

National Centre for Creative Health (NCCH)

Safeguarding Policy

Registered Charity No. 1190515

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APPENDICES

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1. INTRODUCTION

This policy applies to all staff, trustees, freelance and contracted workers, and volunteers (aka 'associated personnel') of NCCH. **The policy is split into 2 parts: children and adults.**

1.1.Purpose

The purpose of this policy is to protect children, adults at risk of harm and beneficiaries of assistance, from any harm that may be caused due to their coming into contact with NCCH. This includes harm arising from:

- The conduct of staff, NCCH trustees or personnel associated with NCCH, including other beneficiaries.
- The design and implementation of NCCH's programmes and activities

The policy lays out the commitments made by NCCH and informs staff, trustees and associated personnel of their responsibilities in relation to safeguarding.

This policy does not cover: Anti-Harassment and Bullying.

This policy aligns with the guidance laid out by the Charity Commission in their document 'Safeguarding and protecting people for charities and trustees' which is accessible at: <https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees>

1.2. Policy Statement

NCCH believes that everyone we come into contact with, regardless of age, gender identity, disability, sexual orientation or ethnic origin has the right to be protected from all forms of harm, abuse, neglect and exploitation. NCCH will not tolerate abuse and exploitation by staff, NCCH trustees or associated personnel in carrying out work on NCCH's behalf.

This policy will address the following areas of safeguarding: child safeguarding, adult safeguarding, and protection from criminal exploitation (including sexual, gang related and exploitation by modern slavery) and abuse.

The policy also covers suspected abuse seen by NCCH staff, trustees and associated personnel in the course of their work, but perpetrated by those not associated with NCCH.

1.3. NCCH responsibilities

NCCH will:

- Ensure all staff, trustees and associated personnel have access to, are familiar with, and know their responsibilities within this policy.
- Design and undertake all its programmes and activities in a way that protects both children and adults from any risk of harm that may arise from their coming into contact with NCCH. This includes the way in which information about individuals in undertaking activities is gathered, stored, and communicated.

- Implement safeguarding procedures when recruiting, managing and deploying staff, trustees and associated personnel, including seeking appropriate references prior to interview where possible and carrying out Disclosure and Barring checks as required.
- Ensure staff, trustees and associated personnel receive training on safeguarding children and adults, including aspects of recognising abuse as above, at a level commensurate with their role in the organisation.
- Support the safety of staff, trustees, and associated personnel by offering suitable and sufficient training procedures if their NCCH role includes 'regulated activity' with children and adults at risk, this may include carrying out lone working risk assessments if required.
- Follow up on reports of safeguarding concerns promptly and according to due process, involving statutory agencies as required, regardless of whether the alleged abuse has been perpetrated by NCCH staff, trustees or associated personnel.

NCCH has in place a Designated Safeguarding Lead (DSL) to champion Safeguarding in all aspects of our work. The Designated Safeguarding lead is:

William Boa, NCCH Trustee, who can be contacted at bill.boa@btinternet.com / 07500 844514

1.4. Trustee and Staff responsibilities

NCCH staff, trustees and associated personnel must ensure legal compliance when working with or around children, adults at risk and other parties. This includes protection from sexual exploitation and abuse.

Additionally, NCCH staff, trustees and associated personnel are obliged to:

- Contribute to creating and maintaining an environment that prevents safeguarding violations and promotes the implementation of the Safeguarding Policy
- Report any concerns or suspicions regarding safeguarding of children and adults at risk of harm and also any legal violations by NCCH staff, trustees or associated personnel to the appropriate staff member, NCCH Director or Designated Safeguarding Lead.

2. PART 1 – SAFEGUARDING CHILDREN

2.1. What is safeguarding children?

Everyone who comes into contact with children and families has a role to play. A child is defined as anyone who has not yet reached their 18th birthday. As a Charity we are an important part of the wider safeguarding system for children via a multi-agency approach including VCSE's (voluntary, charity, social enterprises), a system described in [Working together to safeguard children 2023: statutory guidance](#)

Therefore, everyone who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, we should consider, at all times, what is in the best interests of the child. No single individual can have a full picture of a child's needs and circumstances. If children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information, and taking prompt action.

Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment
- preventing the impairment of children's mental and physical 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

2.2. Recognising Child Abuse – Terms and Definitions

Safeguarding is everyone's business. All staff and trustees will be adequately trained in regard to their role in Safeguarding and Child and Adult Protection and will aim to recognise and act upon any form of abuse. Indicators of abuse and neglect (definitions from Keeping Children Safe in Education, 2023)

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

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

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Other indicators

Child-on-child abuse: Children can abuse other children (often referred to as child-on-child abuse) through but not limited to: bullying (including cyberbullying, prejudice-based and discriminatory bullying); abuse in intimate personal relationships; physical abuse; sexual violence or harassment (These may all include an online element which facilitates or encourages abuse). Concerns about this or disclosures by other children must be taken seriously and staff should consult with the Designated Safeguarding Lead.

Child Criminal Exploitation (CCE) and Child Sexual Exploitation (CSE): Both CCE and CSE are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs and may be at risk of criminal exploitation.

Domestic Abuse: Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional. Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse). All of which can have a detrimental and long-term impact on their health, wellbeing, development, and ability to learn.

Mental Health: All staff should be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect, or exploitation. Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem.

Concerns may refer to only one or more of the above categories of abuse and may occur in a range of settings. Abuse may not always present as one incident but could present as a pattern of concern about the welfare of the child.

Staff training will include these issues and staff will be open and alert to the possibility of abuse of children under the categories stated above.

More detailed types of abuse can be referenced here - <https://learning.nspcc.org.uk/child-abuse-and-neglect>

Also, additional information can be found here - <https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused-2>

Also, anyone can also seek advice at any time from the NSPCC helpline – help@nspcc.org.uk or 0808 800 5000.

2.3. Disclosure of abuse made by a child

In addition to recognising the signs of abuse above, NCCH will also ensure that children are listened to and that any disclosures or allegations are taken seriously:

The term 'disclosure' usually relates to a child telling you about familial abuse or abuse elsewhere in their lives. This type of 'disclosure' may also include children who disclose something which is categorised as abuse, however they may not fully view or understand it as abuse if the person involved is a close relative or friend.

The term 'disclosure' is distinct from the term 'allegation' which usually relates to a concern being raised regarding someone working or volunteering with children (see 'Allegations Management' below)

If a child discloses abuse or anything categorised as abuse to NCCH staff, trustees or associated personnel, a consultation with the Designated Safeguarding Lead is required: this will include a discussion about how to appropriately reassure and support, and whether a referral to a statutory agency is required. This should be done before any other parties are informed. As next steps might involve making a referral directly to children's social care/the police.

For a clear step-by-step flowchart laying out the reporting procedure for Disclosure of Abuse Made by a Child, please see Appendix I.

The NSPCC offers useful online resources which can help with responding to a child who is disclosing abuse: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/>

2.4. Allegations Management – Abuse of Children

Allegations of abuse against children by NCCH staff, trustees and associated personnel working with children come under the government's statutory guidelines. All concerns about professionals' behaviour towards children, whether their own children or children of others, must be shared, whether or not the professional works or volunteers directly for NCCH.

Allegations may be made when an NCCH staff member, trustee or associated personnel has:

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

Allegations can be made in relation to physical chastisement and restraint but can also relate to inappropriate relationships between members of staff and children or young people, for example:

- Having a sexual relationship with a child under 18 if in a position of trust in respect of that child, even if consensual (see sections 16-19 [Sexual Offences Act 2003](#));
- 'Grooming', i.e. meeting a child under 16 with intent to commit a relevant offence (see section 15 Sexual Offences Act 2003);
- Other 'grooming' giving rise to concerns of a broader child protection nature e.g. inappropriate text / e- mail messages or images, gifts, socialising etc;
- Possession of indecent photographs / pseudo-photographs (an image, whether made by computer graphics or otherwise howsoever, which appears to be a photograph) of children.

In addition, these procedures should be applied when there is an allegation that any person who works with children:

- Has behaved in a way in their personal life that raises safeguarding concerns. These concerns do not have to directly relate to a child but could, for example, include arrest for possession of a weapon;
- As a parent or carer, has become subject to child protection procedures;
- Is closely associated with someone in their personal lives (e.g. partner, member of the family or other household member) who may present a risk of harm to children for whom the member of staff is responsible in their employment/volunteering.

Allegations will be investigated promptly. In the interests of transparency and accountability, NCCH will ensure clear recording of decisions and recommendations arising from the investigation.

Information should not be discussed with other members of staff, but should be reported to the highest person not implicated in the allegation - **Alex Coulter, NCCH Director** who can be contacted at alexandra@ncch.org.uk/ 07973 345967

If the allegation is about the Director, it should be reported to **William Boa, NCCH Trustee** who can be contacted at bill.boa@btinternet.com / 07500 844514

All allegations of abuse of children made against those working or volunteering with children will be taken seriously and will be reported to, and discussed with, the Local Authority Designated Office relevant to the geographic area where the allegation took place, so that they can be fully investigated and a referral made to a local authority children's social care for assessment for statutory services. You can find a local council children's social care team via <https://www.gov.uk/report-child-abuse-to-local-council>

NCCH will, with the advice from the Local Authority Designated Office, make a decision on whether the allegation meets the thresholds. If so, NCCH will work with the Local Authority Designated Officer, attending the multi-agency Allegations Management meeting involving police, children's social care and any other employer to determine the way forward. NCCH will take the Local Authority Designated Officer advice on when and how the individual should be informed so that evidence may be preserved and children protected. NCCH will always contact the Local Authority Designated Office relevant to the geographic area.

For a clear step-by-step flowchart laying out the reporting procedure for Allegations Management in the case of Abuse of Children, please see Appendix II.

3. PART 2 – SAFEGUARDING ADULTS

There are 10 categories of abuse for adults with additional care needs ('adults at risk of harm'):

- **Sexual abuse**
- **Physical Abuse**
- **Psychological or emotional abuse** - can be by action or omission – e.g. causing someone to feel scared by not coming back when you say you will, or causing them to feel frightened by telling them something that isn't true
- **Neglect** – including acts of omission such as not providing medication
- **Self-neglect**
- **Financial or material abuse**
- **Criminal Exploitation** – including Modern Slavery (see the [Modern Slavery Act 2015](#)): exploitation of people who have been forced, deceived, or coerced into a life of labour and servitude; exploitation by gangs; and human trafficking
- **Domestic abuse** - between beneficiaries, between families (children/parents) and

between young people

- **Discriminatory abuse** – can be from staff, other beneficiaries
- **Organisational or institutional abuse** – where abuse has become part of the organisation's culture

Many of the signs of abuse are similar to those in children. However, Adults can choose to take risks and to place themselves in difficult situations, or refuse to accept protection as long as they have the capacity to do so. Children cannot choose not to be protected.

Adults may be vulnerable or have additional care needs at certain times within their lives for example, during physical and mental illness, when intoxicated or under the influence of drugs. Some 'adults at risk' may not fully view or understand something as abuse if the person involved is a close relative or friend. Therefore, it is important to talk to adults about the decisions they are making and ensure they understand if they appear to be putting themselves at risk. If not, they may need protecting and a referral should be made to adult social care.

Safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the authority is meeting any of those needs),
- is experiencing, or is at risk of, abuse or neglect, and
- as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it. (Care Act 2014, section 42)

Such Adults at Risk of Harm is referred to in this document as 'adults at risk'

3.1.Over 18's disclosing historic sexual abuse

Following an increase in public awareness about historic abuse there has been an increase in the number of people disclosing historic sexual abuse.

If an offence was committed before the person turned 18 it is still covered by the Child Protection Process even if that person is now an adult.

A person over 18 who is making the disclosure does have the option of not wishing to take further action. However, if it becomes clear that the perpetrator is still alive and has access to children e.g. grandchildren, or works with children in a paid or unpaid capacity there is a legal responsibility to report the allegation because other children may be at risk of harm.

3.2.Domestic Abuse

Since the introduction of the [Care Act \(2014\)](#), Domestic Violence and Abuse has been recognised as a safeguarding category of abuse in its own right for the protection of 'adults at risk'. Therefore, consideration should also be made regarding whether a referral should also be made to Adult Social Care services for the victim/survivor of abuse.

For a clear step-by-step flowchart laying out the reporting procedure for Disclosure/Observation of Adults at Risk, please see Appendix III.

3.3. Allegations Management – Abuse of Adults at Risk of Harm

Where concerns are raised about someone who works with Adults at Risk of Harm, NCCH must assess any potential risk to these adults who are beneficiaries of the organisation's activities, and, if necessary, to take action to safeguard those adults, whether the allegation or concern is current or historical.

If an NCCH staff member, trustee or associated personnel (a 'person in a position of trust') is alleged to have abused or harmed an 'adult at risk', or may pose a risk of abuse to an 'adult at risk', it is essential that the concerns are appropriately reported and responded to.

Examples of concerns could include allegations that relate to a person who has:

- Behaved in a way that has harmed, or may have harmed an 'adult at risk'.
- Committed a criminal offence against, or related to, an 'adult at risk'.
- Behaved towards an adult in a way that indicates they may pose a risk of harm to an 'adult at risk'.

Concerns could also arise from the person's home / personal life, as well as within their work and may include situations such as:

- A person has behaved (or is alleged to have behaved) towards another adult in a way that indicates they may pose a risk of harm to an 'adult at risk'. For example, this may include situations where a person is being investigated by the police for domestic abuse to a partner and also undertakes voluntary work with 'adults at risk'.
- A person has behaved (or is alleged to have behaved) towards children in a way that indicates that they may pose a risk of harm to an 'adult at risk'. For example, this may include situations where a person is alleged to have abused a child, and is a student undertaking professional training to work with 'adults at risk'.
- A person is the subject of a formal safeguarding enquiry into allegations of abuse or neglect which have occurred in one setting. However, there are also concerns that the person is employed, volunteers or is a student in another setting where there are 'adults at risk'.

When a person's conduct towards an adult may impact on their suitability to work with or continue to work with children, this must be referred to the Local Authority Designated Office. The purpose of the process is to ensure that risks potentially posed by the person are appropriately managed, alongside the specific safeguarding needs of the adult at risk.

Allegations must be investigated promptly. In the interests of transparency and accountability, NCCH will ensure clear recording of decisions and recommendations arising from the investigation.

For a clear step-by-step flowchart laying out the reporting procedure for Allegations Management in the case of Abuse of Adults at Risk, please see Appendix IV.

4. ENABLING REPORTS

Any NCCH staff, trustees and associated personnel reporting concerns via the following steps will be protected in line with **NCCH's Whistleblowing Policy** section entitled 'Policy Safeguards'.

NCCH will also accept complaints from external sources such as members of the public, partners and official bodies.

4.1. How to report / respond to a safeguarding concern

NCCH encourages its staff, trustees and associated personnel to follow these basic principles around responding to disclosures and reports:

- Always make sure the person speaking up feels they're being listened to and supported
- Don't promise to keep information confidential between you and them. Refer to and follow the organisation's procedures to make sure information is only shared with people who need and have the right to know
- Ask for their consent to share the information – if they refuse and you are still worried that they or someone else is at risk of harm, you cannot wait for this consent. You must share this information to the person responsible for safeguarding in your organisation
- Tell the Designated Safeguarding Lead about any concerns so they can decide what the next steps are
- Write a clear statement of what you have been told, seen, or heard. What to include:
 - Who is making the report.
 - When the report was made
 - What the concern is (using the 'who, what, where, when' method).
 - Why they were concerned.
- When you've been told something is wrong, don't go straight to the person that's been reported. Instead, tell the Designated Safeguarding Lead

NCCH expects the reporting of safeguarding concerns to be completed in the first instance by email or in an emergency by phone. Names should not be included in full via email but followed up with a conversation. Reports should be as detailed as possible in order to enable a decision to be made.

To support and guide NCCH staff, trustees and associated personnel through the process of reporting a safeguarding concern, and to support NCCH senior staff and Designated Safeguarding Lead in taking the right steps to respond to reported concerns, the organisation has designed a set of flowcharts, as mentioned earlier in this document, which cover the following procedures:

i. Disclosure of Abuse Made by a Child

ii. Allegations Management – Abuse of Children

iii. Disclosure/Observation of Adults at Risk

iv. Allegations Management – Abuse of Adults at Risk

These will be made easily accessible to all staff, trustees and associated personnel as digital copies, and will be provided on-hand as hard copies for any facilitating staff at physical NCCH events, and residential activities.

Copies of these flowcharts can be found in Appendices I - IV

In certain circumstances when it is felt that a specific, tailored pathway is appropriate – for example in a partnership project situation or a specific type of event – NCCH will create customised flowcharts to be used for that specific activity, and make all staff, trustees and associated personnel aware of this specific recommended procedure.

5. CONFIDENTIALITY

It is essential that confidentiality is maintained at all stages of the process when dealing with safeguarding concerns. Information relating to the concern and subsequent case management should be shared on a need to know basis only and should be kept secure at all times.

However, confidentiality is not a bar to sharing information regarding adult and child protection. A consultation with the Safeguarding Lead is not a breach of confidentiality and should be a consideration for any member of staff, volunteer or trustee when coming across a safeguarding concern.

Data protection considerations are not a barrier to making safeguarding referrals. The UK [General Data Protection Regulation \(UK GDPR\)](#) based on the Data Protection Act 2018 does not prevent, or limit, the sharing of information for the purposes of keeping children, young people and adults 'at risk of harm' safe. It makes clear that safeguarding is a key consideration when deciding when and what data to share within and between organisations.

UK GDPR, and the Data Protection Act 2018 and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately. As such confidentiality is important, information should only be shared with those who need to know.

Sharing information effectively:

- any NCCH staff, trustees and associated personnel should be confident of the processing conditions, which allow them to store, and share, the information that they need to carry out their safeguarding role. Information which is relevant to safeguarding will often be data which is considered 'special category personal data' meaning it is sensitive and personal
- where NCCH staff, trustees and associated personnel need to share special category personal data, they should be aware that the Data Protection Act 2018 includes 'safeguarding of children and individuals at risk' as a condition that allows practitioners to share information without consent
- information can be shared legally without consent, if a NCCH staff member, trustee and associated personnel is unable to, cannot be reasonably expected to gain

consent from the individual, or if to gain consent could place a child at risk.

- relevant personal information can be shared lawfully if it is to keep a child or individual at risk safe from neglect or physical, emotional or mental harm, or if it is protecting their physical, mental, or emotional well-being.

When taking decisions about what information to share, you should consider how much information you need to release. Not sharing more data than is necessary to be of use is a key element of the UK GDPR and Data Protection Act 2018, and you should consider the impact of disclosing information on the information subject and any third parties. Information must be proportionate to the need and level of risk.

Information sharing decisions should be recorded, whether or not the decision is taken to share. If the decision is to share, reasons should be cited including what information has been shared and with whom, in line with organisational procedures. If the decision is not to share, it is good practice to record the reasons for this decision and discuss them with the requester.

How to identify how much information to share

- Distinguish fact from opinion
- Ensure that you are giving the right information to the right individual
- Ensure where possible that you are sharing the information securely
- Where possible, be transparent with the individual, informing them that that the information has been shared, as long as doing so does not create or increase the risk of harm to the individual.

For more guidance on information sharing visit

<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

6. REPORT RETENTION

Once a report has been made or information shared we must be consider the storage and retention of this data.

Types of report could include:

- an internal incident report
- a referral report to social services
- a referral report to the police
- a report to the Charity Commission or other organisations.

Where no legal requirement to retain information beyond the closure of the record exists, NCCH will not hold information longer than 6 years after the subjects last contact.

Exceptions to the 6-year period will occur when records:

- Need to be retained because the information in them is relevant to legal action that has been started
- Are required to be kept longer by law
- Are archived for historical purposes (e.g. where NCCH was party to legal proceedings or involved in proceedings brought by a local authority)
- Consist of a sample of records maintained for the purposes of research
- Relate to individuals and providers of services who have, or whose staff, have been judged unsatisfactory
- Are held in order to provide, for the subject, aspects of his/her personal history (e.g. where the child might seek access to the file at a later date and the information would not be available elsewhere)."

In some rare circumstances, information may be indefinitely, but if this is the case, there should be a review process scheduled at regular yearly intervals to ensure data is not retained where it is unnecessary to do so. When records are being kept for more than the 6-year period, files need to be clearly marked and the reasons for the extension period clearly identified.

Staff personal data is kept in accordance with NCCH's Data Protection Policy, however in regard to safeguarding data retention, it is important that NCCH keeps a clear and comprehensive summary of any allegations made, details of how the allegations were followed up and resolved, and of any action taken and decisions reached. This should be kept in a NCCH staff, trustees and associated personnel confidential personnel file and a copy should be given to the individual. Such information should be retained on file, including for people who leave the organisation, at least until the person reaches normal retirement age, or for 10 years if that is longer.

The purpose of this record is to enable accurate information to be given in response to any future request for a reference. It will provide clarification in cases where a future DBS disclosure reveals information from the police that an allegation was made but did not result in a prosecution or a conviction. It will also prevent unnecessary re-investigation if, as sometimes happens, allegations resurface after a period of time.

7. PARTNERSHIP PROJECTS AND COLLABORATION

Protecting children and adults at risk of harm is extremely important in all aspects of NCCH's work. NCCH will ensure that prior to the engagement in any partnership or collaboration, for example working with a delivery partner on a joint project, the charity is actively satisfied that the partner organisation has in place a Safeguarding Policy and procedures, including safer recruitment, and that these are robustly and routinely used. This satisfaction will be sought through structured conversations prior to recruitment, and through group meetings about collaboratively managing safeguarding at the beginning of any partnership working, and throughout the period of the active partnership.

NCCH will ask all collaborating partners delivering work which includes 'regulated activity' with children and adults at risk to read and sign NCCH's Safeguarding Code of Conduct Agreement and Declaration of Disclosure for Collaborating Partners, and will actively request a Safeguarding Meeting with collaborating partners to inform our NCCH

Collaborative Safeguarding Risk Mapping Tool, which assesses the context in which the programme/project is to take place and to identify any risks and issues related to safeguarding within these contexts.

NCCH expects all collaborating partners to abide by our Safeguarding Photography/Filming Procedures. NCCH will ask all partners to show proof of their own Consent and Release forms prior to any photography or images being used, or alternatively NCCH may ask partners to use NCCH's Consent and Release Forms if required for a partnership project.

Risk Mapping Tool template can be viewed here: <https://ncch.org.uk/uploads/NCCH-Collaborating-Partners-Safeguarding-Risk-Mapping-Tool-Template.pdf>

Safeguarding Code of Conduct Agreement and Declaration of Disclosure for Collaborating Partners template can be viewed here: <https://ncch.org.uk/uploads/NCCH-Safeguarding-Code-of-Conduct-Agreement-and-Declaration-of-Disclosure-for-Collaborating-Partners.pdf>

8. RECRUITMENT

NCCH senior staff have undertaken training in Safer Recruitment and have designed a **NCCH Safer Recruitment Policy** to guide all staff in robust, consistent and safe measures when handling recruitment, particularly in relation to any work that includes working with children, young people and 'adults at risk'.

9. NCCH PROGRAMME STRANDS AND DELIVERY

This includes residential and/or day-long events and activities such as:

- Conferences (including conference workshops)
- Residential or delivery of programmes (e.g.Huddles)
- Network meetings (e.g Hives)
- Delivery of training sessions

In order to create a safe environment for its programme activities and events, NCCH will put in place the following:

- Risk assessments, which will be put in place prior to any event, programme or project and will include (but not limited to): buildings and accommodation, attendees, activities and context and will look to mitigate, assess and take action.
- Appropriate participant/attendee surveys to gather information before the event, e.g. emergency contact details.
- Information packs for NCCH staff, trustees and associated personnel providing safeguarding information, venue health and safety information, risk assessments, and safe facilitation guidelines specific to the activity.

- Scheduled time for staff, trustees and associated personnel to discuss and agree safe facilitation practice, before any programmed event.
- For instances where NCCH staff, trustees or associated personnel will be delivering an activity in direct contact with 'adults at risk' or children, that NCCH confirms they have a clear, current DBS check and any relevant training is completed before the activity begins.

10.E-SAFETY

It is important to be aware of the risks of vulnerability and exploitation through the use of I.T. NCCH staff, trustees, and associated personnel must be alert to the potential risks that children and 'adults at risk' may be exposed to, and see that steps are taken to mitigate the risk of this occurring via:

- **Content** – e.g. exposure to age-inappropriate material, inaccurate or misleading information, socially unacceptable and illegal material (e.g. inciting violence, hate, intolerance, images of abuse).
- **Contact** – e.g. grooming using communication and social media leading to inappropriate behaviour or abuse.
- **Commerce** – exposure to inappropriate advertising, online gambling, identity theft and financial scams.
- **Culture** – bullying via websites/social media, mobile phones and other communication technologies, inappropriate downloading of materials, exposure to inappropriate advertising, online gambling and financial scams.

Staff, trustees and associated personnel must ensure that their personal online social media, messaging and email accounts/profiles do not include children or 'adults at risk' contacted via their work with NCCH. **This is in line with NCCH's Acceptable Usage Policy.**

11.SAFEGUARDING PHOTOGRAPHY/FILMING PROCEDURES

Photographs/Filming of children or 'adults at risk' must never be taken without permission and those wishing to be excluded from photographs/filming must be dealt with in a sensitive way.

At the NCCH we abide by the following procedures

- Gain permission from parents/guardians/carer and the young people/adults at risk
- Granted permission will be given via NCCH's Consent and Release Form
- Make sure the purpose and timeframe for using the images/footage are noted and agreed
- If the purpose or timeframe is changed then new permissions must be obtained
- Focus on activity rather than on close-ups of young people/ adults at risk as much as possible

- Photographs or moving images should represent young people/adults at risk with respect and dignity
- Not to take photographs or moving images of young people/adults at risk who are on a Protection Register
- Store photographs and moving images in a secure place with controlled access
- Not to allow photographers/image creators unsupervised access
- To ensure all authorised photographers/image creators wear appropriate identification
- Not to fully name images of young people/adults at risk unless otherwise agreed
- To be able to take photos/footage of events in public spaces but wherever possible make members of the public aware and give them the option to opt out of the images

A growing area of concern is mobile camera phones. NCCH has the policy that the use of cameras during activities with young people/adults at risk needs to be agreed with the individuals, parents, guardians or carers present. If this is not agreed by all parties photographs/film should not be taken at any time.

12. INTERNATIONAL SAFEGUARDING

From time to time, NCCH will work with international partners and participants. Where NCCH have a concern regarding safeguarding children or adults in an international situation, for example a delegate from abroad attending an event held in the UK, NCCH Senior Staff or the Designated Safeguarding Lead would contact the UK embassy linked to the nationality of the child or adult at risk. Details of embassies can be found: <https://www.gov.uk/government/publications/foreign-embassies-in-the-uk>

13. FURTHER RESOURCES

Working Together to Safeguard Children (2023):

<https://www.gov.uk/government/publications/working-together-to-safeguard-children-2>

Making Safeguarding Personal: <https://www.local.gov.uk/our-support/sector-support-offer/care-and-health-improvement/making-safeguarding-personal>

NCVO Safeguarding Resources: <https://www.ncvo.org.uk/help-and-guidance/safeguarding/>

Leading UK Authority on Safeguarding Adults: <https://www.anncrafttrust.org/>

14. CONTACT NUMBERS

14.1. Local Authority Designated Office Contacts

NCCH will always contact the Local Authority Designated Office relevant to the geographic area where the allegation took place, so it can be fully investigated at the

correct level. You can find a local council children's social care team via <https://www.gov.uk/report-child-abuse-to-local-council>

14.2. Adult Social Care Contacts

If it is judged that an adult at risk of harm is currently at risk of abuse, and/or may not have the capacity to judge whether they are in risky situations, a referral should be made to Adult Social Care services via the local authority website. NCCH will also seek advice from the local council's Adult Social Care team. Adult Social Care contacts can be found via :

<https://www.nhs.uk/service-search/other-services/Local-Authority-Adult-Social-Care/LocationSearch/1918>

15. MONITORING AND REVIEW

Any new legislation or developments in existing legislation will be considered as and when required and the policy will be updated to reflect these developments.

The NCCH Director in conjunction with the named Trustee on this policy will review this policy every year and will make any changes necessary. All NCCH employees, Trustees, and associated Personnel are required to familiarise themselves with this policy upon their appointment to NCCH, and the Policy Owner will provide additional advice and support on this policy if requested by an employee, Trustee, or associated personnel.

Policy Adopted: October 2020

Updated October 2021; December 2022; January 2023; January 2024

Review Date: January 2025

Named Trustee: Bill Boa

Policy Owner: Director of NCCH

Signed by:



Alex Coulter, Director of NCCH

16. APPENDICES

I. Disclosure of Abuse made by a Child. *Please view PDF Flowchart at:*

<https://ncch.org.uk/uploads/Appendix-I.-NCCH-SAFEGUARDING-PROCEDURE-FLOWCHART-Disclosure-of-Abuse-made-by-a-Child.pdf>

II. Allegations Management – Abuse of Children. *Please view PDF Flowchart at:*

<https://ncch.org.uk/uploads/Appendix-II-NCCH-SAFEGUARDING-PROCEDURE-FLOWCHART-Allegations-Management-Abuse-of-Children.pdf>

III. Disclosure/Observation of Adults at Risk. *Please view PDF Flowchart at:*

<https://ncch.org.uk/uploads/Appendix-III.NCCH-PROCEDURE-FLOWCHART-Disclosure-or-Observation-of-Adults-at-Risk.pdf>

IV. Allegations Management – Abuse of Adults at Risk. *Please view PDF Flowchart at:*

<https://ncch.org.uk/uploads/Appendix-IV.-NCCH-SAFEGUARDING-PROCEDURE-FLOWCHART-Allegations-Management-Abuse-of-Adults-at-Risk.pdf>

V. Referenced NCCH policies (Available on request)

- Anti-Harassment and Bullying Policy
- Whistleblowing Policy
- Acceptable Usage Policy
- Safer Recruitment Policy