31. Safeguarding Children, Young People and Vulnerable Adults Policy, Practice and Procedure Guidance

THIS POLICY SHOULD BE AVAILABLE TO ALL STAFF, PROFESSIONAL ASSOCIATES, SERVICE PROVIDERS AND VISITORS AT ALL TIMES.

POLICY STATEMENT

The Dyslexia Association is committed to ensuring that children, young people and vulnerable adults are safe and protected from all forms of abuse and neglect.

This policy applies to all employed persons, (part or full time, permanent, fixed term or short term temporary appointments); to all those people whose work with The Dyslexia Association brings them into contact with children, young people and vulnerable adults. This includes Professional Associates, contractors, volunteers and any other person working with The Dyslexia Association or on our premises who a member of the public may reasonably assume is a member of staff.

We recognise our responsibility to respond appropriately and, with respect to children, young people and vulnerable adults, to work with other agencies to ensure the safety and wellbeing of those groups with whom we have contact and to have clear guidelines for our procedures.

- A child is defined as a person aged up to 18 years old.
- An adult is aged 18 years and over.

1. We believe every child, young person and vulnerable adult should be valued, safe and happy. We want to make sure that these people we have contact with know this and are empowered to tell us if they are suffering harm.

2. We want children, young people and vulnerable adults who use or have contact with this organisation to enjoy what we have to offer in safety.

3. We want organisations that work with or commission work from us, or who provide funding to us, to have confidence and recognise that we are a safe organisation.

5. If we discover or suspect a child, young person or vulnerable adult is suffering harm which is directly related to the conduct of a staff member, Professional Associate or other person related to our organisation we will immediately inform the Local Authority Designated Officer (LADO) at the time of writing:

**County:** LADO 0115 977 3921

**City:** Nottingham City Safeguarding Children Board 0115 876 4718

6. If we discover or suspect a child, young person or vulnerable adult is suffering harm which is not related to the conduct of a staff member, Professional Associate, or other person related to our organisation we will, at the time of writing notify

**Nottingham City Reception & Assessment Teams (Social Care)**
Adult Contact Team: 0115 883 8460
Children and Families: 0115 915 0800

**Nottinghamshire Reception & Assessment Teams (Social Care)**
Adult Social Care: 0844 980 8080
For Children’s Social Care contact
Customer Services: 0162 343 4993

7. This Safeguarding Children, Young People and Vulnerable Adults Policy Statement and our Safeguarding Children, Young People and Vulnerable Adults Practice and Procedure applies to all staff, Professional Associates and users of The Dyslexia Association and anyone carrying out any work for us or using our premises or that of our customers where our service delivery is directly provided.

8. We will review our Safeguarding Children, Young People and Vulnerable Adults Policy, Practice and Procedure document at least every 6 months to make sure that all details are still relevant and effective.
POLICY GUIDANCE

The Dyslexia Association will:

1. Arrange to take all reasonable measures to ensure the risks of harm to children, young people and vulnerable adults are minimised.

2. Take its Duty of Care seriously and put the interests and safety of children, young people and vulnerable adults first.

3. Arrange to take all appropriate actions to address concerns about the welfare of a child or children, young people and vulnerable adults, working to agreed local policies and procedures in full partnership with other local services.

4. Ensure Safe Recruitment and Employment practices as described in Safeguarding children and safer recruitment in education - statutory guidance (available via the Department for Education website) are observed as we recognise this is an important part in safeguarding children, young people and vulnerable adults.

5. Have a senior member of the organisation to take lead responsibility for dealing with safeguarding / child protection issues, providing advice and support to other staff, liaising with other staff and working with other agencies, who will be known as the ‘Named Senior Person’. All staff will be made aware of this role:

   The Named Senior Person for The Dyslexia Association is:

   **Mel Cope, Head of Education and Training**
   Tel: 0115 924 6885, email: mel.cope@dyslexia.uk.net

   In her absence the designated person will be Dee Caunt, Chief Executive Officer
   Tel: 0115 924 6889, e.mail:dee.caunt@dyslexia.uk.net

6. Listen to children, young people and vulnerable adults, encourage them to respect and care for others and take action to stop any inappropriate verbal or physical abuse taking place.

7. Endeavour to create an open and accountable environment, permitting children, young people and vulnerable adults to voice their concerns about inappropriate behaviour and misconduct while providing strong sanctions to deter abuse, victimisation and cover up of serious malpractice.

8. Ensure our policies and procedures apply to all staff (paid or unpaid), Professional Associates, children, young people and vulnerable adults,
parents and carers regardless of gender, ethnicity, disability, sexuality or religion.

Our organisation is aware of the responsibilities, which its Trustees, Managers, Staff and Professional Associates have with regard to the protection of children, young people and vulnerable adults from abuse and from inappropriate and inadequate care, and is committed to responding in all cases where there is concern.

This document will be shared with all staff and Professional Associates within their induction process to ensure they are familiar with the organisation’s beliefs, guidelines and understand their responsibilities.

The documents below provide the framework for the organisation’s responsibilities as part of a co-ordinated shared response to the health and well being of children, young people and vulnerable adults. All staff will be made aware of these documents and how they can access them.

- Working Together To Safeguard Children 2010
- Child Protection Enquiries: A guide for Parents and Carers
- What to do if you’re worried a child is being abused (2006)
- Mental Capacity Act 2005
- Safeguarding Vulnerable Groups Act 2006
- Safeguarding Adults: A National Framework of Standards for good practice and outcomes in adult protection work.

Ratified by the Board of Trustees at their meeting on 7th November 2012

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This document has been designed to help staff and Professional Associates know how to respond to situations where they may have concerns about the safety and wellbeing of a child, young person or vulnerable adult that they have contact with in any situation.

For the purposes of the guidance, those adults eligible for support under the Safeguarding Adults Procedures are those who are:

18 years and over and who are, or may be, eligible to receive support from social care or health services and who may be unable to take care of themselves or be unable to protect themselves against serious harm or exploitation and whose independence and well-being would be, or is, at risk if they did not receive appropriate health or social care support.

People who may be eligible include adults who are frail, either physically or mentally (dementia) due to old age, adults with mental ill-health, adults with physical disabilities and/or sensory impairments and adults with learning disabilities. Other people to consider include adults who misuse substances, adults whose behaviour or condition puts them at risk of abuse and victims of domestic violence who meet the above criteria.

**Please note:** that just because individuals are disabled in some way or old or ill does not mean that they are unable to take care of themselves or protect themselves from abuse. They may be perfectly able to do so. However, research has shown that anyone being cared for (either in a care setting or at home or by other services) is by definition vulnerable. This is because the person is in a position of dependency on others.

Generally the more dependent a person is on the assistance or support of others to carry out everyday activities of daily life the more vulnerable the person is likely to be. This is particularly so when there is also a degree of mental incapacity or mental disorder that affects the person’s ability to make informed decisions and exercise choice.

Due to the nature of our work, The Dyslexia Association may be in the frontline of work with some children, young people and vulnerable adults. This may mean that we are the first to know that a child, young person or vulnerable adult has been abused or that we are concerned about a person’s wellbeing. Everyone has an equal responsibility to ensure that children’s, young people’s and vulnerable adults’ needs are put first and to safeguard any person with whom we may come into contact. This responsibility rests not only with the Trustees but also with every individual employed or contracted to provide a service, within our organisation whilst at work or at home.

It is essential that all staff and Professional Associates know how to respond in these circumstances.
All staff and Professional Associates must endeavour at all times to safeguard all children, young people and vulnerable adults from harm and exploitation whatever their:

- Race, religion, first language or ethnicity
- Gender or sexuality
- Age
- Health, ill-health or disability
- Location or placement (e.g. living alone, in a hostel or residential unit, with their family or a foster family, as a tourist in a hotel, care home residents)
- Criminal or offensive behaviour
- Wealth or lack of it
- Political or immigration status.

Individuals within the organisation need to be alerted to the potential abuse of children, young people and vulnerable adults both within families and also from other sources including abuse by Professional Associates or members of staff in our and other organisations. They need to know how to recognise and act upon indicators of abuse or potential abuse involving these groups. There is an expected responsibility for all members of The Dyslexia Association to respond to any suspected or actual abuse of a child, young person or vulnerable adult in accordance with the procedures provided.

1. **Confidentiality**

   It is important for all staff to follow the statement of confidentiality outlined below:

   The Dyslexia Association treats all children, young people, vulnerable adults, carers, parents and families with respect. Information that is given to us will be treated confidentially and shared only with those persons who have an agreed reason to have the information. Information will only be passed to other people with the agreed consent of the person giving the information, except if there are concerns about the welfare of a child, young person or vulnerable adult or they are at risk of immediate harm. In these circumstances a discussion will be held with the designated worker/line manager and if it is considered appropriate the information will be shared with other relevant professionals using the procedures as described in HM Government ‘Information Sharing: Guidance for Practitioners and Managers’.

2. **Immediate Action**

   Immediate action may be necessary at any stage in involvement with children, young people, vulnerable adults and families.
It is always good practice to be as open and honest as possible with parents/carers about any concerns. However, you do not have to share any concerns if you believe that this will put the child, young person or vulnerable adult at risk of harm.

In all cases it is vital to take whatever action is necessary to safeguard a child, young person or vulnerable adult. This may include the following:

- If emergency medical attention is required this can be secured by calling an ambulance (dial 999) or taking a child, young person or vulnerable adult to the nearest Accident and Emergency Department. In the case of a child, it would be appropriate for a responsible person or designated adult to accompany the child to hospital.
- If a child, young person or vulnerable adult is in immediate danger the police should be contacted (dial 999) as they alone have the power to remove a child immediately if protection is necessary, via a Police Protection Order.

3. Recognition of Abuse or Neglect

‘Abuse and neglect’ is a generic term encompassing all ill treatment of children, young people or vulnerable adults, including serious physical and sexual assaults as well as cases where the standard of care does not adequately support the person’s health or development.

Abuse and neglect are forms of maltreatment of a vulnerable person. Somebody may abuse a child, young person or vulnerable adult by inflicting harm or by failing to prevent harm.

Children may be abused in the family or an institutional or community setting by those known to them or, more rarely, by a stranger. An adult or adults or another child or children may abuse them.

Working Together to Safeguard Children, 2010 sets out definitions and examples of the four broad categories of abuse:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect.

These categories overlap and an abused person does frequently suffer more than one type of abuse (e.g. a child may be suffering physical and emotional abuse). The definitions below encompass all groups covered by this policy.

Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing
physical harm to a child, young person or vulnerable adult. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child (Working Together, 2006).

**Signs of Possible Abuse**

**Signs Suggesting Physical Abuse**

- Any injuries not consistent with the explanation given for them
- Injuries that occur to the body in places, which are not normally exposed to falls, rough games etc.
- Injuries that have not received medical attention
- Reluctance to change for, or participate in, games or swimming
- Bruises – to the eyes, mouth, ears, fingertip bruising or bruises of different ages in the same places, bruises to non-mobile babies
- Bites – clear impressions of teeth
- Burns – with clear outlines, small round burns (from cigarettes)
- Scars – unusual in shape, those which did not receive any medical treatment, large number of different aged scars
- Fractures – unnoticed fractures, those that cause pain and it would be difficult for a carer not to realise the distress of the injury and those that do not have an accidental explanation*
- Cuts/scratches/substance abuse*.

**Emotional Abuse**

Emotional abuse is the persistent emotional maltreatment of a child, young person or vulnerable adult, such as to cause severe and persistent adverse effects on the person’s emotional development. It may involve conveying to children, young people or vulnerable adults that they are worthless or unloved, inadequate or valued only in so far as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the person’s developmental capacity, as well as over-protection and limitation of exploration and learning or preventing the person from participating in normal social interactions. It may involve serious bullying causing a child, young person or vulnerable adult to frequently feel frightened or in danger or it could be the exploitation or corruption of a child, young person or vulnerable adult. Some level of emotional abuse is involved in all types of maltreatment, though it may occur alone (Working Together, 2006).

**Signs Suggesting Emotional Abuse**

- Changes or regression in mood or behaviour, particularly where a child, young person or vulnerable adult withdraws or becomes clingy – also depression/aggression, extreme anxiety
- Nervousness, frozen watchfulness
• Obsessions or phobias
• Sudden under-achievement or lack of concentration
• Inappropriate relationships with peers and/or adults, carers or family
• Attention-seeking behaviour
• Persistent tiredness
• Running away/stealing/lying
• Specific habit disorders e.g. faecal smearing, excessive drinking, self harm
• Delayed social development, poor speech and language development that is not otherwise explained
• Excessive nervous behaviour such as rocking, or hair twisting

**Sexual Abuse**

Sexual abuse involves forcing or enticing a child, young person or vulnerable adult to take part in sexual activities, including prostitution, whether or not they are aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape or buggery or oral sex) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities or encouraging a child, young person or vulnerable adult to behave in sexually inappropriate ways (Working Together, 2006).

**Indicators of Possible Sexual Abuse**

• Any allegations made by a person concerning sexual abuse
• Person with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour or who regularly engages in age-inappropriate sexual play and demonstrates sexually explicit behaviour
• Sexual activity through words, play or drawing
• Child, young person or vulnerable adult who is sexually provocative or seductive with adults
• Inappropriate bed-sharing arrangements at home
• Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
• Eating disorders – anorexia, bulimia*
• Bed wetting and soiling
• Unexplained pregnancy
• Physical symptoms (which can include) recurrent urinary infections, sexually transmitted diseases, genital/rectal itching and soreness

* These signs may also indicate the possibility that a child, young person or vulnerable adult is self-harming.
Neglect

Neglect involves the persistent failure to meet a child’s, young person’s or vulnerable adult’s basic physical and/or psychological needs, likely to result in the serious impairment of their health and 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 provide adequate food and clothing, shelter including exclusion from home or abandonment, failing to protect a child from physical harm or danger, failure to ensure adequate supervision including the use of inadequate care-takers or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs (Working Together, 2006).

Indicators of Possible Neglect

- Not receiving adequate food consistent with growth
- Exposed to injury through lack of supervision and can include the ingestion of toxic substances
- Exposed to inadequate/dirty or cold environments
- Abandoned or left in circumstances without appropriate adult supervision and can endanger them
- Prevented from access to appropriate medical care or treatment when required

4. What is cyber-bullying, exactly?

"Cyber-bullying" is when a child, preteen or teen is tormented, threatened, harassed, humiliated, embarrassed or otherwise targeted by another child, preteen or teen using the Internet, interactive and digital technologies or mobile phones. It has to have a minor on both sides or at least have been instigated by a minor against another minor. Once adults become involved, it is plain and simple cyber-harassment or cyber-stalking. Adult cyber-harassment or cyber-stalking is NEVER called cyber-bullying.

The methods used are limited only by the child’s imagination and access to technology. And the child is a cyber-bully one moment but may become the victim the next. The children often change roles, going from victim to bully and back again. Cyber-bullying incidents have resulted in serious injury and death.

Cyber-bullying is usually not a one time communication, unless it involves a death threat or a credible threat of serious bodily harm. Children and young people usually know it when they see it, while parents may be more worried about the lewd language used by the children and young people than the hurtful effect of rude and embarrassing posts.

Cyber-bullying may arise to the level of a misdemeanour cyber-harassment charge or, if the child is young enough, may result in the charge of juvenile
delinquency. Most of the time, the cyber-bullying does not go that far, although parents often try and pursue criminal charges. It typically can result in a child losing their ISP or IM accounts as a ‘terms of service’ violation. And in some cases, if hacking or password and identity theft is involved, can be a serious criminal matter.

Please note: Children, young people or vulnerable adults need to be protected even when it appears that they are not aware that the physical abuse or sexual activity, which they are involved in or witness, or the neglect they experience is harmful to them.

5. Concerns of a General Nature/not Relating to a Specific Individual

There may be instances where concerns do not relate to a specific individual. It may be that there are concerns in respect of institutional abuse or neglect within a service, and this may affect a number of people who use that service. Concerns do not need to be specific to an individual in order to alert. The Duty of Care remains the same whether alerting concerns involving one individual, several individuals or service-related issues that may affect many people. In these circumstances please contact the relevant LADO (details in the Policy Statement) for further advice.

6. What To Do If Children, Young People or Vulnerable Adults Talk To You About Abuse Or Neglect

It is recognised that a child, young person or vulnerable adult may seek out an adult with whom to share information about abuse or neglect or talk spontaneously either individually or in groups when an adult is present. In these situations staff members or Professional Associates must:

- Listen carefully to the child, young person or vulnerable adult, and NOT directly question them.
- Give the child or adult time and attention and remain calm.
- Allow the child, young person or vulnerable adult to give a spontaneous account; do not stop them when they are freely recalling significant events.
- Make an accurate record of the information given taking care to record the timing, setting and people present, the child or adult’s presentation as well as what was said. Do not throw this away as it may later be needed as evidence and you will need to store it securely.
- Use the child or adult’s own words where possible.
- Make it explicit that you are taking what they say seriously.
- Ask questions only to clarify what is being said, use techniques such as summarising to check you have the correct details (do not interrogate the young person).
- Explain that you cannot promise not to speak to others about the information they have shared because you want them to be safe and to do this you may need the help of others.
- Reassure the child or adult that:
  - You are glad they have told you;
  - S/he has not done anything wrong;
  - What you are going to do next and that you intend to act upon what they have told you;
  - Explain that you will need to get help to keep them safe;
  - You must NOT ask the child or adult to repeat his or her account of events to anyone.

You should report any concerns to the Named Senior Person (Mel Cope) who will advise and offer information regarding the appropriate storage of recorded information.

7. Consulting about the Concern

The purpose of consultation is to discuss concerns in relation to a child or adult and decide what action is necessary. Staff or Professional Associates may become concerned about a child or adult who has not spoken to them, because of something they have observed or information they have heard about a child or adult.

If a child or adult is upset or has a visible injury it is good practice to ask them why they are upset or how a cut or bruise was caused or respond to a child or adult who wants to talk. This practice can help clarify vague concerns and result in appropriate action.

If staff members are concerned about a child or adult they must share their concerns. Initially they should talk to the Named Senior Person (Mel Cope).

If a member of The Dyslexia Association’s staff or a Professional Associate is implicated in any concerns about a child or young person they should discuss his/her concerns directly with the appropriate Local Authority Designated Officer (LADO).

**County:** LADO 0115 977 3921

**City:** Nottingham City Safeguarding Children Board 0115 876 4718

**PROCEDURE GUIDANCE**

‘Pathway to Provision Multi-Agency Thresholds Guidance’, revised in January 2012, is available via http://search.nottinghamshire.gov.uk/cgi-bin/split.pl
The Multi-Agency Safeguarding Hub (MASH) will deal with new safeguarding concerns about vulnerable children and adults and goes live in December 2012. It will have two assessment teams, North and South, plus a dedicated advice line manned by a Social Worker. Use the following link for further details http://www.nottinghamshire.gov.uk/caring/childrenstrust/pathway-to-provision/mash/

1. Making a Referral

A referral involves giving Children’s or Adult Services or the Police information about concerns relating to a child, young person, vulnerable adult or family in order that enquiries can be undertaken by the appropriate agency followed by any necessary action. In certain cases the level of concern will lead straight to a referral without external consultation being necessary.

Parents/carers should be informed if a referral is being made except in circumstances where it is considered that informing parents/carers would place a child, young person, vulnerable adult, yourself or others at immediate risk.

However, inability to inform parents for any reason should not prevent a referral being made. It would then become a joint decision with Children’s or Adult Services about how and when the parents or carers should be approached and by whom.

If the concern is about abuse or risk of abuse from someone not known to the child or child’s family, young person or vulnerable adult (stranger abuse) make a telephone referral directly to the police and advise the parents or carers.

If the concern is about abuse or risk of abuse from a family member or someone known to the child, young person or vulnerable adult make a telephone referral to the Children’s Social Care Duty Team on:

**Nottingham City Reception & Assessment Teams (Social Care)**
Adult Contact Team: 0115 883 8460
Children and Families: 0115 915 0800

**Nottinghamshire Reception & Assessment Teams (Social Care)**
Adult Social Care: 0844 980 8080
For Children’s Social Care contact
Customer Services: 0162 343 4993

Information required

Staff or Professional Associates should be prepared to give as much of the following information as possible (in emergency situations all of this information may not be available). Unavailability of some information should not stop anyone making a referral.
- Provide your name, telephone number, position and request the same details from the person to whom you are speaking.
- Full name, address and telephone number of family, date of birth of child, young person or vulnerable adult and siblings.
- Gender, ethnicity, first language, any special needs.
- Names, dates of birth and relationship of household members and any significant others.
- The names of any professionals known to be involved with the child, young person, or vulnerable adult/family e.g. GP, Health Visitor, School.
- The nature of the concerns and reason for them.
- Your opinion on whether the child, young person or vulnerable adult may need urgent action to make them safe.
- Your view of what appears to be the needs of the child, young person, vulnerable adult and family or carers.
- Whether the parent, carer or person with parental responsibility has given their consent to the referral being made.

**Action to be taken following the referral**

Ensure that an accurate record is made and kept, detailing the concerns that have been referred.

Make sure the concerns are confirmed in writing to the Referral and Assessment Team or Adult Duty Team following the referral (within 48 hours). Use the following links to download the appropriate referral form:

http://www.nottinghamshire.gov.uk/nscb/


http://nottinghamcity.gov.uk/index.aspx?articleid=15559#2.2MakingaReferraltoAdultSocialCare

Accurately record the action agreed or that no further action is to be taken and the reasons for this decision.

**2. Confidential Records of Concern**

Ensure that any records in respect of the children, young people, vulnerable adults, their parents and/or carers are kept confidential in a secure place. Information should only be shared on a need to know basis. Where the sharing of information is vital to protect a child, young person or vulnerable adult the issue of confidentiality is secondary to their need for protection.

**IF YOU ARE IN DOUBT, CONSULT.**
3. Safe Recruitment and Selection Activity

The Dyslexia Association will take all possible steps to prevent unsuitable people working with children, young people or vulnerable adults.

When interviewing potential staff we will ensure:

- There is an open recruitment process
- There is a rigorous interview
- Applicants identity and claims to any academic or vocational qualifications will be verified
- References will be taken up by direct contact with referees
- Evidence of the date of birth and address of the potential employee will be sought
- Where appropriate, an enhanced disclosure via the Criminal Records Bureau will be secured.

Where a position requires an enhanced disclosure this will be clear on the application form, job advert and any other information provided about the post. All applicants will complete an application form enabling each of them to have the same opportunity to provide information about themselves and assist in identifying any gaps in their employment.

During interviews the interview panel will explore:

- The candidate’s attitude toward children, young people and vulnerable adults
- His or her ability to support the organisation’s agenda for safeguarding and promoting the welfare of children, young people or vulnerable adults
- Any gaps in the candidate’s employment history
- Any concerns or discrepancies arising from the information provided by the candidate and/or referee

A job offer will only be made subject to the necessary checks being satisfactory.

All staff will have a job description and contract of employment and be required to work a probationary period.

Post Appointment

All staff and Professional Associates (paid or unpaid), regardless of previous experience will take part in an induction programme during their first three months of employment.

The purpose of this will be to:

- Provide training about our policies and procedures
- To provide support to individuals in the role for which they have been engaged
- To provide opportunities for a new member of staff or volunteer to discuss any issues or concerns about his/her role or responsibilities
- To enable the person’s line manager to recognise any concerns about the person’s ability or suitability at the outset and address them immediately
- To ensure that the individual is aware of policies, procedures and statements in relation to safeguarding and promoting the welfare of children, young people or vulnerable adults
- To ensure that individuals understand how and with whom they should raise any concerns with regard to any practice issues
- To ensure that individuals are aware of other relevant procedures, e.g. disciplinary, capability and whistle blowing
- To ensure that all staff and Professional Associates have appropriate levels of training in safeguarding children, young people or vulnerable adults and other responsibilities in connection with their roles
- To advise individuals about supervision and appraisal systems

4. Allegations Against Staff or Volunteers / Whistle Blowing

Allegations are usually addressed in two areas:

1. Allegations that a child, young person or vulnerable adult is being harmed by a member of staff, is known as Allegations Management
2. General allegations of wrongdoing is known as Whistle-Blowing

All staff and Professional Associates have a responsibility to ensure they do not abuse their positions of trust within our organisation. Any concerns raised by a member of staff, Professional Associate or a member of the public regarding inappropriate behaviour by any member of this organisation will be managed via the following procedure and all allegations will be acted on.

Allegations Management

If anyone raises a concern about another member of staff, Professional Associate, client or visitor where they have:

- Behaved inappropriately in a way that has harmed or may have harmed a child, young person or vulnerable adult
- Possibly committed a criminal offence against or related to a child, young person or vulnerable adult
- Behaved towards a child or children, young people or vulnerable adults in a way that indicates s/he is unsuitable to work with these groups in their work, time at The Dyslexia Association or private life,

this will be reported to -

Mel Cope Head of Education and Training:
Tel: 0115 924 6885, email: mel.cope@dyslexia.uk.net
In her absence the designated person will be Dee Caunt, Chief Executive Officer
Tel: 0115 924 6889, e.mail:dee.caunt@dyslexia.uk.net

The Named Senior Person must inform the Nottinghamshire Local Authority Designated Officer (LADO) for Allegations Management – Tel: 0115 977 3921. The LADO will advise on how to proceed, whether the matter can be dealt with within our organisation’s own arrangements or whether a multi-agency strategy meeting is required. In relation to vulnerable adults, notify

Adult Protection Co-ordinators (various)
Nottingham City Council’s Adult Contact Team, Mary Potter Centre,
Gregory Boulevard,
Hyson Green,
Nottingham,
NG7 5HY. adult.contactteam@nottinghamcity.gov.uk
0115 883 8460

Where the LADO/ Adult Protection Team decides that the issue can be dealt with internally, the reasoning and advice will be recorded and sent to:

Mel Cope Head of Education and Training:
Tel: 0115 924 6885, email: mel.cope@dyslexia.uk.net

In her absence the designated person will be Dee Caunt, Chief Executive Officer
Tel: 0115 924 6889, e.mail:dee.caunt@dyslexia.uk.net

Where the LADO decides the case needs to proceed to a ‘Strategy Discussion Meeting’, s/he will make a referral to Social Care and or police and convene the meeting/s in accordance with their guidance.

Complaints made directly to the police will be reported to the LADO as soon as possible and again s/he will decide whether to hold a strategy meeting. The Police may interview the complainant if they feel this is appropriate.

See flow chart over page.
Whistle-Blowing

Members of staff may be the first to notice if anything is seriously wrong within the organisation. However, they might not say anything because they think this would be disloyal or they might be worried that their suspicions are not justified. They may also be worried that they or someone else may be victimised.

If anyone wants to raise any concern, they can do so with confidence and without having to worry about being victimised, discriminated against or disadvantaged in any way as a result. Members of the public should also be encouraged to voice any concerns they raise officially.

What types of action does this include?

This policy is intended to deal with serious or sensitive concerns about wrongdoings such as the following:

- Fraud or corruption
- Member groups, children or students, particularly children and adults in our care, being mistreated
- Unauthorised use of money
- An unlawful act
- Any danger to health and safety
- A person abusing his/her position for any unauthorised use or for personal gain
- A person deliberately not keeping to a policy, a code of practice or any law or regulation
- A person failing to meet appropriate standards
- A person being discriminated against because of race, colour, religion, ethnic or national origin, disability, age, sex, sexuality, class or home life.

The concern may be about members of staff or other people who work directly for or with the organisation, as part of a collaborative/partnership agreement.

What is not covered?

Whistle-Blowing policies cannot be used to deal with serious or sensitive matters that are covered by other procedures.

Such Procedures include the following –

- Staff complaints about their employment. These complaints should be dealt with through the Grievance Procedure.

Whistle-blowers should be made to feel confident in using the policy to raise issues such as where an allegation is true they have nothing to fear. Let them know that if necessary you will take appropriate action under the Public Interest Disclosure Act 1998 to protect them from any harassment, victimisation or bullying.
You will keep their concerns confidential if this is what they want, unless you are unable to by law. Explain this at the time they raise a concern so they can decide whether or not to proceed.

Anonymous Allegations

Let people know that, because you will protect them (as explained above), you encourage them to give their name when they make an allegation. Concerns raised anonymously tend to be far less effective and if, for example, you do not have enough information, you may not be able to investigate the matter at all.

Mel Cope, Head of Education and Training:
Tel: 0115 924 6885, email: mel.cope@dyslexia.uk.net

will decide whether or not to consider the matter.

In her absence the designated person will be Dee Caunt,
Chief Executive Officer
Tel: 0115 924 6889, email: dee.caunt@dyslexia.uk.net

The decision will depend on:

- The seriousness of the matter;
- Whether the concern is believable;
- Whether an investigation can be carried out based on the information provided.

Any member of staff or Professional Associate raising a concern should first do so with his/her manager, this will depend on the seriousness and sensitivity of the matter and who is suspected of the wrongdoing.

Concerns are better put in writing giving as much information as possible – including any relevant names, dates, places and so on. The earlier the issue is raised, the easier it will probably be to take effective action.

A person raising a concern will not have to prove beyond all reasonable doubt that the allegation is true, but he/she will have to show that there are good reasons for his/her concern.

5. Code of Behaviour

All staff and volunteers are expected to behave in a manner which reflects the child, young person and vulnerable adult-centred principles of our organisation. This good practice will be reinforced during staff development, supervision and training sessions.
Working with Children

It is essential that care is taken to minimise the possibility for abuse and misunderstanding and misinterpretation. False allegations are rare but general good practice will help prevent them. The following examples will help to create a positive culture and climate for children, young people and vulnerable adults who visit our premises.

- Never work alone with children, young people or vulnerable adults out of public view. Managers should not ask staff or volunteers to work with these groups in situations where they will be completely unobserved.
- Maintain a safe and appropriate emotional and physical distance from children, young people or vulnerable adults. It is not appropriate for staff or Professional Associates to have an intimate relationship with children, young people or vulnerable adults who visit our premises.
- Do not engage in rough or sexually provocative games.
- Do not make sexual comments.
- Do not invite or allow children, young people or vulnerable adults into your home.
- Do not give children, young people or vulnerable adults lifts in your car except in emergencies (unless this is part of your job).
- Never let allegations, made by anyone, go unacknowledged, unresolved or not acted upon.

Staff and Professional Associates should be aware of the potential for misunderstanding when touching children, young people or vulnerable adults.

If it is an accepted part of an activity, touching should be appropriate to the situation and follow accepted guidelines where they exist. Consoling a child, young person or vulnerable adult who is upset, administering first aid or supporting a participant in an activity is acceptable and necessary behaviour.

6. Complaints

It is reasonable for children, young people, vulnerable adults, parents and carers to have the right to complain or make comment if they are unhappy with the care or service they receive. The Dyslexia Association takes the care of children, young people and vulnerable adults seriously and will address any concerns that are raised.

Receiving complaints and comments about our organisation also helps us to understand the things that we do well and where there are areas that need to be improved.

If anyone would like to complain or comment about any aspect of our organisation, it is important to take this seriously and direct them in the first instance to complete a complaints form. If they are reluctant to do this or the situation is
regarded as serious, the comments should be recorded in writing and brought to the immediate attention of

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7. Useful Information

Criminal Records Bureau (CRB):

The CRB exists to help organisations identify people who are unsuitable for certain types of work, especially work involving access to or contact with children and other vulnerable members of society, by making “disclosures” of any criminal, police or similar records.

The CRB provides a disclosure service, which offers access to records held by the police, together with information from the following lists: Protection of Children Act 1999 (POCA), Protection of Vulnerable Adults (POVA) and List 99. A charge is made for obtaining a disclosure for paid positions, although disclosures for volunteers, which will include the majority of trustees, are free but will incur an administration charge from the umbrella group they choose to use. A list of umbrella bodies is available online.

Tel: 0870 90 90 811
Website: www.crb.gov.uk

Every Child Matters (ECM):

The ECM website holds a series of published documents that provide guidance on safeguarding, legislation, resources and the Children Act 2004.
Website: www.everychildmatters.gov.uk

Independent Safeguarding Authority (ISA):

A new system is due to come into operation in October 2009 with the launch of the Independent Safeguarding Authority, which will be responsible for the ‘vetting and barring’ processes. Further information is available at www.isa-gov.org.uk
NSPCC:

The NSPCC offers online child protection resources and a Child Protection 24 hour Helpline that provides counselling, information and advice to anyone concerned about a child at risk.
Tel: 080 8800 500
Website: www.nspcc.org.uk
Email: help@nspcc.org.uk

Nottinghamshire Safeguarding Children Board (NSCB):

NSCB is a statutory partnership that agrees how the relevant organisations in the borough will co-operate to safeguard and promote the welfare of children in Nottinghamshire and ensure that this is effective.

It is responsible for developing, monitoring and reviewing child protection policies, procedures and practice issues and making sure that training is available to people working with children. The Board works on a strategic level. The procedures are available at the following web link http://www.nottinghamshire.gov.uk/nscb/

The Local Authority Designated Officer (LADO) for Nottinghamshire can be contacted on 0115 977 3921

Nottingham City Council:

The Council is made up of many departments that work with Children, Families, Parents and Carers. However, if you have concerns that a child, young person or vulnerable adult from the city is being abused or neglected or that they may be at risk of harm, you should contact the Nottingham City Safeguarding Children Board.

Tel: 0115 876 4718
Email: safeguarding.partnerships@nottinghamcity.gov.uk
Website: http://www.nottinghamcity.gov.uk/index.aspx?articleid=843

IN AN EMERGENCY, CONTACT THE POLICE.

Next Review Date: May 2013

Ratified by the Board of Trustees at their meeting on 7th November 2012

Signed by Chair:

Print name:

Date: