setting or in relation to care provided in one's own home.
 - 5.5.10 Neglect and Acts of Omission: failure to act or ignoring medical, emotional or physical care needs.
 - 5.5.11 Self-neglect: neglecting to care for your own health, hygiene or surroundings.
- 5.6. The term 'safeguarding' refers to inward facing procedures such as awareness raising, reporting concerns, responding appropriately to issues of abuse and exploitation and preventing harm through sound recruitment and safe programming.

6. PRINCIPLES OF SAFEGUARDING

- 6.1. There are six leading principles set out by The Care Act 2014 which inform the way in which all professionals and staff who work with adults, and they are as follows:
 - 6.1.1. Empowerment: Ensuring that people are supported and confident in making their own decisions and giving informed consent.
 - 6.1.2. Protection: Providing support and representation for those in the greatest need.
 - 6.1.3. Prevention: It is critical to try and take action before harm occurs, preventing neglect, harm or abuse is the primary objective.

- 6.1.4. Proportionality: We must take a proportionate and least intrusive response to the issue presented.
- 6.1.5. Partnerships: Forming partnerships with local communities can create solutions as they can assist in preventing and detecting abuse.
- 6.1.6. Accountability: Being accountable and having complete transparency in delivering safeguarding practice.
- 6.2. Midaye's Trustees must practice diligent oversight and work to develop, implement and maintain policies and procedures which:
 - 6.2.1. Set out clear **roles and responsibilities** for safeguarding.
 - 6.2.2. Builds a **culture** that values and respects all and models appropriate conduct in line with Midaye's values.
 - 6.2.3. Ensures that Midaye practices **safe recruitment** in checking the suitability of staff, freelancers and volunteers to work with vulnerable adults.
 - 6.2.4. Provides a **safe environment**, ensuring services are provided in safe environments and that sufficient safeguards are in place.
 - 6.2.5. Raises awareness of **adult protection** situations, and implements robust procedures for identifying and reporting concerns or suspected cases.
 - 6.2.6. Raises awareness of how and when to **signpost adults** to appropriate services.

7. ROLES AND RESPONSIBILITIES

Safeguarding vulnerable adults is everyone's responsibility and requires a strong collaboration of trustees, staff, volunteers and all those associated with Midaye to work together through honest communication.

Trustees Responsibilities

- 7.1. The Trustees are responsible for ensuring that those benefiting from or working with Midaye are not harmed in any way through contact with it. The Trustees must always act in the best interests of the organisation's clients and ensure they take all reasonable steps to prevent any harm to them.
- 7.2. Moreover, the Trustees have a duty of care to the organisation which includes taking the necessary steps to safeguard and take responsibility for any vulnerable adults who come into contact with the organisation.
- 7.3. Trustees also have duties to manage risk and to protect the reputation and assets of the charity.
- 7.4. Trustees must ensure that they are equipped to oversee and take responsibility for safeguarding within Midaye by undergoing induction and training as per section 9.12
- 7.5. Trustees must remain up-to-date in safeguarding matters by receiving regular briefings about safeguarding matters and concerns from the organisation and by undergoing regular refresher training as per section 9.12

Director

- 7.6. The Director is accountable to Trustees for safeguarding within the organisation and will ensure a clear framework for the management accountability for safeguarding is in operation.
- 7.7. The Director is responsible for ensuring that the Safeguarding Officer and Deputy Safeguarding Officer carry out their responsibilities correctly.

- 7.8. The Director must act as the primary agent in dealing with any safeguarding matter for which there is evidence that either the Safeguarding Officer or Deputy Safeguarding Officer has acted incorrectly or have a conflict of interest in the course of a safeguarding incident.
- 7.9. The Director shall keep the trustees informed of any important safeguarding matters and shall brief them on safeguarding developments or concerns at least 4 times per year.

Safeguarding Officer and Deputy Safeguarding Officer

- 7.10. The Trustees must agree on a Safeguarding Officer (SO) and a Deputy Safeguarding Officer (DSO) for the organisation.
- 7.11. The SO and the DSO are responsible for:
 - 7.11.1. Managing safeguarding incidences including making decisions, setting actions, recording information, liaising with other agencies and social services, and supporting staff during the management of safeguarding incidences.
 - 7.11.2. Arranging and conducting induction training and refresher training for new staff and volunteers.
 - 7.11.3. Ensuring that staff uphold the standards set by Midaye for safeguarding and that staff consistently and correctly follow safeguarding procedures.
 - 7.11.4. Staying up-to-date with the latest developments in safeguarding legislation and best practice. Both the SO and the DSO should undertake safeguarding refresher training on a yearly basis.
 - 7.11.5. Recommending updates and changes to Midaye's safeguarding policies and procedures.
- 7.12. The Safeguarding Officer for Midaye is currently:

Philip Quinn (Deputy Director)

Contact details for the SO may be found in section 13 below.

7.13. The Deputy Safeguarding Officer for Midaye is currently:

Sameera Jama (Project Officer)

Contact details for the DSO may be found in section 13 below.

Employees at Midaye

- 7.14 All staff working on behalf of Midaye have a duty to promote the welfare and safety of vulnerable adults. Staff should uphold, at all times, the wellbeing and protection of themselves and those around them.
- 7.15 Staff need to be alert to the potential abuse of vulnerable adults both within their caseloads, interaction with clients and when working with Midaye clients.
- 7.16 It is the staff's responsibility to attend relevant safeguard training, refresher training and be up to date on procedures.
- 7.17 Staff are responsible for keeping accurate records in good detail and in a timely matter, in line with Midaye confidentiality policies.

Volunteers at Midaye

- 7.18 Individuals within the organisation need to be alert to the potential abuse of vulnerable adults who engage with services at Midaye but also from other sources including abuse by members of that organisation.

8. A CULTURE OF RESPECT

- 8.1. Staff should act, at all times, to protect and uphold the wellbeing of themselves and those around them. Midaye places great value on individual wellbeing and encourages all its stakeholders to embrace and uphold the values of community and respect.
- 8.2. The undermining of or an offence to any individual's safety, health and wellbeing, whether through deliberate action, indirect consequence or negligence, will not be tolerated.
- 8.3. Staff are expected to value diversity and respect the contribution and significance of every other staff member, volunteer, client and any other individual.
- 8.4. Employees are encouraged to raise concerns they may have regarding their working environment, employment practices, and the safety, health and wellbeing of staff and clients. All such concerns raised will be taken seriously.
- 8.5. Unlawful discrimination, bullying or harassment will not be tolerated.
- 8.6. The Grievance Procedure Policy sets out how to raise concerns both informally and formally, how concerns will be investigated and support for individuals raising a concerns as well as for employees who are the subject of a complaint.
- 8.7. Employees will not suffer any negative treatment for giving constructive criticism or raising a genuine grievance.
- 8.8. Midaye's Whistle Blowing Policy provides guidance for staff on confidential reporting of concerns about wrong doing in the workplace.
- 8.9. Midaye also has a clear policy for staff on IT usage forbidding inappropriate use of materials which includes sexually explicit material, obscene remarks and abusive or discriminatory messages.

9. SAFE RECRUITMENT OF STAFF AND VOLUNTEERS

Recruitment

- 9.1. Midaye's Recruitment and Selection Policy specifies procedures to ensure that thorough checks are made prior to the appointment of staff, volunteers, sessional workers and freelance consultants, in order to help prevent a person using their position to harm a child or vulnerable single parent.
- 9.2. For all staff appointments at Midaye the following vetting checks will be carried out prior to confirming the appointment:
 - 9.2.1. Applicants will be asked to complete a Self-Disclosure form to disclose previous spent/unspent convictions and disciplinary or capability procedures.
 - 9.2.2. Applicant's will be asked to provide a current, reliable identity document including photographic identity.
 - 9.2.3. Applicants will be asked to provide proof of their right to work in the UK.
 - 9.2.4. References will be obtained for successful applicants, including a professional reference using a pro-forma template
 - 9.2.5. Applicants will be required to provide proof of qualification if this is required for the role
 - 9.2.6. A Disclosure and Barring Service (DBS) Check will be carried out on the applicant and they will be asked to provide Midaye with a copy of the result of the check. See clauses 9.6 – 9.11.

- 9.3. All appointments to posts involving direct work with children and/or vulnerable adults will be subject to an Enhanced Disclosure from the DBS, and agreement to re-check every 3 years.
- 9.4. The appointment of volunteers, freelance consultants and sessional workers will be subject to the following vetting checks:
 - 9.4.1. Applicants will be asked to complete a Self-Disclosure form to disclose previous spent/unspent convictions and disciplinary or capability procedures.
 - 9.4.2. Applicant's will be asked to provide a current, reliable identity document including photographic identity.
 - 9.4.3. References will be obtained for successful applicants, including a professional reference using a pro-forma template
 - 9.4.4. A Disclosure and Barring Service (DBS) Check will be carried out on the applicant and they will be asked to provide Midaye with a copy of the result of the check. See clauses 7.6 to 7.11 below.

Induction

- 9.5. Midaye's will subject every new trustee, employee and volunteers to a thorough induction process within 6 weeks of the start of their engagement. This will include:
 - 9.5.1. A requirement that the new staff member / volunteer reads key organisation policies and acknowledges their understanding and acceptance of these policies. These policies will include but are not limited to:
 - 9.5.1.1. Safeguarding (Children) Policy
 - 9.5.1.2. Safeguarding (Vulnerable Adults) Policy
 - 9.5.1.3. Code of Behaviour

- 9.5.1.4. Complaints Policy
 - 9.5.1.5. Confidentiality Policy
 - 9.5.1.6. Customer Care Policy
 - 9.5.1.7. Data Protection Policy
 - 9.5.1.8. Equality and Diversity Policy
 - 9.5.1.9. Health and Safety Policy
 - 9.5.1.10. Lone Worker Policy
- 9.5.2. A thorough briefing on Safeguarding at Midaye with a specific emphasis on Midaye's context, circumstances likely to present significant safeguarding potential, and on the practical procedures to be followed in the case of a safeguarding concern.
- 9.5.3. Obtaining safeguarding training or refresher training from an accredited external provider.

DBS Checks

- 9.6. DBS checks must be obtained for every staff member, trustee and volunteer.
- 9.7. DBS checks must be renewed every 3 years.
- 9.8. Any employee or volunteer who comes into regular contact vulnerable adults in the course of their work must be subject to an Enhanced DBS check.
- 9.9. The SO / DSO and the Office Administrator will be responsible for managing the obtaining and renewal of DBS check certificates.
- 9.10. Midaye must keep a file with hard copies of employee and volunteer DBS check certificates. This file should be kept in a locked cabinet and access to this file should be restricted to the Trustees, Director, SO, DSO and Office Administrator.

- 9.11. Employees and volunteers are required to inform the Director within 5 working days should they be subject to an indictment, court ruling, legal decision or incident which may result in a material change to a DBS Check.

Training and Appraisal

- 9.12. All staff, trustees and current volunteers should participate in refresher safeguarding training at least once per year. This refresher training should include:

- 9.12.1. Refresher training concerning the basic principles of safeguarding. This training should be provided by an accredited organisation or individual, preferably the LSCB or NSPCC.
- 9.12.2. Updates regarding any developments in legislation or best practice.
- 9.12.3. Refresher training regarding internal procedures and requirements.

- 9.13. All employees at Midaye will be subject to annual staff appraisal process to provide an assessment of the employee's work and to help identify support and training needs.

10. CREATING A SAFE ENVIRONMENT

- 10.1. Midaye will ensure that all physical spaces in which services or activities are delivered comply with the stipulations of its Health and Safety policy and do not pose a risk.

- 10.2. The Director will be responsible for ensuring that Midaye's service delivery spaces are subject to a health and safety audit on a six monthly basis.

Duty to report concerns

- 10.3. All concerns and allegations of abuse will be taken seriously and responded to appropriately.
- 10.4. Staff have a duty to report any concern they may have. Procedures for making such a report are detailed in section 11.
- 10.5. Failure to comply with these responsibilities will be seen as a serious matter which may lead to disciplinary action.

Confidentiality

- 10.6. Midaye Somali Development Network's Confidentiality policy may be overridden in the circumstance in which the welfare of a vulnerable person/people takes priority. Clear boundaries of confidentiality should be communicated to all.
- 10.7 All personal information will be kept confidential. All written records will be kept in a secure area for a specific time as identified in data protection guidelines.
- 10.8 Staff should never give absolute guarantees of confidentiality to anyone wishing to tell them about something serious.
- 10.9 In respect of vulnerable adults all action, including referrals to Social Services and the police, should be with the consent of the service user, if possible. In every situation it will be assumed that a person can make their own decisions and action may only be taken in the absence of consent from the service user where;
- 10.6.1. they or others are in physical danger

- 10.6.2. after seeking advice from an appropriate agency you have been advised to report the concern as it is believed that the vulnerable adult is unable/incapable of making an informed decision for himself or herself.
- 10.6.3. Staff must keep the adult informed on any action being taken, why and if possible, the results of the action.
- 10.7. These decisions should not be taken in isolation. Always consult with your senior manager/line manager.
- 10.8. Midaye's complaints procedure is an important way in which concerns can be surfaced and should be easily accessible to clients.
- 10.9. This policy should to be read in conjunction with other relevant policies for the organization including:
 - 10.9.1 Confidentiality Policy
 - 10.9.2 Safeguarding for Children
 - 10.9.3 Disciplinary and Grievance
 - 10.9.4 GDPR Data Protection
 - 10.9.5 Recruitment and Selection
 - 10.9.6 Safeguarding Children
 - 10.9.7 ICT Policy
 - 10.9.8 Code of Behaviour

11. GUIDANCE FOR RESPONDING TO CONCERNS

- 11.1. Midaye does not have appropriate expertise to deal directly with actual safeguarding issues, although our intervention may be helpful, nor does it provide counselling support, so it is vital that staff understand how to identify signs and signpost effectively.

- 11.2. The Director, SO and DSO will support frontline staff to recognise the signs of distress, to handle this and their own reactions, and to signpost clients to services that can provide support.
- 11.3. Midaye will provide up to date signposting information for use by staff and volunteers which details organisations that can be contacted to support parents in a range of situations ranging from domestic violence, to mental health, drugs and alcohol and safety.
- 11.4. Staff should be empowered to recognise and act:
 - 11.4.1. On indicators of abuse or potential abuse, as defined in section 5.
 - 11.4.2. When there are concerns about an adults wellbeing.
 - 11.4.3. On understanding and recognizing any Individual factors, relationship factors, community factors, cultural factors and institutional factors that may increase an adults risk of abuse.
- 11.5. There is an expected responsibility for all members of the organisation to respond to any suspected or actual abuse in accordance with these procedures.
- 11.6. In the case of an emergency, the **police** should always be contacted immediately on **999**.
- 11.7. Staff should follow *Guidance: acting on safeguarding concerns* to help them assess the risk of harm and take action if required.
- 11.8. All incidents should be recorded on the recording form and emailed to the safeguarding manager and copied to the CEO and Safeguarding lead manager. This form will be stored securely in compliance with relevant legislation and kept in accordance with the archive policy.
- 11.9. Allegations of abuse or concerns raised against members of staff, volunteers, trainers or trustees, will always be treated seriously.

In the event of a disclosure

11.10. It is important that vulnerable adults are protected from all forms of abuse. All complaints, suspicious, or allegations must be taken seriously.

11.11. It is understood that an adult may seek out a staff member or volunteer to share information about abuse or neglect, or may talk spontaneously individually or in groups when a staff member / volunteer is present. In these situations, the following should be observed:

- 11.11.1. Listen carefully and try to avoid questions.
- 11.11.2. Ensure that the individual and others involved are safe and assess whether emergency services are required immediately; contact if necessary
- 11.11.3. Encourage the adult to speak freely, be supportive and offer reassurance without stopping the adult from freely recalling significant facts and events.
- 11.11.4. Make an accurate record of the information that has been share taking care to record the timing, setting, the names of people present, the nature of the abuse or event, any injuries or damage observed, and all other details and information given. Do keep this safe, as it may later be needed as evidence.
- 11.11.5. Promises of confidentiality must not be given, as this may conflict with the need to ensure the safety and welfare of the individual.
- 11.11.6. Reassure the adult that:
 - 11.11.6.1. they have done the right thing in telling you;
 - 11.11.6.2. they have not done anything wrong;
 - 11.11.6.3. Tell the adult what you step you are going to next and explain the actions that you will be taken. Obtain consent, where possible. If there are others at risk, public interest

disclosure permits a safeguarding adults referral without the individual's consent.

11.11.7. It is important to remember that the person who has been disclosed to, is not responsible for making any decision on the case. This is the task of the professional adult protection agencies. As the person being told, the following actions should be avoided:

11.11.7.1. Confronting the alleged abuser(s)

11.11.7.2. Be judgemental or voice your own opinions

11.11.7.3. Be dismissive of what has been shared with you

11.11.7.4. Investigate or interview for information not given to you

11.11.7.5. Disturb or destroy any possible evidence

11.11.7.6. Consult with persons not directly involved in the situation, or anyone outside of Midaye staff, managers, SO, DSO.

Observing behaviour or circumstances which raise concerns

11.12. Because of your observations of, or information received you may become concerned about an adult who has not spoken to you.

11.12.1. It is good practice to ask an adult why they are upset or how a cut or bruise was caused, or respond to an adult wanting to talk to you. This practice can help clarify vague concerns and result in appropriate action.

Midaye's internal reporting procedures

11.13. Employees and staff should always follow the principle of exercising caution above all else. They must be encouraged to speak about a concern rather than putting it off, no matter how trifling or insignificant it might seem.

- 11.14. Employees and volunteers with a safeguarding concern should contact the SO immediately. If the SO is unavailable they should contact the DSO and if the DSO is unavailable, they should contact the Director.
- 11.15. Should the concerned employee not be able to contact the SO, the DSO or the Director they should contact the local Social Care Duty & Investigation Team in the area where the child resides.
- 11.16. The SO or DSO will immediately register the new concern on Midaye's Safeguarding Register, recording all the available details.
- 11.17. The SO or DSO must endeavour to obtain as much relevant and helpful information on the case in question from the employee or volunteer making the report. The SO or DSO should then use this information to determine the validity and seriousness of the case. They should always consult with the Director and SO/DSO and the local Social Care Duty & Investigation Team in the area where the child resides or other qualified experts if they have any doubts at all.
- 11.18. The SO or DSO will assign a safeguarding concern level to the case (red, amber or green) on the Safeguarding Register depending on the risk-level of the circumstance. This concern level may be up- or downgraded as the case progresses.
- 11.19. The SO or DSO will at their discretion and/or in consultation with other management and/or social workers, assign a response category to the case on the Safeguarding Register: emergency, reporting, supporting, investigating, follow-up. This response category must be altered as the case progresses and Midaye's involvement in the case changes.
- 11.20. The SO or DSO will include an action decision for the case on the Safeguarding Register and assign a date and, if necessary, a time by which the action must be accomplished. The case must be revisited on

the Safeguarding Register before the date (and possibly time) indicated to record whether the action was accomplished or not. If it has not been accomplished a reason must be recorded. The SO or DSO will, at this point, then specify a new action decision repeating the process described above.

- 11.21. Action decisions will vary from case to case but should generally involve one or more of the following:
 - 11.21.1. obtaining further information
 - 11.21.2. reporting the case to a competent authority
 - 11.21.3. supporting the affected individuals
- 11.22. The SO or DSO will indicate clearly on the Safeguarding Register to whom the case has been recorded and will include details of how and when the report was made and whether the report was acknowledged.
- 11.23. The SO or DSO will ensure that, should they deem a case to be of significant enough validity, it is handed as soon as possible to an authority capable of responding to it appropriately.
- 11.24. The SO or DSO will keep every case on the Safeguarding Register open until they have been entirely satisfied that the concern has been completely mitigated or if the case has been handed to a competent authority and there is no role that Midaye can provide at all in the circumstances.
- 11.25. The SO or DSO will provide regular briefings to the Director on the state of the cases open on the Safeguarding Register. This should be done weekly if there are high concern level cases (red) open and otherwise monthly.

Consulting with Social Services

- 11.26. Should the Safeguarding Officer or Deputy Safeguarding Officer consider it necessary, they should consult with the local Safeguarding Adults Board in the area where the adult resides. This may be done for any case at the Safeguarding Officer / Deputy Safeguarding Officer's discretion, however it must be considered necessary in the following circumstances:
- 11.26.1. when the SO / DSO remains unsure after internal consultation as to whether a safeguarding issue has occurred.
 - 11.26.2. when there is disagreement as to whether adult protection concerns exist.
 - 11.26.3. when the concerns relate to any member of the organisation.
- 11.27. If, in an urgent safeguarding situation, the staff member or volunteer presented with the safeguarding circumstance is unable to get in touch with the SO, the DSO or the Director, they should contact the local Safeguarding Adult Board in the area where the child resides themselves. In such a case the staff member or volunteer in question must still report to the SO / DSO as soon as it is possible to do so.

Making a Referral

- 11.28. A referral involves giving Adult Social Services all information, the Emergency duty team if it happens to be out of hours or the Police, if there is a criminal act involved.
- 11.29. Staff is expected to act in a way that is both legal and protect the individual and others who may be at risk while always taking into account their views, wishes, feeling and beliefs.
- 11.30. Before completing a referral, ensure that the patient fits in the statutory criteria, highlighted in section 5 of this policy. Staff must

also assess the person's mental capacity to consent to their referral. If a person lacks capacity, see below.

- 11.31. In your referral form you must ensure:
 - 11.31.1. Clear and concise information regarding the disclosure
 - 11.31.2. To highlight any urgent action that needs to be taken
 - 11.31.3. That the information about other professional who may be working with the individual/s
 - 11.31.4. Any relevant historical information about the individual/s
 - 11.31.5. If the individual/s poses any risks, particularly to other professionals.

Mental Capacity

11.32 The Mental Capacity Act is designed to protect and restore power to vulnerable people who lack capacity. Someone may lack capacity due to a learning disability, dementia, a mental health problem, brain injury or a stroke. The Mental Capacity act has five key principles which should be considered. The principles are as follows:

- 11.32.1 A presumption of capacity: every adult has the right to make their own decisions and should be assumed to have the capacity to do so. Midaye staff cannot assume that someone cannot make a decision for themselves just because they have a particular medical condition or disability.
- 11.32.2 Individuals being supported to make their own decisions: Staff should make every effort to encourage and support people to make the decision for themselves.
- 11.32.3 Unwise decisions: People have the right to make a decision that others may regard as unwise as everyone has their own values, beliefs and preference which may be opposite to other people.

- 11.32.4 Best Interests: Anything being done for or on behalf of a person who lacks mental capacity must be done in their best interest.
- 11.32.5 Less restrictive option: Someone making a decision on or behalf of a person who lacks capacity must consider whether it is possible to decide or act in a way that would interfere less with the person's rights and freedom of actions.
- 11.33 A person lacks capacity in relation to a matter if at the material time he is unable to make a decision for himself in relation to the matter because of an impairment of, or a disturbance in the functioning of, the mind or brain.¹
- 11.34 A person is unable to make a decision if they cannot:
 - 11.34.1 Understand information about the decision to be made
 - 11.34.2 Retain that information in their mind
 - 11.34.3 Use of weigh that information as part of the decision making process
 - 11.34.4 Communicate their decision through speaking, using sign language or by any other means.
- 11.35 If it is determined that someone lacks mental capacity, it is sometimes necessary to deprive them of their liberty in their best interests, to protect them from harm, this is called the Deprivation of Liberty Safeguards, a 2005 amendment to the Mental Capacity Act to protect those who lack the capacity to consent as long as it in their best interest. As such, you can refer someone to safeguarding if it is in their best interest.

Referral Process

- 11.36 Adult social will either accept or decline the referral.

- 11.37 If the referral is denied, Midaye staff reserves the right to review the referral and case with the SO, DSO or Director if the SO and DSO are not available, and potentially lodge a complaint with the Adult Social Care to be reevaluated.
- 11.38 If the referral is accepted, Adult Social Care should arrange for a strategy discussion, which will likely include all relevant professional and services associated in the adult. This meeting will also be determining what risks and what harm the adult can be protected from. A protection plan will be built to promote individual health and to ensure that the adult is safe. It is the responsibility of the care group established at this meeting to ensure plans are followed.

12. ENFORCEMENT

- 12.1. Failure to comply with this policy will be considered in a very serious light and may result in disciplinary action in accordance with Midaye's Disciplinary Policy.
- 12.2. If it becomes known that an employee or volunteer was aware of a safeguarding issue but neglected to report it as per the requirements of this policy, the employee or volunteer will be required to meet with the Director and SO to determine the extent of the failure. The Director may recommend retraining or disciplinary action if this is deemed necessary.
- 12.3. If it becomes known that an employee deliberately covered over a safeguarding issue or hid evidence the employee will be immediately referred for disciplinary action.
- 12.4. If an employee is involved in a safeguarding concern in that they failed to provide reasonable protection for an adult and the adult suffered

harm, the employee shall be referred immediately for disciplinary action and Midaye will involve the police and other authorities as may be necessary.

13. CONTACT DETAILS

13.1. Safeguarding Officer

Philip Quinn

Deputy Director

philip@midaye.org.uk

13.2. Deputy Safeguarding Officer

Sameera Jama

Project Officer

sameera@midaye.org.uk

13.3. Details for contacting a social worker per borough.

- 13.3.1. Hammersmith & Fulham - familyservices@lbhf.gov.uk or tel: 020 8753 6600
- 13.3.2. Kensington and Chelsea - socialservices@rbkc.gov.uk or tel: 020 7361 3013
- 13.3.3. Westminster - accesstochidrensservices@westminster.gov.uk or tel: 020 7641 4000

Revised: December 2022

Next revision date: December 2023

ⁱ GOV.UK Mental Capacity Act Code of Practice Code of practice giving guidance for decisions made under the Mental Capacity Act 2005,
<https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>



SAFEGUARDING (CHILDREN) POLICY

MIDAYE SOMALI DEVELOPMENT NETWORK

Version: **SGC22.03**

Accepted: 16.12.2022

Signature:

A handwritten signature in black ink, consisting of a stylized, cursive letter 'A' followed by a long horizontal stroke.

Date of next review: **December 2023**

1. POLICY STATEMENT

- 1.1. Midaye Somali Development Network (“Midaye”) is a charity that works to improve the lives of families. We believe that every individual who accesses our services should be treated with dignity and respect, have their choice respected and not be forced to do anything against their will.
- 1.2. Midaye Somali Development Network is committed to safeguarding all parents and their children coming into contact with the charity, regardless of gender, ethnicity, disability, sexuality or beliefs.
- 1.3. The aim of this policy is that all Midaye’s staff will be able to, within their working role, recognise any child where there is a safeguarding concern and respond by accessing and following the agreed safeguarding procedure(s) in order to protect that child and to fully comply with all aspects of their responsibility.
- 1.4. A child is defined as anyone who has not yet reached their 18th birthday; this extends to the unborn child.
- 1.5. Midaye Somali Development Network personnel may come into direct and indirect contact with children through the delivery of a range of services.

2. PURPOSE

- 2.1. The purpose of this policy is:
 - 2.1.1. To protect children and young people who benefit from Midaye’s services. This includes the children of adults who use our services.

- 2.1.2. To provide parents, staff and volunteers with the overarching principles that guide our approach to child protection.

3. APPLICATION, AVAILABILITY AND REVIEW

Application

- 3.1. This policy applies to everyone employed directly or indirectly by Midaye Somali Development Network and includes Trustees, staff, volunteers, sessional workers, work placements, trainers and consultants.
- 3.2. This policy should be provided to independent contractors and should be implemented as good practice.
- 3.3. While this policy focuses on the workplace responsibilities of staff, responsibilities to safeguard and promote the welfare of children and vulnerable adults extend to an individual's personal and domestic life.
- 3.4. Safeguarding must be considered everyone's responsibility and all staff who, during the course of their employment have direct or indirect contact with children or vulnerable adults, or who have access to information about them, have a responsibility to safeguard and promote their welfare.

Availability

- 3.5. This policy and the Safeguarding (Vulnerable Adults) policy will be made available to all stakeholders and interested parties through the following channels:

- 3.5.1. In downloadable form on the Midaye website (<http://midaye.org.uk>).
- 3.5.2. By email on request. Please contact the Safeguarding Officer (see section 14 below).
- 3.5.3. As a printed document from the Midaye office (see section 14 below).

Review

- 3.6. This policy must be reviewed, approved and endorsed by the Board of Trustees on an annual basis.
- 3.7. An annual audit of safeguarding concerns, action taken and staff training and support will be conducted annually and safeguarding policy and procedures will be reviewed every three years or in the light of significant changes to best practice or legislation.

4. GUIDANCE AND LEGISLATION

- 4.1. This policy has been written to comply with the guidance and requirements of “Working Together to Safeguard Children” (2015) and Section 11 of the Children Act (2004).
- 4.2. The key national guidance and legislation for LSW regarding the discharge of safeguarding children responsibilities is contained within:
 - 4.2.1. The Children Act 1989
 - 4.2.2. The Children Act 2004

- 4.2.3. Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004
- 4.2.4. Working Together to Safeguard Children 2015
- 4.2.5. Safeguarding Vulnerable People in the Reformed NHS 2013

5. DEFINITION AND NATURE OF SAFEGUARDING

- 5.1. Safeguarding is a broad term which incorporates both promoting the welfare of children and protecting children from harm. It is defined for the purpose of statutory guidance under the children Acts 1989 and 2004 respectively as:
 - 5.1.1. Protecting children from maltreatment;
 - 5.1.2. Preventing impairment of children's health or development;
 - 5.1.3. Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care;
 - 5.1.4. Undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.
- 5.2. The term 'safeguarding' refers to inward facing procedures such as awareness raising, reporting concerns, responding appropriately to issues of abuse and exploitation and preventing harm through sound recruitment and safe programming.

6. PRINCIPLES OF SAFEGUARDING

- 6.1. Midaye's Trustees must practice diligent oversight and work to develop, implement and maintain policies and procedures which:
 - 6.1.1. Set out clear **roles and responsibilities** for safeguarding.
 - 6.1.2. Builds a **culture** that values and respects all children and adults and models appropriate conduct in line with Midaye's values.
 - 6.1.3. Ensures that Midaye practices **safe recruitment** in checking the suitability of staff, freelancers and volunteers to work with vulnerable adults and have contact with children.
 - 6.1.4. Provides a **safe environment** for children, checking the suitability of childcare providers contracted by Midaye, ensuring services are provided in safe environments and that sufficient safeguards are in place.
 - 6.1.5. Raises awareness of **child protection** situations, and implements robust procedures for identifying and reporting concerns or suspected cases.
 - 6.1.6. Raises awareness of how and when to **signpost children (by means of their parents / caregiver)** to appropriate services.

7. ROLES AND RESPONSIBILITIES

Trustees

- 7.1. The Trustees are responsible for ensuring that those benefiting from or working with Midaye are not harmed in any way through contact with it. The Trustees must always act in the best interests of the organisation's

clients and ensure they take all reasonable steps to prevent any harm to them¹¹.

- 7.2. Moreover, the Trustees have a duty of care to the organisation which includes taking the necessary steps to safeguard and take responsibility for any children and vulnerable adults who come into contact with the organisation.
- 7.3. Trustees also have duties to manage risk and to protect the reputation and assets of the charity.
- 7.4. Trustees must ensure that they are equipped to oversee and take responsibility for safeguarding within Midaye by undergoing induction and training as per section 9 below.
- 7.5. Trustees must remain up-to-date in safeguarding matters by receiving regular briefings about safeguarding matters and concerns from the organisation and by undergoing regular refresher training as per section 9 below.

Director

- 7.6. The Director is accountable to Trustees for safeguarding within the organisation and will ensure a clear framework for the management accountability for safeguarding is in operation.
- 7.7. The Director is responsible for ensuring that the Safeguarding Officer and Deputy Safeguarding Officer carry out their responsibilities correctly.
- 7.8. The Director must act as the primary agent in dealing with any safeguarding matter for which there is evidence that either the SO or DSO have acted incorrectly or have a conflict of interest in the course of a safeguarding incident.

- 7.9. The Director shall keep the trustees informed of any important safeguarding matters and shall brief them on safeguarding developments or concerns at least 4 times per year.

Safeguarding Officers

- 7.10. The Trustees must appoint a Safeguarding Officer and a Deputy Safeguarding Officer for the organisation.
- 7.11. The Safeguarding Officer and the Deputy Safeguarding Officer are responsible for:
- 7.11.1. Managing safeguarding incidences including making decisions, setting actions, recording information, liaising with other agencies and social services, and supporting staff during the management of safeguarding incidences.
 - 7.11.2. Arranging and conducting induction training and refresher training for new staff and volunteers.
 - 7.11.3. Ensuring that staff uphold the standards set by Midaye for safeguarding and that staff consistently and correctly follow safeguarding procedures.
 - 7.11.4. Staying up-to-date with the latest developments in safeguarding legislation and best practice. Both the SO and the DSO should undertake safeguarding refresher training on a yearly basis.
 - 7.11.5. Recommending updates and changes to Midaye's safeguarding policies and procedures.
- 7.12. The Safeguarding Officer for Midaye is currently:

Philip Quinn (Deputy Director)

Contact details for the SO may be found in section 14 below.

7.13. The Deputy Safeguarding Officer for Midaye is currently:

Sameera Jama (Project Officer)

Contact details for the DSO may be found in section 14 below.

All Employees and Volunteers

7.14. Individuals within the organisation need to be alert to the potential abuse of children both within their families and also from other sources including abuse by members of that organisation.

8. A CULTURE OF RESPECT

- 8.1. Staff should act, at all times, to protect and uphold the wellbeing of themselves and those around them. Midaye places great value on individual wellbeing and encourages all its stakeholders to embrace and uphold the values of community and respect.
- 8.2. The undermining of or an offence to any individual's safety, health and wellbeing, whether through deliberate action, indirect consequence or negligence, will not be tolerated.
- 8.3. Staff are expected to value diversity and respect the contribution and significance of every other staff member, volunteer, client and any other individual.
- 8.4. Employees are encouraged to raise concerns they may have regarding their working environment, employment practices, and the safety, health

and wellbeing of staff and clients. All such concerns raised will be taken seriously.

- 8.5. Unlawful discrimination, bullying or harassment will not be tolerated.
- 8.6. The Grievance Procedure Policy sets out how to raise concerns both informally and formally, how concerns will be investigated and support for individuals raising a concerns as well as for employees who are the subject of a complaint.
- 8.7. Employees will not suffer any negative treatment for giving constructive criticism or raising a genuine grievance.
- 8.8. Midaye's Whistle Blowing Policy provides guidance for staff on confidential reporting of concerns about wrong doing in the workplace.
- 8.9. Midaye also has a clear policy for staff on IT usage forbidding inappropriate use of materials which includes sexually explicit material, obscene remarks and abusive or discriminatory messages.

9. SAFE RECRUITMENT OF STAFF AND VOLUNTEERS

Recruitment

- 9.1. Midaye's Recruitment and Selection Policy specifies procedures to ensure that thorough checks are made prior to the appointment of staff, volunteers, sessional workers and freelance consultants, in order to help prevent a person using their position to harm a child or vulnerable single parent.
- 9.2. For all staff appointments at Midaye the following vetting checks will be carried out prior to confirming the appointment:

- 9.2.1. Applicants will be asked to complete a Self-Disclosure form to disclose previous spent/unspent convictions and disciplinary or capability procedures.
- 9.2.2. Applicant's will be asked to provide a current, reliable identity document including photographic identity.
- 9.2.3. Applicants will be asked to provide proof of their right to work in the UK.
- 9.2.4. References will be obtained for successful applicants, including a professional reference using a pro-forma template
- 9.2.5. Applicants will be required to provide proof of qualification if this is required for the role
- 9.2.6. A Disclosure and Barring Service (DBS) Check will be carried out on the applicant and they will be asked to provide Midaye with a copy of the result of the check. See clauses 7.6 to 7.11 below.
- 9.3. All appointments to posts involving direct work with children and/or vulnerable adults will be subject to an Enhanced Disclosure from the DBS, and agreement to re-check every 3 years.
- 9.4. The appointment of volunteers, freelance consultants and sessional workers will be subject to the following vetting checks:
 - 9.4.1. Applicants will be asked to complete a Self-Disclosure form to disclose previous spent/unspent convictions and disciplinary or capability procedures.
 - 9.4.2. Applicant's will be asked to provide a current, reliable identity document including photographic identity.
 - 9.4.3. References will be obtained for successful applicants, including a professional reference using a pro-forma template

- 9.4.4. A Disclosure and Barring Service (DBS) Check will be carried out on the applicant and they will be asked to provide Midaye with a copy of the result of the check. See clauses 7.6 to 7.11 below.

Induction

- 9.5. Midaye's will subject every new trustee, employee and volunteers to a thorough induction process within 6 weeks of the start of their engagement. This will include:
- 9.5.1. A requirement that the new staff member / volunteer reads key organisation policies and acknowledges their understanding and acceptance of these policies. These policies will include but are not limited to:
- 9.5.1.1. Safeguarding (Children) Policy
 - 9.5.1.2. Safeguarding (Vulnerable Adults) Policy
 - 9.5.1.3. Code of Behaviour
 - 9.5.1.4. Complaints Policy
 - 9.5.1.5. Confidentiality Policy
 - 9.5.1.6. Customer Care Policy
 - 9.5.1.7. Data Protection Policy
 - 9.5.1.8. Equality and Diversity Policy
 - 9.5.1.9. Health and Safety Policy
 - 9.5.1.10. Lone Worker Policy
- 9.5.2. A thorough briefing on Safeguarding at Midaye with a specific emphasis on Midaye's context, circumstances likely to present significant safeguarding potential, and on the practical procedures to be followed in the case of a safeguarding concern.

- 9.5.3. Obtaining safeguarding training or refresher training from an accredited external provider, preferably the Local Children's Safeguarding Board (LSCB - Royal Borough of Kensington and Chelsea, City of Westminster, Hammersmith & Fulham) or NSPCC (National Society for the Prevention of Cruelty to Children).
- 9.5.4. Staff working directly with families should receive additional training to identify signs of abuse and know how to report concerns.

DBS Checks

- 9.6. DBS checks must be obtained for every staff member, trustee and volunteer.
- 9.7. DBS checks must be renewed every 3 years.
- 9.8. Any employee or volunteer who comes into regular contact with children or vulnerable adults in the course of their work must be subject to an Enhanced DBS check.
- 9.9. The SO / DSO and the Office Administrator will be responsible for managing the obtaining and renewal of DBS check certificates.
- 9.10. Midaye must keep a file with hard copies of employee and volunteer DBS check certificates. This file should be kept in a locked cabinet and access to this file should be restricted to the Trustees, Director, SO, DSO and Office Administrator.
- 9.11. Employees and volunteers are required to inform the Director within 5 working days should they be subject to an indictment, court ruling, legal decision or incident which may result in a material change to a DBS Check.

Training and Appraisal

- 9.12. All staff, trustees and current volunteers should participate in refresher safeguarding training at least once per year. This refresher training should include:
- 9.12.1. Refresher training concerning the basic principles of safeguarding. This training should be provided by an accredited organisation or individual, preferably the LSCB or NSPCC.
 - 9.12.2. Updates regarding any developments in legislation or best practice.
 - 9.12.3. Refresher training regarding internal procedures and requirements.
- 9.13. All employees at Midaye will be subject to annual staff appraisal process to provide an assessment of the employee's work and to help identify support and training needs.
- 9.14. All staff should receive regular, ongoing management support and feedback on performance and to help identify concerns that the employee might have.

10. CREATING A SAFE ENVIRONMENT

- 10.1. Midaye will ensure that all physical spaces in which services or activities are delivered comply with the stipulations of its Health and Safety policy and do not pose a risk to the physical wellbeing of children.
- 10.2. The Director will be responsible for ensuring that Midaye's service delivery spaces are subject to a health and safety audit on a six monthly basis.

11. CHILD PROTECTION

Contact with children

- 11.1. There are a number of situations where contact with children might occur including:
 - 11.1.1. At Midaye's office if a parent brings a child with them when they are seeking assistance, accessing services or attending an appointment;
 - 11.1.2. During home visits;
 - 11.1.3. At events and workshops where parents may bring children with to attend;
 - 11.1.4. At services which focus specifically on children, such as classes or activities for children.
- 11.2. Staff may also sometimes observe directly, infer from statements made or hear information that raises concerns about a child's welfare.
- 11.3. Midaye's role in protecting children is to pick up cues that a child may be in danger from harm or have been harmed and pass this information to those who can assess the situation and act if necessary.
- 11.4. Staff are required to be aware of the different types and signs of abuse and the circumstances in which it can occur (see Guidance on recognising abuse).

Duty to report concerns

- 11.5. All concerns and allegations of abuse will be taken seriously and responded to appropriately (this may require a referral to children's services and / or emergencies, the Police).

- 11.6. Staff have a duty to report any concern they may have. Procedures for making such a report are detailed in section 12 below.
- 11.7. Failure to comply with these responsibilities will be seen as a serious matter which may lead to disciplinary action.

Confidentiality

- 11.8. Recognising that “the welfare of the child is paramount” Children’s Act 1989, considerations of confidentiality which might apply to other situations should not be allowed to override the right of children to be protected from harm. Midaye Somali Development Network’s Confidentiality policy therefore requires staff to act in any situation in which a child is at risk and in particular situations when a vulnerable adult is at risk.
- 11.9. While all staff should be open to the possible abuse of vulnerable adults in all situations, we envisage that there will be very few instances where staff will need to report adult protection concerns. The situations where this is most likely to happen and where staff will be expected to act are
 - 11.9.1. an adult has been assessed as being at high risk of suicide (see guidance on reporting concerns)
 - 11.9.2. There is a significant risk that the adult will seriously physically harm another person.
- 11.10. It is good practice to be as open and honest as possible with parents/carers about any concerns. However, you **MUST NOT** discuss your concerns with parents/carers in the following circumstances:
 - 11.10.1. Where Sexual Abuse or sexual exploitation is suspected
 - 11.10.2. Where organised or multiple abuse is suspected

- 11.10.3. Where there are concerns a child may be at risk of Female Genital Mutilation
 - 11.10.4. Where fabricated or induced illness (previously known as Munchausen Syndrome by proxy) is suspected
 - 11.10.5. Where contacting parents/carers would place a child, yourself or others at immediate risk
- 11.11. These decisions should not be taken in isolation. Always consult with your senior manager/line manager.
- 11.12. In respect of vulnerable adults all action, including referrals to Social Services and the police, must be subject to the consent of the service user. In every situation it will be assumed that a person can make their own decisions and action will only be taken in the absence of consent from the service user where;
- 11.12.1. they or others are in physical danger
 - 11.12.2. after seeking advice from an appropriate agency you have been advised to report the concern as it is believed that the vulnerable adult is unable/incapable of making an informed decision for himself or herself.
- 11.13. Staff should never give absolute guarantees of confidentiality to anyone wishing to tell them about something serious.
- 11.14. Midaye's complaints procedure is an important way in which concerns can be surfaced and should be easily accessible to clients.

12. GUIDANCE FOR RESPONDING TO CONCERNS

- 12.1. Midaye does not have appropriate expertise to deal directly with actual safeguarding issues, although our intervention may be helpful, nor does

it provide counselling support, so it is vital that staff understand how to identify signs and signpost effectively.

- 12.2. Midaye will support frontline staff to recognise the signs of distress, to handle this and their own reactions, and to signpost clients to services that can provide support.
- 12.3. Midaye will provide up to date signposting information for use by staff and volunteers which details organisations that can be contacted to support parents in a range of situations ranging from domestic violence, to mental health, drugs and alcohol and child safety.
- 12.4. Staff should be empowered to recognise and act:
 - 12.4.1. On indicators of abuse or potential abuse involving children
 - 12.4.2. Where there are concerns about a child's welfare.
- 12.5. There is an expected responsibility for all members of the organisation to respond to any suspected or actual abuse of a child in accordance with these procedures.
- 12.6. In an emergency, the **police** should always be contacted immediately on **999**.
- 12.7. Staff should follow *Guidance: acting on safeguarding concerns* to help them assess the risk of harm and take action if required.
- 12.8. All incidents should be recorded on the recording form and emailed to the safeguarding manager and copied to the CEO and Safeguarding lead manager. This form will be stored securely in compliance with relevant legislation and kept in accordance with the archive policy.
- 12.9. Allegations of abuse or concerns raised against members of staff, volunteers, trainers or trustees, will always be treated seriously.

Hearing directly about abuse or neglect

12.10. It is recognised that a child may seek out a staff member or volunteer to share information about abuse or neglect, or may talk spontaneously individually or in groups when a staff member / volunteer is present. In these situations, the following should be observed:

- 12.10.1. Listen carefully to the child. DO NOT directly question the child
- 12.10.2. Give the child time and attention.
- 12.10.3. Allow the child to give a spontaneous account; do not stop a child who is freely recalling significant events.
- 12.10.4. Make an accurate record of the information that has been given taking care to record the timing, setting and people present, the child's presentation as well as what was said. Do not throw this away as it may later be needed as evidence.
- 12.10.5. Use the child's adult's own words where possible.
- 12.10.6. Explain that you cannot promise not to speak to others about the information they have shared - do not offer false confidentiality.
- 12.10.7. Reassure the child that:
 - 12.10.7.1. they have done the right thing in telling you;
 - 12.10.7.2. they have not done anything wrong;
- 12.10.8. Tell the child what you are going to do next and explain that you will need to get help to keep him/her safe.
- 12.10.9. DO NOT ask the child to repeat his or her account of events to anyone.

Observing behaviour or circumstances which raise concerns

- 12.11. Because of your observations of, or information received you may become concerned about a child who has not spoken to you.

- 12.11.1. It is good practice to ask a child why they are upset or how a cut or bruise was caused, or respond to a child wanting to talk to you. This practice can help clarify vague concerns and result in appropriate action.

Internal reporting procedures

- 12.12. Employees and staff should always follow the principle of exercising caution above all else. They must be encouraged to speak about a concern rather than putting it off, no matter how trifling or insignificant it might seem.
- 12.13. Employees and volunteers with a safeguarding concern should contact the SO immediately. If the SO is unavailable they should contact the DSO and if the DSO is unavailable, they should contact the Director.
- 12.14. Should the concerned employee not be able to contact the SO, the DSO or the Director they should contact the local Social Care Duty & Investigation Team in the area where the child resides.
- 12.15. The SO or DSO will immediately register the new concern on Midaye's Safeguarding Register, recording all the available details.
- 12.16. The SO or DSO must endeavour to obtain as much relevant and helpful information on the case in question from the employee or volunteer making the report. The SO or DSO should then use this information to determine the validity and seriousness of the case. They should always consult with the Director and SO/DSO and the local Social Care Duty & Investigation Team in the area where the child resides or other qualified experts if they have any doubts at all.
- 12.17. The SO or DSO will assign a safeguarding concern level to the case (red, amber or green) on the Safeguarding Register depending on the

risk-level of the circumstance. This concern level may be up- or downgraded as the case progresses.

- 12.18. The SO or DSO will at their discretion and/or in consultation with other management and/or social workers, assign a response category to the case on the Safeguarding Register: emergency, reporting, supporting, investigating, follow-up. This response category must be altered as the case progresses and Midaye's involvement in the case changes.
- 12.19. The SO or DSO will include an action decision for the case on the Safeguarding Register and assign a date and, if necessary, a time by which the action must be accomplished. The case must be revisited on the Safeguarding Register before the date (and possibly time) indicated to record whether the action was accomplished or not. If it has not been accomplished a reason must be recorded. The SO or DSO will, at this point, then specify a new action decision repeating the process described above.
- 12.20. Action decisions will vary from case to case but should generally involve one or more of the following:
 - 12.20.1. obtaining further information
 - 12.20.2. reporting the case to a competent authority
 - 12.20.3. supporting the affected individuals
- 12.21. The SO or DSO will indicate clearly on the Safeguarding Register to whom the case has been recorded and will include details of how and when the report was made and whether the report was acknowledged.
- 12.22. The SO or DSO will ensure that, should they deem a case to be of significant enough validity, it is handed as soon as possible to an authority capable of responding to it appropriately.

- 12.23. The SO or DSO will keep every case on the Safeguarding Register open until they have been entirely satisfied that the concern has been completely mitigated or if the case has been handed to a competent authority and there is no role that Midaye can provide at all in the circumstances.
- 12.24. The SO or DSO will provide regular briefings to the Director on the state of the cases open on the Safeguarding Register. This should be done weekly if there are high concern level cases (red) open and otherwise monthly.

Consulting with Social Services

- 12.25. Should the Safeguarding Officer or Deputy Safeguarding Officer consider it necessary, they should consult with the local Social Care Duty & Investigation Team in the area where the child resides. This may be done for any case at the Safeguarding Officer / Deputy Safeguarding Officer's discretion, however it must be considered necessary in the following circumstances:
- 12.25.1. when the SO / DSO remains unsure after internal consultation as to whether child protection concerns exist
- 12.25.2. when there is disagreement as to whether child adult protection concerns exist
- 12.25.3. when the concerns relate to any member of the organisation
- 12.26. If, in an urgent safeguarding situation, the staff member or volunteer presented with the safeguarding circumstance is unable to get in touch with the SO, the DSO or the Director, they should contact the local Social Care Duty & Investigation Team in the area where the child resides themselves. In such a case the staff member or volunteer in

question must still report to the SO / DSO as soon as it is possible to do so.

Making a Referral

- 12.27. A referral involves giving Social Care or the Police information about concerns relating to an individual or family in order that enquiries can be undertaken by the appropriate agency followed by any necessary action.
- 12.28. Parents/carers should be informed if a referral is being made except in the circumstances outlined in section 2.9.
- 12.29. However, inability to inform parents for any reason should not prevent a referral being made. It would then become a joint decision with Social Care about how and when the parents should be approached and by whom.
- 12.29.1. If your concern is about harm or risk of harm from a family member or someone known to the children and/or vulnerable adults, you should make a telephone referral to the Social Care Duty & Investigation Team in the area where the child and/or vulnerable adult resides (see Section 13).
- 12.29.2. If your concern is about harm or risk of harm from someone not known to the child and/or vulnerable adult family, you should make a telephone referral directly to the Police.
- 12.29.3. If your concern is that a child and/or vulnerable adult or their family need additional help or support, you should contact the appropriate **Local Safeguarding Children Board**.
The Local Safeguarding Children Board makes sure that all organisations work together to promote the safety of children

and young people in Hammersmith and Fulham, Kensington and Chelsea and Westminster.

Digital and social media risks

- 12.30. The protection of children must extend to the digital realm and social media.
- 12.31. The use of internet-enabled devices and the internet at Midaye's premises and/or during the delivery of any of Midaye's services irrespective of its location must be in line with Midaye's ICT Policy.
- 12.32. If Midaye is delivering an online service via a video conferencing or virtual meeting medium (such as Zoom, Microsoft Teams, WhatsApp video calling, etc.) every effort must be made to ensure that children who are present, either as direct participants or as bystanders or accidental witnesses, are not exposed to any action, verbal or physical behaviour, or the presence of any object or scene which may accidentally or deliberately be visible or audible via the video conferencing medium and which may place them at risk. Midaye staff hosting or officiating such meetings must follow the protocols which Midaye may produce from time to time to regulate and safeguard the delivery thereof.
- 12.33. Children participating in Midaye's services or present whilst their parent/s access Midaye's services or engage with Midaye in any form or manner must be supervised if they have access to an internet-enabled device. If they are in the immediate care of their parents, Midaye staff and volunteers must encourage the parents to provide active supervision. If they are in the care of Midaye staff or volunteers they must receive constant active supervision in order to ensure that

Midaye's ICT Policy is properly adhered to and no abuse or detrimental incident can occur.

- 12.34. Midaye must endeavour to take an active role in helping children and their parents become educated about the risks and dangers of internet and social media usage and empower them wherever possible to mitigate these risks effectively.

13. ENFORCEMENT

- 13.1. Failure to comply with this policy will be considered in a very serious light and may result in disciplinary action in accordance with Midaye's Disciplinary Policy.
- 13.2. If it becomes known that an employee or volunteer was aware of a safeguarding issue but neglected to report it as per the requirements of this policy the employee or volunteer will be required to meet with the Director and SO to determine the extent of the failure. The Director may recommend retraining or disciplinary action if this is deemed necessary.
- 13.3. If it becomes known that an employee deliberately covered over a safeguarding issue or hid evidence the employee will be immediately referred for disciplinary action.
- 13.4. If an employee is involved in a safeguarding concern in that they failed to provide reasonable protection for a child and the child suffered harm whilst in their care or perpetrated harm on a child directly, the employee shall be referred immediately for disciplinary action and Midaye will involve the police and other authorities as may be necessary.

14. CONTACT DETAILS

14.1. Safeguarding Officer

Philip Quinn

Deputy Director

philip@midaye.org.uk

14.2. Deputy Safeguarding Officer

Sameera Jama

Project Officer

sameera@midaye.org.uk

14.3. Details for contacting a social worker per borough.

14.3.1. Hammersmith & Fulham - familyservices@lbhf.gov.uk or tel: 020

8753 6600

14.3.2. Kensington and Chelsea - socialservices@rbkc.gov.uk or tel: 020

7361 3013

14.3.3. Westminster - accesstochildrenservices@westminster.gov.uk

or tel: 020 7641 4000

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