

Safeguarding Adults and Children



Policy and Procedures

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1. Policy Statement

The Trust:

- Strongly believes that all children, young people and adults at risk have the right to protection from all forms of abuse and harm, including sexual abuse, harassment, exploitation, neglect, and any other harm that may impact their safety and wellbeing
- Has a zero-tolerance policy for any abusive or harassing behaviour across all its services and activities
- Is committed to making adult safeguarding personal
- Will actively promote the welfare of all children, young people and adults at risk by working to the best possible safeguarding standards across all its services and activities, with appropriate arrangements in place to safeguard and protect
- Recognises that all employees, workers and volunteers have a key safeguarding role to play and is committed to ensuring that everyone, individuals and organisations, who are involved with the Trust, are clear about their roles and responsibilities
- Will work with their colleagues in social care, health and the police, in keeping people safe. The Trust is well placed to identify people with care and support needs and will co-operate, liaise and work with the statutory agencies at all times
- Values and nurtures its links between local public protection forums such as Multi agency risk assessment conferences (MARACs), multi-agency public protection arrangements (MAPPAs), Health and wellbeing boards and Community safety partnerships

This policy relates to people supported by the Trust. Should a member of staff have any concern that they or a colleague is or has been subject to harm or abuse in the workplace then they should raise this with a manager immediately and refer to the Trust's Anti-Bullying and Abusive Conduct Policy in the first instance.

2. About This Policy

This policy is intended to be the overarching strategic control safeguarding document for all of the Trust's services. It applies to, and must be adhered by all employees, workers and volunteers including agency staff.

- It is reviewed by the policy owner every three years. Amendments are submitted to the Board of Trustees for approval.
- It is also updated by the Trust's Safeguarding Best Practice Group whenever there are changes in law, statutory guidance, practice, service provision or if near miss events occur. Any changes are then approved by the policy owner and submitted to the Board of Trustees for approval.
- All employees, workers and volunteers will be given a full induction, relevant to their job role and service, and have access to this full policy upon appointment. They will also undertake supervision and /or safeguarding training as relevant to their job role. Everyone will confirm to say they have read, understood and will comply with the Trust's safeguarding arrangements.

- The Trust publishes this policy on its website [Safeguarding \(papworthtrust.org.uk\)](https://www.papworthtrust.org.uk) and disseminates it as appropriate to all who come into contact with the Trust.
- Independent associates, contractors, freelancers and partners are expected to have their own robust safeguarding policies, procedures and safer recruitment arrangements but will comply with this policy when working for the Trust.
- Failure to comply with this policy will be considered a disciplinary matter, or a breach of contract, and be dealt with accordingly. For volunteers this could result in their agreement with the Trust ending.

3. Context

Papworth Trust is a disability charity founded in 1917, that delivers vital housing, employment, care, employment, training and leisure services for disabled people. Today the Trust has a turnover of £13m, employs c250 staff and 40 active volunteers. It operates across Cambridgeshire, Essex and Suffolk, with some additional housing in the surrounding areas. Our vision is a world where disabled people are seen for who they are, and our mission is for disabled people to have equality, choice and independence.

4. Legal Context and Background

This policy complies with the [Care Act 2014](#) and [associated statutory](#) guidance, the [Mental Capacity Act 2005](#), the Children Acts [1989](#) and [2004](#), [Working Together to Safeguard Children](#), [What to do if you're worried a child is being abused](#), other relevant [adult and child safeguarding](#) legislation and statutory guidance, the [relevant Partnership's and Board's](#) policies and procedures where the Trust is based and works; the [Care Quality Commission \(CQC\)](#) framework for inspection; and the requirements of [Homes England](#), the [Regulator of Social Housing \(RSH\)](#) and the [Charity Commission](#).

5. The Six Principles of Adult Safeguarding:

- Empowerment: People are supported and encouraged to make their own decisions and informed consent
- Prevention: It is better to take action before harm occurs
- Proportionality The least intrusive response appropriate to the risk presented
- Protection: Support and representation for those in greatest need
- Partnership: Services offer local solutions through working closely with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse
- Accountability: Accountability and transparency in delivering safeguarding

6. Mental Capacity

Mental capacity is defined in the Mental Capacity Act 2005 and the 'Mental Capacity Act, Code of Practice' supporting statutory guidance. Safeguarding at the Trust respects the autonomy and independence of all our customers and this policy, and our associated procedures include the presumption of mental capacity. Our customers must be assumed to have capacity to make decisions that affect them, and all practical steps should be taken to help them make that decision. Mental capacity should be assessed in relation to the particular decision that needs to be made. Therefore whether a person has mental capacity to make a particular decision or not has to be considered on an individual basis in the light of the circumstances at the time.

Consent driven approach means staff and volunteers should not act without consultation and the consent from the adult at risk unless it has been properly assessed that the adult does not have the mental capacity to make that decision or in order to act in the vital interest of others (this may include an emergency situation or in the interest of the public to prevent the abuse or neglect of others).

The following five statutory principles of Mental Capacity must be applied in all cases:

- Always assume a person has capacity unless it is assessed otherwise
- Take all practical steps to enable people to make their own decisions
- Do not assume incapacity because someone makes an unwise decision
- Always act, or ensure a decision is made for a person without capacity in their best interests Carefully consider actions to ensure the least restrictive option is taken

7. Partners:

In line with [Charity Commission guidance](#), all [partner agreements](#) for independent associates, contractors, freelancers and partners will include signed confirmation, as relevant, that they:

- Carry out criminal records checks for their employees, workers and volunteers, as appropriate
- Train all employees, workers and volunteers in safeguarding at the appropriate level for their job role
- Will inform the Trust, without delay, if they identify any safeguarding concerns, allegations of abuse or serious incidents when delivering activities or services commissioned by the Trust.

8. Named Persons for Safeguarding

Job Role and Named Person	Contact details
Trustee Vanessa Stanislas	Email: vanessa.stanislas@papworthtrust.org.uk Tel: 01480 573498
Strategic Lead Karryn Dixon Director of Operations	Email: karryn.dixon@papworthtrust.org.uk Tel: 07514 670173
Chair of the Safeguarding Best Practice Group Karryn Dixon Director of Operations	Email: karryn.dixon@papworthtrust.org.uk Tel: 07514 670173
Operational Safeguarding Leads	A list of Safeguarding Leads can be located under the Safeguarding area on SharePoint
Director of People and Culture Sarah Harvey	Email: sarah.harvey@papworthtrust.org.uk Tel: 07707283478

Responsibilities of Named persons:

The Named Trustee for Safeguarding will:

- Be the point of escalation in the event of significant harm or death to a customer, and / or significant risk to the organisation
- Be the point of contact for Whistleblowing
- Review quarterly reporting of safeguarding, training and best practice, and DBS compliance across the Trust
- Be responsible for reviewing the Safeguarding Policy and understand the monitoring that the Trust does to see whether policies and procedures are effective.
- Be a point of contact for staff or volunteers if someone wishes to complain about a lack of action in relation to safeguarding concerns.
- Work with the chair, CEO and Strategic safeguarding lead where there are serious safeguarding cases.
- Ensure that as Lead Trustee for safeguarding, they either have the required knowledge, skills, and experience or are supported to develop these.

The Strategic Lead for Safeguarding will:

- Be the point of escalation for serious safeguarding incidents, concerns or whistleblowing.
- Ensure that the Safeguarding Trustee and Chair of Trustees is made aware of any serious safeguarding incidents or concerns that relates to Papworth Trust.
- Ensure this policy is kept up to date by conducting the 3-yearly review of the safeguarding Policy, or sooner as required if legislation changes or serious incidents occur.
- Ensure that there is a 6 monthly safeguarding report to the Board of Trustees.

- Monitor and review any safeguarding concerns about any of the Trust's activities.
- Liaise with external statutory agencies as required.
- Ensure any needs for resources are highlighted at budget setting to maintain robust standards of safeguarding across the Trust.
- Call for audits of qualitative and quantitative data (either internal or external) when they're needed.
- Learn from case reviews locally and nationally, to improve your organisation's policies, procedures and practices.
- Be a point of contact for staff or volunteers if someone wishes to complain about a lack of action in relation to safeguarding concerns.
- Support the trustees in developing their individual and collective understanding of safeguarding.

The Chair of the Safeguarding Best Practice Group will:

- Champion safeguarding throughout the organisation.
See '[Safeguarding Best Practice Terms of Reference](#)'
- Report monthly to Executive Team on Safeguarding.

The Safeguarding Best Practice Group will:

See '[Safeguarding Best Practice Terms of Reference](#)'

The Operational Safeguarding Leads will:

- Champion safeguarding throughout the organisation.
- listen and offer advice and support to all employees, workers and volunteers when needed.
- ensure staff and volunteers report and record their concerns appropriately on the relevant Trust's Safeguarding Concern Form stored on SharePoint ([Safeguarding Concern form - SG1](#)) on the same working day, factually, timed, dated and signed, including job role;
- liaise with statutory agencies and / or the police in relation to safeguarding referrals and co-operate with any subsequent requests for information or action from any agencies;
- Attend meetings, activities, projects to engage with staff, volunteers and beneficiaries to understand safeguarding on the ground
- Support regular safeguarding updates for staff, volunteers and beneficiaries.

The Director of People and Culture will:

Oversee safeguarding allegations against staff or volunteers, together with CEO and Strategic Safeguarding lead.

Procedures

1. Expectations

Regardless of role, all employees, workers and volunteers will work to the highest standards of safeguarding practice, considering any specific issues listed below which are included in their work.

Everyone involved with the Trust will:

- Treat others with respect, fairness and dignity at all times, and expect to be treated in the same way
- Keep their private and professional relationships with customers and the public separate, including when using social media
- Have no personal contact with any customers and/or their families, with whom they work professionally
- Declare any conflicts of interest between their duties and personal interests, financial or otherwise
- Ensure their line manager knows, whenever they are lone working or making home visits
- Exercise caution when discussing sensitive issues with customers; especially children or adults at risk
- Report any safeguarding or welfare concerns without delay
- Report any safeguarding or welfare concerns about the behaviour of colleagues directly to the relevant Operational Lead for Safeguarding without delay.
- Treat and handle safeguarding information securely at all times, when storing, sharing and accessing the information. The access and sharing of safeguarding information must be on a strict need to know basis. The Trust's Data Protection and Information Security Policies allows for sharing, disclosure and transfer of data where there is a legal reason for doing so.
- Report all gifts to their line manager
- Speak with their line manager immediately if they consider their work may put them into a position that might lead to an allegation of professional misconduct
- Exercise their right to whistle blow if they are concerned safeguarding issues are being mismanaged or ignored within the Trust
- Maintain confidentiality at all times, including with family and friends.

2. Whistleblowing

All employees, workers and volunteers will know how to “whistle-blow” externally in line with the Trust’s Whistleblowing Policy if they have concerns that the Trust is not addressing safeguarding issues appropriately or they feel unable to raise the matter internally. They can do this by referring directly:

- To the Police if a crime has or may have been committed.
- To local [Adult Social Care Services](#) or [Child Social Care Services](#)

- To the Local Authority Designated Officer (LADO) for concerns about any employee, worker or volunteer working with under 18's
- to the Charity Commission for England and Wales by email whistleblowing@charitycommission.gov.uk or Tel: 0800 055 7214 or,
- for CQC services, the [CQC direct](https://www.cqc.gov.uk), enquiries@cqc.org.uk or Tel: 03000 616161 or via the [Speak Up](https://www.speakup.gov.uk) helpline Tel: 08000 724 725

3. Responding to Child and Adult Safeguarding Concerns

Employees, workers or volunteers may become concerned by:

- Their own observations
- Being told by another person that they have concerns
- What the child or adult says
- What others say
- Any complaints, including anonymous.

Handling Disclosures

A disclosure may be made verbally or by the behaviour of a child, young person or an adult at risk and it is important for everyone to remember the following:

- Keep calm
- Reassure them that they were right to tell you.
- Consider who else can hear.
- Listen carefully.
- Do not ask leading questions or promise confidentiality
- Factually record the child/adult's words as accurately as possible, on the Safeguarding Concern Form [Safeguarding Concern form - SG1](#) and on the same day; timed, dated & signed, including job role.

Actions to be Taken

If an employee, worker or volunteer has a concern, they should:

- Immediately assess if the person affected is safe from any further harm
- In an emergency, or if it is felt someone is in immediate danger, call 999, telling the emergency service that the person is a person with care and support needs where applicable.
- Inform their Operational Safeguarding Lead (or the Strategic Lead for Safeguarding if no other Operational Safeguarding Lead is available or a Safeguarding Lead is implicated. Additionally, if the Strategic Lead for Safeguarding is implicated, the CEO should be contacted)
- Not investigate
- Preserve any evidence (if relevant)
- Factually record their concerns in writing as soon as possible, on the same day, on the Trust's [Safeguarding Concern form - SG1](#), co-operate with any following requests for action from the Operational Safeguarding Lead or external statutory agencies. These records will be recorded factually with only the information already known, by

the person with the concern and will include their name, job role, service and be timed, dated and signed.

- Maintain confidentiality at all times, including with colleagues, family and friends.

The Operational Safeguarding Lead (or Strategic Lead, or CEO) will directly contact:

- For child abuse allegations against an employee, worker or volunteer, the Local Authority Designated Officer (LADO) who will co-ordinate the next steps
- For adult abuse allegations against an employee, worker or volunteer in a Position of Trust (PoT) Adult Social Services who will co-ordinate the next steps
- In the case of an emergency, or if it is felt someone is in immediate danger, the Police will be contacted on 999.

They will also:

- Ensure the person with the direct concern has factually recorded their concerns in writing and on the same day on the Trust's SG1 form which is timed, dated and signed, including job role, and ensure that this is recorded on the Safeguarding Log within 48 hours of becoming aware.
- Maintain an accurate chronology of all discussions held and actions taken
- Inform the Strategic Lead for Safeguarding (or the CEO if the Strategic Lead is implicated)
- Attend multi-agency meetings to discuss the case if requested
- Liaise with the statutory agencies with regards to report writing, offering support and services where relevant
- Co-operate with any Social Service or police investigation.

External party safeguarding referrals

If it is known that an external agency (e.g. Ambulance service, Police, NHS or any other organisation) or a private individual (e.g. family, friend or member of the public) have raised a local authority safeguarding referral relating to a customer, an internal safeguarding log entry is required to be completed in line with the organisation log entry requirements. This is to ensure that the organisation is aware of all safeguarding referrals that could affect the customer and understand how we provide support to this customer moving forward. As well as adjust or amend any risk assessments the organisation may have.

Children or young people referrals

When there is a referral that relates to a child or young person there should be specific consideration as to the member of staff who is completing the referral and conducting the 48hr review, as identified on the Safeguarding Leads list, this is to ensure only staff who are appropriately trained complete this. The purpose of this is to maximise the understanding and effectiveness of the referral and process moving forward to best support the child or young person involved.

Support for staff

It is the line manager responsibility to ensure that there is appropriate welfare support in place to support all staff involved within any safeguarding referrals and post incident support. This is to help mitigate against any adverse effects of staff being involved within safeguarding referrals.

Preserving evidence

- What is done or not done, in the time prior to the police arriving on the scene, may make all the difference to their investigation
- Ensure that the victim and the alleged perpetrator do not come into contact with each other once the allegation has been made, this should prevent any cross contamination of evidence
- Secure the scene and do not allow anyone to enter until the police arrive, with the exception of medical staff if the victim requires medical attention
- To enable the police to investigate effectively it is crucial that evidence is preserved, if in doubt consult the police on the telephone prior to their arrival
- When dealing with allegations of financial abuse or other irregularities, documentation should not be removed or altered in any way
- Where possible, leave things as they are, if anything has to be handled, keep this to a minimum, do not clean up, do not touch anything you do not have to.
- Leave weapons where they are unless they are handed over, if so, take care not to destroy fingerprints if possible
- Do not wash anything or in any way remove blood, fibres etc
- Preserve the clothing and footwear of the victim, handle them as little as possible
- Note in writing the state of the clothing of both the alleged victim and the alleged perpetrator, note injuries in writing, make written notes the conditions and attitudes of the people involved in the incident, this should be done as soon as practicably possible
- The police will decide how to preserve any obvious evidence such as footprints or fingerprints or any other evidence, which may have been left behind by the suspect
- If an allegation of sexual abuse is disclosed days after the alleged offence, it may still be possible to collect forensic evidence, do not assume that it is too late, let the police decide
- **OR IN CASES when the alleged victim does not want to involve the police further** contact the local [Sexual Assault Referral Centre \(SARC\)](#) for advice, help and support

Important: It is important to remember that any concern may potentially lead to legal action at any point. The reliance a court will place upon the information obtained from the people involved (particularly from a child) may be reduced if it is known that someone has discussed the issues with the child or adult outside the normal multi-agency investigation process.

All employees, workers and volunteers are expected to report to their Operational Safeguarding Lead. This is to ensure the correct procedures are followed in line with this policy, records are kept, risk assessed, and all cases are monitored by the relevant managers. Consideration must be given to service specific requirements to report to external commissioners.

The Safeguarding Process flow chart is displayed in our sites and available on SharePoint for all staff to access.

4. Responding to eSafety Concerns

Safeguarding and modern technology.

All safeguarding concerns will be dealt with in line with this policy, particularly in terms of referral and recording procedures

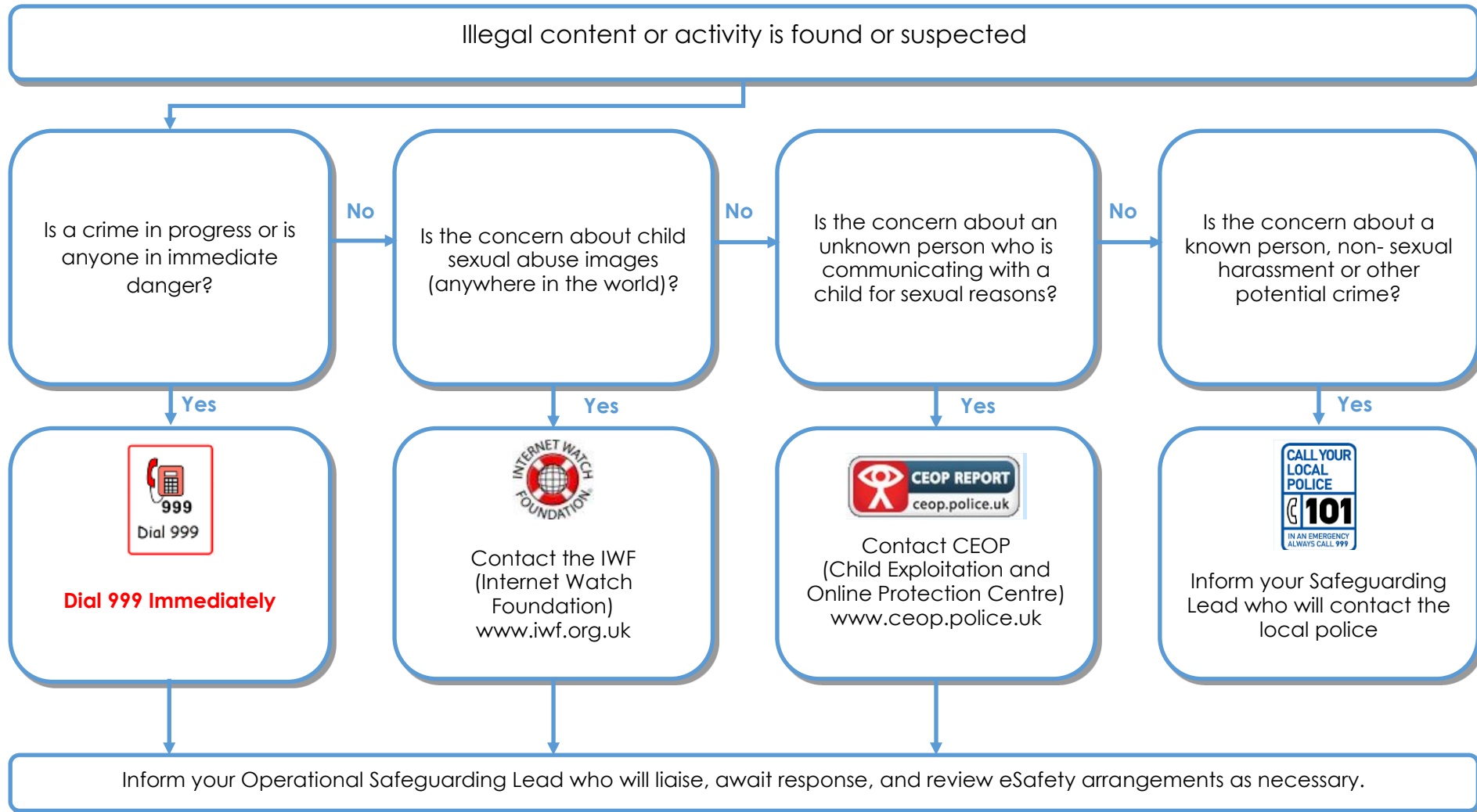
All employees, workers and volunteers will:

- Act professionally and within the law at all times
- Only interact with “at risk” groups with whom they come into contact at work via official Trust media, not personal
- Report any concerns without delay in line with the eSafety concerns: flowchart for referral below and then notify the Operational Safeguarding Lead of their concerns and actions without delay
- Record their concerns and actions on the Safeguarding Concern Form [Safeguarding Concern form - SGI](#); ensuring it is timed, dated and signed, including name and job role.

Examples of things that may give cause for concern may include an employee, worker, or volunteer who:

- Befriends or communicates with members of the public who they work with, especially children, young people and adults at risk, by their personal phone, online, by messaging and social media etc.
- Is secretive about what they are doing and who they are meeting
- Takes images of the Trust 's activities with their own phone or device without permission of their line manager
- Does not seek consent in-line with Trust policy for filming or posting images on social media
- Views adult pornography, extremist or other offensive or illegal websites and /or material at work
- Views child sexual abuse images at any time
- Promotes discrimination, illegal acts or racial or religious hatred of any kind
- Shares confidential or sensitive information with others who are not authorised to know
- Circulates or messages any information which may be offensive.

5. Flowchart for eSafety Referrals



6. Safeguarding Allegations and Complaints against Trust staff or volunteers

When there is a safeguarding concern, complaint or allegation about the behaviour of any employee, worker or volunteer the People Services Department will:

- Adhere to the Local Authority Designated Officer (LADO); or, for alleged adult abuse by an employee, worker or volunteer, Adult Social Services' advice
- Consider possible suspension of the employee, worker or volunteer.
- For those in Regulated Activity or Regulated Work (those who have criminal records checks at Enhanced DBS level): refer to any relevant [professional regulators](#) including the Disclosure and Barring Service within 5 days of the closure of the case;

This includes, but is not limited to an individual who has:

- Behaved in a way that has harmed, or may have harmed a child or adult at risk
- Possibly committed a criminal offence against or related to a child or adult at risk; or
- Behaved towards a child or adult at risk in a way that indicates they may pose a risk of harm to vulnerable groups.

The decision regarding the Outcome is based on the "Balance of Probabilities."

- Substantiated: there is sufficient identifiable evidence to prove the allegation
- False: there is sufficient evidence to disprove the allegation
- Malicious: there is clear evidence to prove there has been a deliberate act to deceive and the allegation is entirely false
- Unfounded: there is no evidence or proper basis which supports the allegation being made. It might also indicate that the person making the allegation misinterpreted the incident or was mistaken about what they saw. Alternatively, they may not have been aware of all the circumstances.
- Unsubstantiated: there is insufficient evidence to prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.

Records held by the People Services Department

- Details of allegations that are found to have been malicious or unfounded should be removed from individual files.
- However, for all other allegations, it is important that a clear and comprehensive summary of the allegation, details of how the allegation was followed up and resolved, and a note of any action taken, and decisions reached, is kept on the confidential individual file of the accused, and a copy provided to the person concerned as per our policies
- The purpose of the record is to enable accurate information to be given in response to any future request for a reference, where appropriate
- It will provide clarification in cases where future criminal records checks reveal information from the Police about an allegation that did not result in a criminal

conviction and it will help to prevent unnecessary re-investigation if, as sometimes happens, an allegation re-surfaces after a period of time

The record should be retained for a minimum of 10 years from the date of the allegation or until normal retirement age, whichever is the longer.

7. Safer Recruitment

The Trust has robust procedures in place for safer recruitment.

The Trust adheres to all its legal responsibilities under [Rehabilitation of Offenders Act 1974 and the Exceptions Order 1975 \(Amendment\) \(England and Wales\) Order 2020](#), the [Police Act 1997](#), [Safeguarding Vulnerable Groups Act 2006](#), [Protection of Freedoms Act 2012](#) and amendments, the [DBS Code of Practice](#) and its Policy on the Recruitment of Ex-offenders. See the Trusts' 'Disclosure and Barring Criminal Records Check Policy and Procedure' for further information.

People Services will ensure all the Trust employees, workers and volunteers will:

- Be given job / role descriptions with a clear outline of safeguarding expectations and duties as relevant to their roles
- Be recruited as safely as possible, proportionate to their role and contact with at risk groups.
- Undertake induction training within 6 months of joining the Trust relevant to their role; including signing to say they have read, understood and will comply with the safeguarding policy
- Undertake / attend child and adult safeguarding training, as relevant to their roles.

Those who recruit will ensure they have recruited as safely as possible by:

- Strictly adhering to the Trust's Policies and Procedures for Recruitment and Disclosure and Barring Service Criminal Records Checks.
- Requesting [self-declarations](#) from directors, trustees, the CEO, Chief Finance Officer and other eligible senior managers to confirm they are not disqualified from holding such posts
- Ensuring all advertisements include a statement which confirms the Trust's commitment to safeguarding and safer recruitment where applicable;
- Requesting written declarations, as appropriate, for enhanced DBS, basic or non-DBS posts following [NACRO guidance](#)
- Ensuring that, in cases where employees, workers or volunteers side step roles in the Trust from work where enhanced DBS checks are not needed into a post which does, an enhanced DBS check (with an Adult First check and risk assessment if needed) is carried out before they begin their new role.

Recruitment of ex-offenders

- External professional employment advice from Social Care Services (or the LADO for relevant child information) and / or [NACRO](#) will be sought when needed.

Post-recruitment

- Induction and probationary periods, where relevant, for all employees, workers and volunteers will facilitate the development of understanding and grounding in the safeguarding policies, ethos and culture of the Trust.
- All employees, workers and volunteers will take part in supervisions/ 121's throughout the year.
- All employees, workers and volunteers are offered support when involved with professional safeguarding issues via one- to-one meetings with their line manager as appropriate. They may all seek further support from either their Operational Safeguarding Lead or the Strategic Lead for Safeguarding if needed.

8. Services and Activities where Safeguarding needs to be considered

All services

All employees, workers and volunteers will:

- Be alert to the needs of those who need extra support and are demonstrating a change in those needs
- Refer those changes to the Manager of the service who will liaise with the external agencies as relevant
- Adhere to robust risk management procedures for all customers who have been assessed with medium complex needs/support needs.
- Follow the Trust's Incident procedures when Police, Emergency services and/or external agencies such as social services are contacted because of an alleged, or actual, assault or adult protection incident; customers presenting with self-harm or suicidal thoughts. These incidents will be reviewed by the relevant Manager and other Trust management as relevant
- Liaise and exchange of information with other agencies including the police, Social Services, other Local Authority officers, the local Health Authority, other partners and stake holders as relevant

Photography and media

- No photography or video will be taken of individual or small groups of children, young people or members of the public without advising them, their parents (if under 16 or under 18 if they lack mental capacity) or those with a Health and Welfare Lasting Power of Attorney (LPA); of the purposes of such images and seeking written signed consent using the Trust's Photography and Filming Consent Form
- In the case of any adult who lacks capacity and has not appointed an LPA, no consent can be given, so no images should be taken
- When children, or adults who lack capacity, are associated with a partner organisation e.g. a school or a community group, it is that organisation's responsibility to seek permission and inform the Trust if there are issues

- Public crowd photography will not be taken unless there is prominent signage by the entrance to the venue, and at the location where filming is taking place, detailing the purpose of such imagery and giving people the option to opt out
- Only authorised Trust devices, phones or cameras will be used to take any photographs or videos
- A Trust's official photographer may be commissioned to carry out professional photography or filming
- All official press and other photographers will sign in to any of the Trust's venues events with their official ID being shown
- No pictures of individual or small groups of children, young people or any members of the public will be published in any medium in a way that their names can be identified
- No images of children or adults in a state of undress will be taken
- All images of people will be taken in open public areas
- Any images taken in CQC services for maintenance or repair purposes will not include any customers or identify their name or the address of the property
- All images will be uploaded onto the Trust's secure system SharePoint and deleted from any mobile device
- Any unused images due to lack of quality etc. are deleted within 2 days
- Images will be kept for a maximum of 5 years in line with the Trust's document retention schedule.

Working with people from partners who are regulated settings including schools, colleges, health providers, GP practices, prisons and social care settings:

- When there are concerns about the welfare of a child, young person or adult at risk, the employee, worker or volunteer with the concern should contact that organisation's Lead or Deputy for Safeguarding
- The concern should be recorded on the Trust's Safeguarding Concern Form stored on SharePoint ([Safeguarding Concern form - SG1](#))
- The person with the concern should then inform the Operational Lead for Safeguarding that they have raised a concern, and
- in cases where there are safeguarding concerns about the school, college, health provider, GP Practice, prison or social care setting employees, workers, and volunteers should refer to the Trust Operational Safeguarding Lead who will refer to the relevant agencies in the usual way.

9. Confidentiality, Consent, Information Sharing and Record Keeping

- The Trust is mindful of its legal duties under the Data Protection Act 2018 and General Data Protection Regulation (UK GDPR) and has robust data management, IT security, privacy, record keeping and retention, and policies in place
- Personal information about children, young people, adults at risk and/or their families will usually be confidential and should not be disclosed to a third party without the consent of the subject
- Consent will be sought for those under 16 from their parent/s (or all under 18's if they lack mental capacity) or those with a Health and Welfare Lasting Power of Attorney (LPA); However, the law allows for the disclosure of confidential information where this is necessary to safeguard a child, young person or adult at risk; or if a crime has, or may have, been committed, or it is in the public interest
- Disclosure of confidential information must be justifiable, according to the particular facts of the case and must be limited to those people who need to know in order to take appropriate action
- Sharing information without consent may be justified, if, for example
 - The person lacks the mental capacity to make that decision, and sharing the information is judged to be in their best interests – this must be properly explored and recorded in line with the Mental Capacity Act
 - The person or other people are, or may be, at risk, of harm
 - The person has the mental capacity to make that decision, but they may be under duress or being coerced
 - The risk is unreasonably high and meets the criteria for a multi-agency risk assessment conference referral
 - A court order or other legal authority has requested the information.

Important, the Trust follows record retention guidance from the Independent Investigation into Child Sexual Abuse (IICSA) which advises all organisations to retain any and all documents, notes, e mails and all other information - however held – which contains, or may contain, content pertaining directly or indirectly to the sexual abuse of children or to child protection care.

All safeguarding records are retained 10 years.

10. Further Information

Policies, Procedures and Guidance	
<ul style="list-style-type: none">• Recruitment and Selection Policy• Data Protection and Information Security Policy suite• IT Policy• Disclosure and Barring Service (DBS) Criminal Records Checks Policy and Procedure• Incident Management, Reporting and Recording Policy and Procedures• Employing Young People Policy• Touch Guidance• Missing Persons Policy and Procedure	
Forms	
<ul style="list-style-type: none">• SG1• DBS Risk Assessment template• Photography and filming consent form	

11. Document control

Owner	Strategic Lead for Safeguarding
Consulted	SAFE CIC Learning and Development Manager
Approver	Executive Team
Date approved	July 2023
Next review date	July 2026
Ratified by	Governance and Compliance Committee July 2023 Board of Trustees July 2023

12. Version tracker

Version number	Date approved	Approved by	Comments/Reason for issue
4.0	December 2021	Board	Minor updates to v3.3 approved by ET and published December 2021. Ratified by Board April 2022.
4.1	May 2023	Director of Operations and Development	Extended review date.
5.0	July 2023	Executive Team.	Revision of Policy and Procedure to incorporate Childrens Safeguarding, Policy and Procedure merged. Ratified by Board July 2023.

5.1	October 2023	Not required	Change of Strategic Lead from Director of Operations and Development to Deputy Director of Operations and Development
5.2	January 2024	Not required	Amend reference to 24-hour review to 48 hour review as agreed by Safeguarding Best Practice Group and Strategic Lead.
5.3	February 2024	Not required	Updated Safeguarding Best Practice Terms of Reference replaced.
5.4	September 2024	Not required	<p>Additions to policies listed under further information.</p> <p>Change Governance and Compliance Committee to Board of Trustees.</p> <p>Change Strategic Lead from Deputy Director of Operations to Director of Operations.</p> <p>Updated Appendix A – Safeguarding Best Practice Terms of Reference.</p> <p>Annual review by Director of Operations and all changes approved by policy owner. No major changes. Formal approval not required.</p>
5.5	October 2024	Not required	<p>Change Strategic Lead name and contact information following staff changes.</p> <p>P8: escalation process amended to reflect interim Strategic Lead for Safeguarding is CEO therefore, Operational Safeguarding Lead to report to Named Trustee if Strategic Lead is implicated.</p> <p>Policy owner updated from Director of Operations to Strategic Lead for Safeguarding.</p> <p>Amends approved by Strategic Lead for Safeguarding (currently CEO).</p>
5.6	April 2025		<p>Change Strategic Lead name and contact information following staff changes.</p> <p>P8 and P9: escalation process amended to reflect change of Strategic Lead (which is now Director of Operations, meaning, escalation reverts to CEO if Strategic Lead is implicated).</p> <p>Change Safeguarding Best Practice Group Chair name and contact information following staff changes.</p>

If you have any feedback or want to suggest corrections to this policy, please contact the policy owner.

This document is uncontrolled when printed. Printed copies of this document will not be kept up to date. To make sure you are reading the latest version, please go to: SharePoint/ Resources/Policies Procedures and Forms/Safeguarding and Mental Capacity

Appendices

Appendix A - Safeguarding Best Practice Group's terms of reference:

Introduction

Papworth Trust is committed to creating and maintaining a safe and positive environment and takes seriously its duty to safeguard and promote the welfare of all of the people it supports.

The aims of the Safeguarding Best Practice Group are:

- To support the safeguarding process ensuring consistency in the management of safeguarding across the organisation.
- Sharing information amongst safeguarding leads with a particular focus on sharing best practice and learning from experience.
- To regularly review the impact and outcomes of safeguarding training to ensure staff are supported to be confident in safeguarding matters.
- To provide a safe environment in which to discuss safeguarding concerns, experiences, and learning.
- To ensure that there is an effective system in place to report all safeguarding concerns and that there is a multi-agency system to respond to safeguarding concerns and to undertake enquiries into allegations of abuse and neglect.
- As well as providing a safe environment in which to discuss safeguarding concerns.

Membership

Membership of the Safeguarding Best Practice Group will be made up of all Safeguarding Leads from every area of the Trust, the Strategic Lead for Safeguarding and representation from People Services and Learning and Development (is this when required?). Attendance to the meetings is mandatory, in the event that leads are unable to attend a representative from that department must be sent in their absence. For Care and Day Opportunities departments at least one Registered/Service Manager and/or Deputy Manager should be in attendance to the meetings to allow updates from the meetings to be fed back to all departments. For Housing, Enabling and Employment at least one member from each of these departments must also be in attendance.

(A table of named members is included in the terms of reference on SharePoint. As this list may be subject to change, it has not been included within this document in order to prevent it becoming out of date).

Objectives

The objectives of the Safeguarding Group are to:

- Share best practice across Safeguarding Leads and ensure any necessary action is taken to adopt any learnings wider in the Trust.
- Ensure that there is a consistent approach and effective action plan for Safeguarding development across all areas of the organisation.
- act as a consultation group on changes to safeguarding management and other related policies and practices. (e.g., Liberty Protection Safeguards)
- Review lessons learned, key questions, analysis, action points and evaluation for each safeguarding entry, with a Trust-wide approach.

- Undertake research where necessary to drive and support change across the Trust's services.
- Be informed by external professionals and peers by hearing from guest speakers. The safeguarding chair will reach out to organisations, for potential guest speakers to attend upcoming meetings.
- Safeguarding chair to liaise with external agencies/organisations to seek potential advice, training courses, forums and share feedback to the group.

Meetings and Reporting

- The Safeguarding Best Practice Group will meet on a monthly basis, with meetings confirmed until December 2025.
- Actions, outcomes and updates will be shared with the Executive Team on a monthly basis using the Governance and Compliance ET report.
- The meeting will be chaired by the Strategic Lead for Safeguarding and notes taken by a member of the group on a rotational basis.
- Strategic Lead for Safeguarding will produce a 6 monthly safeguarding report for the Board of Trustees.

Document reviewed and updated: November 2024

Appendix B - Definitions

For the purposes of this policy:

Safeguarding is the overarching term to describe what the Papworth Trust has put in place to prevent children and at-risk adults being harmed and how it will respond when, despite every best effort, harm does happen.

A child/ young person is any person under the age of 18 years.

Promoting the welfare of children and young people is:

- Protecting children and young people from maltreatment
- Preventing impairment of children's health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

An adult at risk is someone who is aged 18 years or over and who is;

- In need of care and support, and;
- Experiencing or being at risk of abuse and neglect and;
- As a result of those care needs, is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Serious Incidents and Events are those that occur that result in significant harm, for example:

- Personal injuries or harm
- Loss of money
- Radicalisation
- For CQC registered services all incidents that affect the health, safety and welfare of people who use services as detailed in [Regulation 18](#)

Such incidents and events could be reported to the Charity Commission by the Trust's Company Secretary in line with the Charity Commission's Serious Incident Reporting guidance

What is abuse?

Abuse of a child, young person or adult at risk can take many forms and, if they are unsure, all employees, workers and volunteers should consult their Operational Lead for Safeguarding, who in turn, may contact local social care services for advice.

Children and Young People

- 1. Emotional Abuse:** Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or

unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone; may feature age or developmentally inappropriate expectations being imposed on children.

- 2. Neglect:** Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:
 - a. provide adequate food, clothing and shelter (including exclusion from home or abandonment);
 - b. protect a child from physical and emotional harm or danger.
 - c. ensure adequate supervision (including the use of inadequate caregivers); or
 - d. ensure access to appropriate medical care or treatment.e. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.
- 3. Physical Abuse:** Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing significant harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.
- 4. Sexual Abuse:** Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
- 5. Other issues or circumstances that may involve, or give rise to, abuse include:**
 - a. **Breast ironing** is also known as breast flattening, is the pounding and massaging of a pubescent girl's breasts, using hard or heated objects, to try to make them stop developing or disappear.
 - b. **Child abuse linked to faith or belief** which includes belief in concepts of witchcraft and spirit possession, demons or the devil acting through children or leading them astray. It includes neglect, physical, sexual and/or emotional abuse.

- c. **Children under 16 years old living away from home** with someone who is not a close relative. If this happens for more than 28 days, their parent/carer (or anyone else if this has not been done, or not possible) need to register the private fostering arrangements with the local authority.
- d. **Children going missing** from home, for whatever reason, as they may be exploited or trafficked.
- e. **Child Sexual exploitation** - Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example, being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.
- f. **Child trafficking** - Children are trafficked for many reasons, including sexual exploitation, domestic servitude, labour, benefit fraud and involvement in criminal activity such as pick-pocketing, theft and working in cannabis farms. There are a number of cases of minors being exploited in the sex industry. Trafficked children may not only be deprived of their rights to health care, freedom from exploitation and abuse, but may also be denied access to education.
- g. **Coercive behaviour** in the family or in a person's intimate relationships is a criminal offence. Controlling or coercive behaviour does not relate to a single incident, it is a purposeful pattern of behaviour, which takes place over time in order for one individual to exert power, control or coercion over another. It is a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.
- h. **Concealed** pregnancy when a mother of any age does not seek medical help or support so the unborn baby may be at risk of harm as a result of not accessing maternity services.
- i. **County lines** is when gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, use dedicated mobile phone lines or other form of "deal line". They are likely to exploit children and adults to move and store the drugs and money and they will often use coercion, intimidation, violence (including sexual violence) and weapons.
- j. **Domestic abuse** when an individual exercises control over another when they are "personally connected". It takes many forms and can include neglect, physical, sexual, financial, property, coercive and / or emotional abuse. When under 16s are involved, it is regarded as child abuse
- k. **eSafety** - when children, young people or adults at risk may be targeted online for sexual abuse, financial gain, radicalisation and / or other crimes.

- l. **Female genital mutilation** - FGM is a criminal offence – it is child abuse and a form of violence against women and girls, and therefore should be treated as such. FGM is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/or death.
- m. **Forced marriage** - Forced marriage is a criminal offence – it is a form of child/ adult/ domestic abuse and has to be treated as such; ignoring the needs of victims should never be an option. Forced marriage affects people from many communities and cultures, so cases should always be addressed using all of your existing structures, policies and procedures designed to safeguard children, adults with support needs and victims of domestic abuse.
- n. **Modern slavery** - Modern slavery is a complex crime that takes a number of different forms. It encompasses slavery, servitude, forced and compulsory labour and human trafficking. Traffickers and slave drivers coerce, deceive and force individuals against their will into a life of abuse, servitude and inhumane treatment. Victims may be sexually exploited, forced to work for little or no pay or forced to commit criminal activities against their will. Victims are often pressured into debt-bondage and are likely to be fearful of those who exploit them, who will often threaten and abuse victims and their families. All of these factors make it very difficult for victims to escape
- o. **Non-recent abuse, there** is no time limit on reporting these offences and an alleged perpetrator may continue to present a risk to children, and if the information is not shared, there is potential for children to remain at risk of harm and further abuse. It may also be the case that there are other victims
- p. **Peer abuse** including bullying as children can be abusers too.
- q. **Radicalisation** - PREVENT is about stopping people from being radicalised and becoming terrorists or supporting terrorism. Some people may be vulnerable to being drawn into terrorism if they lack self-esteem or are victims of bullying or discrimination. Indicators of this can be hard to recognise in both children and adults and may include isolating themselves from family and friends, talking as if from a scripted speech, unwillingness or inability to discuss their views, a sudden disrespectful attitude towards others, increased levels of anger and /or an increased secretiveness, especially around internet use.
- r. **Violent extremism** is when groups or individuals who condone violence as a means to a political end is a particular risk for some children. Any concerns should be reported.
- s. **Young unaccompanied asylum seekers** who have no responsible adults with them.

Adults at Risk

Abuse is defined as a violation of an individual's human and civil rights by another person or persons. It may involve a single or repeated act or omission occurring within a personal or professional relationship where there is an expectation of trust which causes harm to an adult at risk.

Significant harm includes:

- Ill treatment (including sexual abuse and forms of ill treatment that are not physical).
- The impairment of, or an avoidable deterioration in, physical or mental health.
- The impairment of physical, emotional, social or behavioural development.

In addition to the categories defined above which also relate to adults, behaviours which amount to abuse include:

- Discriminatory Abuse:** Racism, sexism or acts based on a person's disability, age or sexual orientation. It also includes other forms of harassment, slurs or similar treatment such as disability hate crime.
- Domestic Abuse:** Psychological, physical, sexual, financial, emotional abuse, coercive behaviour in the family or intimate relationships, and so called 'honour' based violence.
- Financial or Material Abuse:** Theft, fraud, exploitation, pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. It can be online, by phone or face to face.
- Forced Marriage:** When one or both spouses do not consent to the marriage but are coerced into it. Duress can include physical, psychological, financial, sexual and emotional pressure. In cases of adults who lack the capacity to consent to marriage, coercion is not required for a marriage to be forced.
- Hate and "Mate" Crime:** A form of hate crime in which an "at risk" person is manipulated or abused by someone they believed to be their friend.
- Hoarding:** Hoarding disorder is a persistent difficulty in discarding or parting with possessions. A person with a hoarding disorder may experience distress at the thought of getting rid of the items or simply be unable, either physically or through other health related factors, to get rid of items despite an acknowledgment that changes need to be made. They will have an excessive accumulation of items, regardless of actual financial value
- Modern Slavery:** Encompassing slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
- Neglect or Acts of Omission:** Ignoring medical or physical care needs, failing to provide access to appropriate health, social care, welfare benefits or educational services, withholding the necessities of life such as medication, adequate nutrition and heating.
- Organisational Abuse:** Neglect and poor care practice within a care setting such as a hospital or care home or in relation to care provided in someone's own home ranging from one off incidents to on-going ill-treatment. It can be neglect or poor

practice as a result of the structure, policies, processes and practices within a care setting.

- x. **Physical Abuse:** Hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
- xi. **Psychological Abuse:** Emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
- xii. **Self-Neglect:** Covers a wide range of behaviour including neglecting to care for one's personal hygiene, health or surroundings and behaviour such as hoarding.
- xiii. **Sexual Abuse:** Rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
- xiv. **Suicidal ideation:** means having thoughts, ideas, or ruminations about the possibility of ending one's life. It is not a diagnosis, but is a symptom of some mental disorders and can also occur in response to adverse events without the presence of a mental disorder

(This is the date that you as the reporter have been informed)		
Are you reporting the incident as a safeguarding referral or Welfare concern? Or General Concern? (General Concern is logging a possible doubt, that may continue to be witnessed, reported, this will enable a log of concerns over time and can be collated if required please contact G&C when needed.)	Safeguarding Referral <input type="checkbox"/> Welfare Concern <input type="checkbox"/> General Concern <input type="checkbox"/>	
Source of Concern raised:	Staff concern <input type="checkbox"/> Victim disclosure <input type="checkbox"/> Witnessed <input type="checkbox"/> Complaint <input type="checkbox"/>	Anonymous <input type="checkbox"/> Hearsay <input type="checkbox"/> Whistleblowing <input type="checkbox"/> Other <input type="checkbox"/>
If other, please provide details.		
Name of Manager/Safeguarding Lead reported:		
Did the incident occur out of office hours?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, was the on-call manager informed? (Please Provide the name of the manager)		
Type of the concern	Physical abuse <input type="checkbox"/> Domestic violence or violence <input type="checkbox"/> Sexual abuse <input type="checkbox"/> Physiological or Emotional Abuse <input type="checkbox"/> Financial abuse <input type="checkbox"/> Vulnerable to radicalisation <input type="checkbox"/> Self-Neglect <input type="checkbox"/> Neglect of omission <input type="checkbox"/> Organisational abuse <input type="checkbox"/> Discriminatory Abuse <input type="checkbox"/> Modern Slavery <input type="checkbox"/> Safeguarding referral following a Medication Event <input type="checkbox"/> Unsure <input type="checkbox"/> Other <input type="checkbox"/>	
If "other" or "unsure", please provide further details		
The abuse or concern is	Suspected <input type="checkbox"/> Actual <input type="checkbox"/> Alleged <input type="checkbox"/> Other <input type="checkbox"/>	
If Other, please provide details.		

Are there any other children or adults at risk?	Yes, other children <input type="checkbox"/> Yes, other adults <input type="checkbox"/> Yes, other children and adults <input type="checkbox"/> No, none that I am aware of <input type="checkbox"/> If yes to any of the above, please provide details such as numbers and ages:

Who is being accused	Spouse <input type="checkbox"/>	Partner <input type="checkbox"/>
	Relative <input type="checkbox"/>	Agency Staff <input type="checkbox"/>
	Friend <input type="checkbox"/>	Papworth <input type="checkbox"/>
	Neighbour <input type="checkbox"/>	EX-Spouse/Partner <input type="checkbox"/>
	Stranger <input type="checkbox"/>	Self <input type="checkbox"/>
	Employer <input type="checkbox"/>	Other service/Care Provider <input type="checkbox"/>
	Customer <input type="checkbox"/>	Not Known <input type="checkbox"/>
	Staff Member <input type="checkbox"/>	External Professional <input type="checkbox"/>
	Social worker <input type="checkbox"/>	GP <input type="checkbox"/>
	Other <input type="checkbox"/>	Hospital Staff <input type="checkbox"/>
	Tenant <input type="checkbox"/>	Volunteer <input type="checkbox"/>
	Has the person at risk given their consent for further action	
Yes <input type="checkbox"/> No <input type="checkbox"/>		

Summary of the incident	
<p>Please provide details of what has happened <i>(When providing the details please ensure factual information is considered:</i></p> <ul style="list-style-type: none"> • Who has this been reported to prior to completing the form? • How long after the incident did you raise this? • What time of day did the incident occur? • What do you think led to this incident occurring? I.e., was there a trigger? • What actions were taken during or immediately after the incident? • How was the situation diffused? 	

Witness Information	
Is there a witness to the incident	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is yes, please provide the details of the witness	<ul style="list-style-type: none"> • Name: • Telephone Number: • Email:
Has the witness confirmed their consent to be contacted further if required?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Witness account: <i>If this has been provided on a separate document, please ensure this is attached onto the safeguarding log.</i>	

External Reporting		
Does the Local Authority need to be informed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date they have been informed. Ref number:
Does this require the CQC to be notified?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date they have been informed: CQC reference number:
Does this require the police to be informed	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date they have been informed: Incident reference:
Interim advice given by external organisation?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Please provide details of the advice given: <i>Within this section, please provide details of what actions you have been advised to take:</i> <i>Please refer to the SG Guidance document for additional guidance.</i>		
Is an investigation required?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Who has advised this requires investigating? Please provide a rationale for this decision:		

(Name, Position, Organisation, Contact details.)	
Rationale for investigation?	
Signed (Service Lead/Support Worker)	
Date	
Manager Signature	
Date	

Section 3 – Investigation (to be completed following escalation)

Investigation Details	
Who is leading the investigation	Investigation led by Local Authority <input type="checkbox"/> Investigation led by Papworth Trust <input type="checkbox"/> Investigation led by the police <input type="checkbox"/> Awaiting Outcome <input type="checkbox"/> Not Applicable <input type="checkbox"/>
Following this referral, is this classified as:	Safeguarding Concern <input type="checkbox"/> Welfare Concern <input type="checkbox"/>
Name of person or external professional conducting the investigation	
Signed	
Date	

Please ensure that all information captured within this document is transferred onto the Safeguarding/Welfare Log within 5 working days.