

# Micheldever & Stratton Preschool LADO Notice (Revised 4<sup>th</sup> January 2021)

Working in conjunction with the Early Years Foundation Stage Statutory Framework (EYFS).

Quality and Consistency.

A Secure Foundation.

Partnership Working.

Equality of Opportunity.

Unique Child Positive Partnerships Enabling Environment Learning and Developing

#### Introduction

*Allegation* – this is a technical term based on the definition provided by Working Together to Safeguard Children 2018. It is different to the dictionary definition of the word and the procedure still needs to be followed even if there is clear evidence that the incident has or has not happened. An allegation does not need to be formally made or explicitly described for this process to be followed.

**Person who works with children –** this covers paid and unpaid employees, contractors, volunteers and those in positions of leadership and management. This will include foster carers, approved adopters and child minders, and applies to any person, who manages or facilitates access to an establishment where children are present.

**Employer** – is used to describe the organisation, company, agency or provider that the adult is working for, in addition to those who manage or oversee the volunteer or member of staff.

This procedure applies when it is alleged that a person who works with children under 18 years of age 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 he or she may pose a risk of harm to children.

These behaviours can refer to incidents within and outside of the workplace. If the concerns are about someone's behaviour toward their own children, the police and/or children's social care must consider informing the employer in order to assess whether there may be implications of transferable risk within the role that the person holds, in which case this procedure will apply.

For allegations that are historic/non-recent (delayed reporting), please refer to the relevant <u>procedure</u>. It is also important to investigate whether the person against whom the allegation is made is still working with children, and if so, follow the procred and report to the <u>LADO</u> of the area where the individual is currently working.

Consideration will need to be given to any risk by association posed by those who live with, or are in a relationship with, adults who are being investigated for or have been convicted of offences in relation to children.

## **Roles and Responsibilities**

#### Working Together states:

Organisations and agencies working with children and families should have clear policies for dealing with allegations against people who work with children. Such policies should make a clear distinction between an allegation, a concern about the quality of care or practice or a complaint.

County level and unitary local authorities should ensure that allegations against people who work with children are not dealt with in isolation. Any action necessary to address corresponding welfare concerns in relation to the child or children involved should be taken without delay and in a coordinated manner. Local authorities should, in addition, have designated a particular officer, or team of officers (either as part of multi- agency arrangements or otherwise), to be involved in the management and oversight of allegations against people that work with children. Any such officer, or team of officers, should be sufficiently qualified and experienced to be able to fulfil this role effectively, for example qualified social workers. Any new appointments to such a role, other than current or former designated officers moving between local authorities, should be qualified social workers. Arrangements should be put in place to ensure that any allegations about those who work with children are passed to the designated officer, or team of officers, without delay.

Local authorities should put in place arrangements to provide advice and guidance on how to deal with allegations against people who work with children to employers and voluntary organisations. Local authorities should also ensure that there are appropriate arrangements in place to effectively liaise with the police and other agencies to monitor the progress of cases and ensure that they are dealt with as quickly as possible, consistent with a thorough and fair process.

Each agency or organisation should have a policy which is in keeping with the process set out in this procedure and defines what a concern, a complaint and an allegation is.

Each agency or organisation should have a senior manager who is responsible for dealing with allegations or suspicions of abuse about someone who works with children. This may be the same person who is the nominated child protection lead for the organisation.

This person should be fully trained in managing allegations against, or concerns about abuse by, a member of staff or volunteer, and should know who to contact if any concerns are raised.

All staff and volunteers should know who the responsible person is and how to contact them. If there is a concern about the nominated person, it should be reported to their deputy or another senior manager.

Each local authority has a Local Authority Designated Officer (<u>LADO</u>) who receives reports about allegations. The <u>LADO</u> provides advice and guidance to organisations,

liaises with other agencies when there are allegations, and monitors the progress of any allegations.

There are a few situations where consideration is required to determine where <u>LADO</u> responsibility rests.

The general principle is that the <u>LADO</u> of the local authority area where the individual is engaged in work with children holds responsibility. For most cases this is clear and does not require cross-border discussion.

Where an individual works in settings in two local authority areas, the <u>LADO</u> of the setting where the incident took place will take the lead and communicate with the other <u>LADO</u>(s) as required.

If the allegation is in respect of an incident in the personal life of the member of staff, then the <u>LADO</u> where the member of staff works (and where a potential risk to children has been identified) will take responsibility. If there are multiple roles carried out across different local authority areas, the <u>LADO</u> in the area with the substantive employment will lead. However, if there is no substantive employment, the <u>LADO</u> involvement will be based on the home address of the member of staff. For staff who are contracted with agencies, then the <u>LADO</u> where the member of staff works (and where a risk to children has been identified) will take responsibility.

The exception to this rule will be for foster carers who are registered with a local authority but live outside of that area. In these situations, the <u>LADO</u> of the local authority that "employs" the carers should take responsibility and notify the <u>LADO</u> in the geographical area where the children are placed.

## Confidentiality

Confidentiality should be maintained while an allegation is being investigated. Information should be restricted to those involved in the investigation or who need to know in order to protect children.

The Education Act 2002 introduced reporting restrictions preventing the publication of any material that may lead to the identification of a teacher in a school who has been accused by, or on behalf of, a pupil from the same school (where that identification would identify the teacher as the subject of the allegation). The reporting restrictions apply until the point that the accused person is charged with an offence, or until the Secretary of State publishes information about an investigation or decision in a disciplinary case arising from the allegation.

The reporting restrictions are disapplied if the individual to whom the restrictions apply effectively waives their right to anonymity by going public themselves or by giving their written consent for another to do so or if a judge lifts restrictions in response to a request to do so.

The legislation imposing restrictions makes clear that "publication" of material that may lead to the identification of the teacher who is the subject of the allegation is prohibited. "Publication" includes "any speech, writing, relevant programme or other communication in whatever form, which is addressed to the public at large or any section of the public." This means that a parent who, for example, published details of the allegation on a social networking site would be in breach of the reporting Micheldever & Stratton Pre-School, The Warren Centre, Micheldever Station, SO21 3AR, Tel: 07934981271, EY2647913, Charity Number: 1076656

restrictions (if what was published could lead to the identification of the teacher by members of the public).

In accordance with the Authorised Professional Practice published by the College of Policing (May 2017), the police will not normally provide any information to the press or media that might identify an individual who is under investigation, unless and until the person is charged with a criminal offence. (In exceptional cases where the police would like to depart from that rule, for example an appeal to trace a suspect, they must apply to a magistrates' court to request that reporting restrictions be lifted.)

For education establishments, there is information in <u>Keeping children safe in</u> <u>education 2019</u> on supporting those involved in an allegation, recordkeeping, resignations and settlement agreements, and suspension

## Responding to an allegation

When an allegation is first reported, the person to whom it is reported to should keep a written record of everything related to the allegations, including dates, times and places. They should report the allegations immediately to the designated/nominated person.

The designated/nominated person should then obtain written details about the concern and report the allegation to the LADO.

If the designated senior manager is not available, the report to <u>LADO</u> should not be unnecessarily delayed and should be made by the next most appropriate person.

They should discuss the decision in relation to the agreed threshold criteria as soon as possible and within one working day. Referrals should not be delayed in order to gather information. Failure to report an allegation or concern in accordance with procedures is a potential disciplinary matter.

Parents or carers of the child or children involved should be told about the allegation as soon as possible if they do not already know of it. However, where a strategy discussion is required, or police or children's social care services need to be involved, the case manager should not do so until those agencies have been consulted and have agreed what information can be disclosed to the parents or carers.

The employer should seek advice from the <u>LADO</u>, the police and children's social care about how much information should be disclosed to the person whom the allegation is about. If information can be shared and won't impact the investigation, the employer should inform the accused person about the nature of the allegation as soon as possible, how the enquiry will take place and what action may be taken.

The employer or children's social care should inform <u>Ofsted</u> of any allegation or concern made against a member of staff in any establishment that is regulated by them. <u>Ofsted</u> should also be invited to take part in any subsequent strategy meeting/discussion in those cases where they have regulatory responsibility.

If the allegation occurs outside of office hours and needs immediate action, the children's social care emergency out of hours team should be contacted, or the police.

If a police officer receives an allegation that is not a crime, they should report it to the designated detective sergeant on the child abuse investigation team (CAIT).

The <u>LADO</u> and the designated senior manager should assess whether there is evidence that the allegation may be false.

If the allegation is not demonstrably false and there is cause to suspect that a child is suffering or is likely to suffer <u>significant harm</u>, the <u>LADO</u> should consider referring to children's social care and ask them to convene an immediate <u>Section 47</u> strategy meeting/discussion.

The <u>LADO</u> may not be directly involved in the <u>Section 47</u> strategy discussion, but the decision of the police and social care should be reported to them as soon as possible.

If the allegation highlights that a crime has taken place, the <u>LADO</u> will refer directly to the relevant police force. The decision made by the police will be reported back to the <u>LADO</u> as soon as possible.

Following any referral to the police and/or social care there will be one of four potential outcomes:

- Joint investigation with police and children's social care
- Single investigation by children's social care
- Single investigation by the police
- Internal investigation with <u>LADO</u> oversight

Following it being established if a criminal investigation and/or social care assessment will take place, the <u>LADO</u> will discuss with relevant partners the need for a meeting to co-ordinate the strategy for investigation and share information. A meeting will only be called if there is a clear purpose or the outcome cannot be achieved via other methods of information sharing.

For cases being assessed under <u>Section 47</u>, the <u>LADO</u> will attend any meetings called and chaired by the relevant social care manager.

## Allegation meeting/discussion

Where an allegation meeting is considered appropriate, it will be called. However, if there is a <u>Section 47</u> assessment and review meetings held as part of this, the <u>Section 47</u> process will take precedence for the agenda and the allegation will be considered within the scope of that process. In these cases the social care manager will chair the meeting.

For all other meetings the <u>LADO</u> (the chair) will consider inviting from the following list of possible participants:

- Relevant social worker and their manager
- Supervising social worker and their manager when an allegation is made against a foster carer or prospective adopter
- Detective sergeant
- The designated and/or named safeguarding children health professional (CCG) when an allegation concerns a health agency worker /professional

- Designated senior manager for the employer concerned
- Where there is multiple employments, representatives from each employer
- Human resources representative
- CQC, GMC or Ofsted.

During the meeting, a decision should be made about what is needed, for example a <u>Section 47</u> enquiry, a police investigation, disciplinary processes or a <u>complex abuse investigation</u>. The meeting should ensure arrangements are made to protect the child involved, and any other children who may be affected, and appropriate support given to all children who are impacted.

Other considerations for the meeting include:

- Recommendations for suspension or equivalent
- Potential media interest
- Risk assessment of employer's safeguarding arrangements
- Timescales for future review meetings

#### Review meetings will:

- Review the actions from the prior meeting
- Seek updates from relevant parties and share information
- Review the support offered to the young person and the subject of the allegation
- Consider how messages are managed with media and other parties
- Set any further actions required

A final review meeting may be held at the end of the investigation process. This meeting will consider if the threshold for a referral to the Disclosure and Barring Service (DBS) has been met, will consider if there are lessons to be learnt from the process, and will record the outcome determined by the employer or the criminal and/or social work process.

#### Referral to the DBS

The <u>Disclosure and Barring Service (DBS)</u> was established under the Protection of Freedoms Act 2012 and merges the functions previously carried out by the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA). The relevant legislation is set out in the <u>Protection of Freedoms Act 2012</u>.

If an allegation is substantiated and the person is no longer working in their position (either through dismissal or resignation or some other means), the <u>LADO</u> should discuss with the employer whether a referral should be made to the DBS.

The duty to make a referral to the DBS may not be triggered by temporary suspension, it depends if there is sufficient information to meet the referral duty criteria. Following investigation, if the person is returned to a position working in regulated activity with children or vulnerable adults then there may not be a legal duty to make a referral. But, if a decision is made to dismiss the person or remove them from working in regulated activity, a referral needs to be made.

Regulated activity providers (employers or volunteer managers of people working in regulated activity in England, Wales and Northern Ireland) and personnel suppliers have a legal duty to refer to DBS where conditions are met. This applies even when a referral has also been made to a local authority safeguarding team or professional regulator.

If you are a regulated activity provider or fall within the category of personnel supplier, you must make a referral when both of the following conditions have been met:

#### **Condition 1**

 You withdraw permission for a person to engage in regulated activity with children and/or vulnerable adults. Or you move the person to another area of work that isn't regulated activity.

This includes situations when you would have taken the above action, but the person was re-deployed, resigned, retired, or left. For example, a teacher resigns when an allegation of harm to a student is first made.

#### **Condition 2**

You think the person has carried out one of the following:

- Engaged in relevant conduct in relation to children and/or adults. An action or inaction has harmed a child or vulnerable adult or put them at risk or harm or;
- Satisfied the harm test in relation to children and / or vulnerable adults, e.g. there has been no relevant conduct but a risk of harm to a child or vulnerable still exists; or
- Been cautioned or convicted of a relevant (automatic barring either with or without the right to make representations) offence.

#### Relevant conduct for children is:

- endangers a child or is likely to endanger a child
- if repeated against or in relation to a child would endanger the child or be likely to endanger the child
- involves sexual material relating to children (including possession of such material)
- involves sexually explicit images depicting violence against human beings (including possession of such images)
- is of a sexual nature involving a child.

A person's conduct endangers a child if they:

- harm a child
- cause a child to be harmed
- put a child at risk of harm
- attempt to harm a child
- incite another to harm a child.

#### More information can be found on the Gov.uk website

## **Organised abuse**

Investigators should be alert to signs of organised or widespread abuse and/or the involvement of other perpetrators or institutions. They should consider whether the matter should be dealt with in accordance with complex abuse procedures which, if applicable, will take priority. See <u>Organised and Complex Abuse Procedure</u>.

## Whistleblowing

All staff should be made aware of the organisation's whistleblowing policy and feel confident to voice concerns about the attitude or actions of colleagues.

If a member of staff believes that a reported allegation or concern is not being dealt with appropriately by their organisation, they should report the matter to the LADO.

## **Outcomes of allegation investigations**

Employer should take into account the following definitions when determining the outcome of allegation investigations:

- 1. **Substantiated**: there is sufficient identifiable evidence to prove the allegation.
- 2. **False**: there is sufficient evidence to disprove the allegation.
- 3. **Malicious**: there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive.
- 4. **Unsubstantiated**: this is not the same as a false allegation. It means that there is insufficient evidence to either prove or disprove the allegation; the term therefore does not imply guilt or innocence.
- 5. **Unfounded:** to reflect cases where there is no evidence or proper basis which supports the allegation being made or there is an alternative explanation being offered.

## Allegations against staff outside of the workplace

If an allegation is about a member of staff but takes place outside of their work with children, the principles outlined in these procedures still apply. These concerns will be reported to the police or social care

If an allegation or concern arises about the behaviour of a member of staff outside of their work, and this may present a risk of harm to children for whom the member of staff is responsible, the general principles outlined in these procedures still apply.

The evaluation or strategy meeting/discussion should decide whether the concern justifies approaching the employer for further information and/or inviting the employer to a further evaluation or strategy meeting/discussion about the possible risk of harm.

The <u>Section 47</u> strategy meeting/discussion should decide whether the concern justifies:

- A referral to the LADO
- Approaching the member of staff's employer for further information, in order to assess the level of risk of harm, and agreement of who will make this approach
- Inviting the employer to a further <u>Section 47</u> strategy meeting/discussion to support them in understanding and managing about dealing with the any possible transferable risk of harm.

If an allegation of abuse is against someone closely associated with a member of staff, and there is the risk of harm by association to children for whom the member of staff is responsible, a strategy meeting or a discussion should be convened held.

## **Disciplinary action**

Where a strategy meeting decides that police investigation or a referral to children's social care is not necessary (or an investigation is complete, or there is no charge or prosecution), the <u>LADO</u> and the designated senior manager should discuss whether disciplinary action is appropriate. In the case of supply, contract and volunteer workers, normal disciplinary procedures may not apply. In these circumstances, the <u>LADO</u> and employer (organisation contracting the agency) should support the providing agency in their investigation.

In addition, the organisation contracting the worker will decide whether to continue to use the person's services, or provide future work with children, and if not, whether to make a report to the DBS or regulatory body.

The agency will follow the principles followed by any other employer in their internal investigation.

## **Record keeping**

Details of allegations that are found to have been malicious should be removed from personnel records. 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 personnel file of the accused, and a copy provided to the person concerned.

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 DBS 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. Schools and colleges have an obligation to preserve records which contain information about allegations of <a href="mailto:sexual abuse">sexual abuse</a> for the Independent Inquiry into Child Sexual Abuse (IICSA), for the term of the inquiry (further information can be found on the IICSA website). All other records should be retained at least until the accused has reached normal pension age or for a period of 10 years from the date of the allegation if that is longer.

## Unsubstantiated, false and malicious allegations

False and malicious allegations are rare and may be a strong indicator of abuse elsewhere which requires further exploration. If an allegation is demonstrably false, or considered to be malicious, the employer, in consultation with the <u>LADO</u>, should refer the matter to children's social care.

If it is established that an allegation is malicious, that is has been deliberately invented, the <u>LADO</u> and employer will consider if the police should be asked to consider review the case and consider what action may be appropriate.

#### Local information

LADO Case Responsibility Protocol for Use with Other LADO Authorities

#### Other Related Policies & Procedures

The following policies provide additional information regarding the safeguarding and welfare of the children in our care:

- Acceptable Use Policy
- Admissions Policy
- Anti-bullying Policy
- Children's Records Policy
- Children's Rights & Entitlement Policy
- Committee Policy
- Complaints Policy
- Confidentiality & Client Access Policy
- Critical Incident Policy
- Diversity & Equality Policy
- Emergency Closure Policy
- Employment & Staffing Policy
- Equal Opportunities Policy
- E-safety Policy
- EYPP Policy
- GDPR Policy
- Grievance Policy
- Health & Safety Policy

- Information Sharing Policy
- Key Person & Settling In Policy
- Lockdown Policy
- Looked After Children Policy
- Managing Children & Staff Allergies Policy
- Mobile, Camera & Social Media Policy
- Organisation Policy
- Parent Involvement Policy
- Parents Alcohol & Drug Misuse Policy
- Photography & Video Policy
- Physical Contact & Handling Policy
- Prevent & British Values Policy
- Positive Behaviour Policy
- Provider Records Policy
- Recording & Reporting of Accidents & Incidents Policy
- Risk Assessment Policy
- Safeguarding Policy
- Security Policy
- Special Education Needs & Inclusion Policy
- Staff Alcohol & Drugs Misuse Policy
- Staff Behaviour Policy
- Staffing & Volunteers Policy
- Suitable Persons Protection
- Transfer of Records Policy
- Uncollected or Lost Children Policy
- Usage, Storage & Retention Policy
- Whistleblowing Policy
- Working in Partnership Policy

This policy will be monitored and evaluated at committee meetings. It will be reviewed annually and unless new legislation or an incident occurs which requires an immediate review of this policy

January 2021

**Review Date: January 2025** 

*This Nation was adopted by the committee on OC	104 104
*This Notice was adopted by the committee on 26 Signed: Claire Bentham	
*This document was agreed via email by our Trustees as we we due to the Covid-19 virus (Jan 2021)	
Reviewed Date: 21/01/21	Signature: Mrs N L Mann-Rae
Amendments: Removed FS policies	
Reviewed Date: 20/01/23	Signature: Mrs N L Mann-Rae
Amendments:	
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# 7.1 Hampshire, Isle of Wight, Portsmouth & Southampton (HIPS) Safeguarding Children Partnership Arrangements

## **Background**

Working Together 2018 (WT2018) allows more flexibility for safeguarding arrangements to operate across larger areas/multiple local authority boundaries. Early discussions in the Local Safeguarding Children Board (<u>LSCBs</u>) across Hampshire and the Isle of Wight indicated that each local authority area will retain responsibility for their own local safeguarding arrangements, under the auspices of the three new safeguarding partners (local authority, police and health via the CCG).

It was acknowledged that for many agencies and professionals who work across more than one of the local authority areas, there would be benefit in greater joined-up working on strategic issues and common themes.

Given that each local area was keen to retain some degree of local arrangement, partners agreed to form a new Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS) Executive Group, supported by some specific four-area subgroups, to work alongside the four local partnerships.

#### **Desired outcomes**

The overarching outcome of the new arrangements is that **children in Hampshire and the Isle of Wight should be safeguarded from harm**. More specifically, the intention is that new ways of working are based on the following principles:

- be designed to ensure that services are delivered in the best interests of the child.
- not duplicate existing work, but provide strategic direction and challenge to enable enhanced co-ordination of activity and understanding of impact.
- provide a clear route for escalation of any system-wide issues and an agreed forum for the Safeguarding Partners to collectively fulfil their statutory duties.
- ensure that we make the best use of collective resources.
- be established within the existing resources (both financial and in people hours terms) and should not incur additional cost to agencies.
- local partnerships can continue to identify their own priorities in addition to any identified at a strategic level by the HIPS Executive.
- local areas ensure that the voices of children and families are clearly represented in local partnership work.

# Role of HIPS arrangements and relationship with Local Safeguarding Children Partnership

The role of the HIPS Executive Group is to provide strategic direction and coordination of safeguarding activity across the pan Hampshire and Isle of Wight area, to promote best practice, implement local and national learning and identify issues requiring strategic intervention by the Safeguarding Partners across the HIPS area.

## Membership and frequency of HIPS Executive

To support this role and relationship of mutual accountability, the membership of HIPS will be focused to the three Safeguarding Partners across each of the four areas, namely:

- Directors of Children's Services from each of the represented local authorities. Directors of Children's Services will represent education establishments (those who are maintained by the Local Authority) including Early Years services.
- Hampshire Constabulary, represented through the Chief Superintendent with lead safeguarding responsibility.
- Health, represented by <u>Clinical Commissioning Groups</u> (<u>CCGs</u>) of West Hampshire <u>CCG</u>, Hampshire and Isle of Wight <u>CCG</u>, Portsmouth <u>CCG</u> and Southampton <u>CCG</u>. <u>Clinical Commissioning Group</u> representatives will represent the health sector in their local area. They will ensure dialogue with other health commissioning bodies across the HIPS area, namely NHS England (South East) and NHS England Specialist Commissioning.
- The Safeguarding Partners have also invited the Regional Schools Commissioner to attend the group to represent Academy educational establishments.

The Safeguarding Partners will act as the conduits and facilitate the flow of information and business between the HIPS Executive and the local Safeguarding Children Partnerships.

## **Chairing of a HIPS Executive**

The HIPS Executive will be chaired by an Independent Chair newly recruited by the Safeguarding Partners for this role.

## **Related groups**

The HIPS Executive will convene four standing subgroups where there is a clear benefit to coordinating specific areas of business across the HIPS area:

- **Health group** This group will coordinate safeguarding business across the health economy across the HIPS area. It will take the lead on the promotion and implementation of any best practice and learning for the health sector. It should be noted that the Isle of Wight will continue to hold its local Health Subgroup across Children and Adults but core members from that group, including the Chair, will attend the HIPS Health Group to ensure alignment and cross-communication of health themes.
- Child Exploitation group The purpose of this group is to develop a shared understanding of the threat/need in respect of child exploitation, including patterns of activity that may reflect the organised exploitation of children; identify risks requiring strategic intervention and operational issues that can be dealt with more appropriately through the existing local structures; to drive forward the response to child exploitation through a tasking system that maximises the specialist skills and experience of staff across the pan-Hampshire and Isle of Wight area; to ensure that the vulnerabilities and risks associated with children who go missing are understood and incorporated within a consistent and robust multi-agency response.
- Procedures group This group will develop all common multi-agency policies and procedures that inform single agency policy and practice across the HIPS area and lead on the Section 11 self-assessment audit.
- <u>Child Death Overview Panel</u> This Group will perform the functions of the <u>Child Death Overview Panel</u> as outlined in Working Together 2018. It should be noted that this group will report to the HIPS Executive until the Pan Hampshire and Isle of Wight Integrated Care System (ICS) is fully established, at which point the governance and reporting functions will transfer to the ICS.

Other workstreams, e.g. Quality Assurance, Workforce Development, and specific areas of business will be undertaken via Task and Finish or project focused groups. The partners remain committed to undertaking the Section 11 Audit process on a Pan Hampshire and Isle of Wight basis (see Figure on page 10).

Local Partnerships will commission and carry out their own local learning reviews. The learning and good practice arising will feed into both the local partnerships and the HIPS Executive to allow themes to be reviewed across the broad area and inform future initiatives.

The implementation and effectiveness of the new arrangements will be reviewed by the Safeguarding Partners in September 2020.

## Ways of Working

The working practices of Safeguarding Partnership members will be considered locally with a view to securing effective operation of the <u>LSCB</u> functions and ensuring all member organisations are effectively engaged.

It may be appropriate for the Safeguarding Partnership to set up working groups or sub-groups, on a short-term or a standing basis to:

- Carry out specific tasks, for example: maintaining and updating procedures;
- Provide specialist advice, for example: in respect of working with specific ethnic and cultural groups, or with disabled children and/or parents;

- Bring together representatives of a sector to discuss relevant issues and to provide a
  contribution from that sector to safeguarding work, for example: schools, the voluntary
  and community sector, faith groups; and
- Focus on defined geographical areas within the Safeguarding Partnership boundaries;
- As a 'core group' or 'executive group' of Safeguarding Partnership members, to undertake some day-to-day business by local agreement.

Each Safeguarding Partner in the Consortium will establish local arrangements for working groups or sub-groups the details of which will be available on their respective websites.

All groups which are established by the Safeguarding Partnership should work to agreed terms of reference, with explicit lines of reporting, communication and accountability to the Safeguarding Partnership. This may take the form of a written constitution detailing a job description for all members and service level agreements between the Safeguarding Partnership, agencies and other partnerships. Chairs of sub-groups should be Safeguarding Partnership members.

Each Safeguarding Partnership should consider how to put in place arrangements to ascertain views of parents and carers and the wishes and feelings of children (including children who might not ordinary be heard) about the priorities and effectiveness of local safeguarding work, including issues of access to services and contact points for children to safeguard and promote welfare. The Safeguarding Partnership should also consider how children, parents and carers can be given a measure of choice and control in the development of services.

#### **Annual Business Plan**

Each Safeguarding Partner will produce an annual business plan setting out:

- A work programme for the following year to include measurable objectives;
- Relevant management information of child protection activity in the previous year;
- Progress against objectives established for the year ending.

## **Safeguarding Partnership Annual Report**

The Chair must publish an annual report on the effectiveness of child safeguarding and promoting the welfare of children in the local area (this is a statutory requirement under **section 14A of the Children Act 2004**). The annual report should be published in relation to the preceding financial year and should fit with local agencies' planning, commissioning and budget cycles. The report should be submitted to the Chief Executive, Leader of the Council, the local police and crime commissioner and the Chair of the Health and Wellbeing Board.

The report should provide a rigorous and transparent assessment of the performance and effectiveness of local services. It should identify areas of weakness, the causes of those weaknesses and the action being taken to address them as well as other proposals for action. The report should include lessons from reviews undertaken within the reporting period.

The report should also list the contributions made to the Safeguarding Partnership by partner agencies and details of what the Safeguarding Partnership has spent, including on Child Death Reviews, <u>Serious Case Reviews</u> and other specific expenditure such as learning events or training.

## **Monitoring and Inspection**

The Safeguarding Partnership 's work to ensure the effectiveness of work to safeguard and promote the welfare of children by member organisations will be a peer review process, based

on self-evaluation, performance indicators and a joint audit. Its aim is to promote high standards of safeguarding work and to foster a culture of continuous improvement. It will also identify and act on identified weaknesses in services.

Where it is found that a Board partner is not performing effectively in safeguarding and promoting the welfare of children, and the Safeguarding Partnership is not convinced that any planned action to improve performance will be adequate, the Safeguarding Partnership chair or a member or employee designated by the chair should explain these concerns to those individuals and organisations that need to be aware of the failing and may be able to take action.

As part of the monitoring and evaluation function of the Safeguarding Partnership, there is a requirement for each Safeguarding Partner to ensure appropriate links with any secure setting in its area and be able to scrutinise restraint techniques, the polices and protocols which surround the use of restraint, and incidences and injuries. Safeguarding Partnerships with a secure establishment(s) in its areas should report annually to the Youth Justice Board on how effectively the establishment(s) is managing use of restraint, the reports should be provided more frequently if there are concerns on the use of restraint. Consideration should be given to sharing the information with relevant inspectorates (HMIP and Ofsted. Where appropriate, members of the Safeguarding Partnership (with secure establishments in its area) should be given demonstrations in the techniques accredited for use to assist their consideration of any child protection or safeguarding issue that might arise in relation to restraint.

All incidents when restraint is used in custodial settings and in which results in an injury to a young person should be notified to, and subsequent action monitored, by the Safeguarding Partnership.

Individual services will be assessed through their own quality regimes. Annual performance assessment of council children's services (APA), by <a href="OFSTED">OFSTED</a>, looks at the contribution of local authorities to outcomes for children, with an overall judgement supported by separate judgements on social care services for children and on education services. It draws on performance information, inspection evidence, other documents and self assessment. These inspectorates in their other work, plus other inspectorates such as the Healthcare Commission, and Her Majesty's Inspectorates of Constabulary, Prisons, and Probation, will have as part of their remit considering the effectiveness of their agencies' role in safeguarding and promoting the welfare of children. The LSCB should draw on their work.

The Safeguarding Partnership will be able to feed its views about the quality of work to safeguard and promote the welfare of children into these processes.

The effectiveness of the Safeguarding Partnership itself should also form part of the judgement of the Inspectorates. This may be done, for example, by examining the quality of the Safeguarding Partnership's planning and determining whether key objectives have been met. It will be for the Local Authority to lead in taking action, if intervention in the Safeguarding Partnership's own processes is necessary.

## 7.2 Agency Roles and Responsibilities

A range of individual organisations and agencies working with children and families have specific statutory duties to promote the welfare of children and ensure they are protected from harm. These duties, as applied to individual organisations and agencies, are set out in this section.

This section should be read in conjunction with Working Together to Safeguard Children 2018.

## Statutory duties under the Children Act 2004

Section 11 of the Children Act 2004 Places duties on a range of organisations, agencies and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children.

Section 11 places a duty on the following organisations and agencies:

- local authorities and district councils that provide children's and other types of services, including children's and adult social care services, public health, housing, sport, culture and leisure services, licensing authorities and youth services
- NHS organisations and agencies and the independent sector, including NHS England and <u>clinical commissioning groups</u>, NHS Trusts, NHS Foundation Trusts and General Practitioners

- the police, including police and crime commissioners and the chief officer of each police force in England and the Mayor's Office for Policing and Crime in London
- the British Transport Police
- the National Probation Service and Community Rehabilitation Companies
- Governors/Directors of Prisons and Young Offender Institutions
- Directors of Secure Training Centres
- Principals of Secure Colleges
- Youth Offending Teams/Services

These organisations and agencies should have in place arrangements that reflect the importance of safeguarding and promoting the welfare of children, including:

- a clear line of accountability for the commissioning and/or provision of services designed to safeguard and promote the welfare of children
- a senior board level lead with the required knowledge, skills and expertise or sufficiently
  qualified and experienced to take leadership responsibility for the organisation's/agency's
  safeguarding arrangements
- a culture of listening to children and taking account of their wishes and feelings, both in individual decisions and the development of services
- clear whistleblowing procedures, which reflect the principles in <u>Sir Robert Francis'</u>
   <u>Freedom to Speak Up Review</u> and are suitably referenced in staff training and codes of conduct, and a culture that enables issues about safeguarding and promoting the welfare of children to be addressed
- clear escalation policies for staff to follow when their child safeguarding concerns are not being addressed within their organisation or by other agencies
- arrangements which set out clearly the processes for sharing information, with other practitioners and with safeguarding partners
- a designated practitioner (or, for health commissioning and health provider organisations/agencies, designated and named practitioners) for child safeguarding. Their role is to support other practitioners in their organisations and agencies to recognise the needs of children, including protection from possible abuse or neglect. Designated practitioner roles should always be explicitly defined in job descriptions. Practitioners should be given sufficient time, funding, supervision and support to fulfil their child welfare and safeguarding responsibilities effectively
- safe recruitment practices and ongoing safe working practices for individuals whom the organisation or agency permit to work regularly with children, including policies on when to obtain a criminal record check
- appropriate supervision and support for staff, including undertaking safeguarding training
- creating a culture of safety, equality and protection within the services they provide
- employers are responsible for ensuring that their staff are competent to carry out their responsibilities for safeguarding and promoting the welfare of children and creating an environment where staff feel able to raise concerns and feel supported in their safeguarding role.

Local authorities also have duties to safeguard and promote the welfare of children in relation to its functions under Section 175 of the Education Act 2002.

Statutory Guidance about these education duties is set out in <u>Keeping Children Safe in Education</u> 2018.

The governing bodies, management committees or proprietors of the following have duties in relation to safeguarding and promoting the welfare of pupils:

 governing bodies of maintained schools (including maintained nursery schools) and colleges;

- proprietors of independent schools (including <u>academies</u>, <u>free schools</u> and alternative provision <u>academies</u>) and non-maintained special schools. In the case of <u>academies</u>, <u>free schools</u> and alternative provision <u>academies</u>, the proprietor will be the academy trust; and
- management committees of pupil referral units (PRUs).

There are additional requirements for boarding schools, residential special schools, residential colleges and children's homes to consider with regards to safeguarding. These are set out in National Minimum Standards and regulations for the relevant setting, as set out in Keeping Children Safe in Education 2018.

The responsibility of the Children and Family Court Advisory and Support Service (Cafcass) is to safeguard and promote the welfare of children going through the family justice system, as set out in the <a href="Children Act 1989">Children Act 1989</a> and to safeguard and promote the welfare of children involved in family proceedings in which their welfare is, or may be, in question, as set out in section 12(1) of the Criminal Justice and Court Services Act 2000.

## People in positions of trust

Organisations and agencies working with children and families should have clear policies for dealing with allegations against people who work with children. Such policies should make a clear distinction between an allegation, a concern about the quality of care or practice or a complaint. An allegation may relate to a person who works with children who 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

County level and unitary local authorities should ensure that allegations against people who work with children are not dealt with in isolation. Any action necessary to address corresponding welfare concerns in relation to the child or children involved should be taken without delay and in a co-ordinated manner. Local authorities should, in addition, have designated a particular officer, or team of officers (either as part of local multiagency arrangements or otherwise), to be involved in the management and oversight of allegations against people who work with children. Any such officer, or team of officers, should be sufficiently qualified and experienced to be able to fulfil this role effectively, for example, qualified social workers. Any new appointments to such a role, other than current or former designated officers moving between local authorities, should be qualified social workers. Arrangements should be put in place to ensure that any allegations about those who work with children are passed to the designated officer, or team of officers, without delay.

Local authorities should put in place arrangements to provide advice and guidance to employers and voluntary organisations and agencies on how to deal with allegations against people who work with children. Local authorities should also ensure that there are appropriate arrangements in place to liaise effectively with the police and other organisations and agencies to monitor the progress of cases and ensure that they are dealt with as quickly as possible, consistent with a thorough and fair process.

Employers, school governors, trustees and voluntary organisations should ensure that they have clear policies in place setting out the process, including timescales for investigation and what support and advice will be available to individuals against whom allegations have been made. Any allegation against people who work with children should be reported immediately to a senior manager within the organisation or agency. The designated officer, or team of officers, should also be informed within one working day of all allegations that come to an employer's attention or that are made directly to the police.

If an organisation or agency removes an individual (paid worker or unpaid volunteer) from work in regulated activity with children (or would have, had the person not left first) because the person poses a risk of harm to children, the organisation or agency must make a referral to the Disclosure and Barring Service to consider whether to add the individual to the barred list.

This applies irrespective of whether a referral has been made to local authority children's social care and/or the designated officer or team of officers. It is an offence to fail to make a referral without good reason.

## Individual organisational responsibilities

The roles and responsibilities of the following agencies are listed below, as per <u>Working Together</u> to Safeguard Children 2018.

### Schools, colleges and other educational providers

The following have duties in relation to safeguarding and promoting the welfare of children:

- governing bodies of maintained schools (including maintained nursery schools), further education colleges and sixth-form colleges (as established under the <u>Further Education</u> and <u>Higher Education Act 1992</u>)
- proprietors of academy schools, <u>free schools</u>, alternative provision <u>academies</u> and non-maintained special schools. In the case of <u>academies</u> and <u>free school</u> trusts, the proprietor will be the trust itself
  - o proprietors of independent schools
  - o management committees of pupil referral units.

This guidance applies in its entirety to all schools.

Schools, colleges and other educational settings must also have regard to statutory guidance Keeping Children Safe in Education, which provides further guidance as to how they should fulfil their duties in respect of safeguarding and promoting the welfare of children in their care.

## Early years and childcare

Early years providers have a duty under section 40 of the Childcare Act 2006 to comply with the welfare requirements of the early years foundation stage (EYFS). Early years providers must ensure that:

- they are alert to any issues of concern in the child's life
- they have and implement a policy and procedures to safeguard children. This must
  include an explanation of the action to be taken when there are safeguarding concerns
  about a child and in the event of an allegation being made against a member of staff. The
  policy must also cover the use of mobile phones and cameras in the setting, that staff
  complete safeguarding training that enables them to understand their safeguarding policy
  and procedures, have up-to-date knowledge of safeguarding issues, and recognise signs
  of potential abuse and neglect
- they have a practitioner who is designated to take lead responsibility for safeguarding children within each early years setting and who must liaise with local statutory children's services as appropriate. This lead must also complete child protection training.

#### Health

<u>Clinical commissioning groups</u> are one of the three statutory safeguarding partners. NHS organisations and agencies are subject to the section 11 duties.

Health practitioners are in a strong position to identify welfare needs or safeguarding concerns regarding individual children and, where appropriate, provide support. This includes understanding risk factors, communicating and sharing information effectively with children and families, liaising with other organisations and agencies, assessing needs and capacity, responding to those needs and contributing to multi-agency assessments and reviews.

A wide range of health practitioners have a critical role to play in safeguarding and promoting the welfare of children including: GPs, primary care practitioners, paediatricians, nurses, health visitors, midwives, school nurses, allied health practitioners, those working in maternity, child and adolescent mental health, youth custody establishments, adult mental health, sexual, alcohol and drug services for both adults and children, unscheduled and emergency care settings, highly specialised services and secondary and tertiary care.

All staff working in healthcare settings – including those who predominantly treat adults – should receive training to ensure they attain the competences appropriate to their role and follow the relevant professional guidance (<u>Safequarding Children and Young People: roles and competences for health care staff</u>, <u>Looked-after children: Knowledge</u>, <u>skills and competences of health care staff</u>, <u>Protecting children and young people: the responsibilities of all doctors</u>, <u>Safeguarding Children and Young People: The RCGP/NSPCC Safeguarding Children Toolkit for General Practice</u>.

#### Within the NHS:

- NHS England is responsible for ensuring that the health commissioning system as a whole is working effectively to safeguard and promote the welfare of children. It is also accountable for the services it directly commissions, including primary care, and healthcare services in the under-18 secure estate (for police custody settings see below in the policing section). NHS England also leads and defines improvement in safeguarding practice and outcomes and should also ensure that there are effective mechanisms for safeguarding partners and Health and wellbeing boards to raise concerns about the engagement and leadership of the local NHS. Each NHSE region should have a safeguarding lead to ensure regional collaboration and assurance through convening safeguarding forums.
- <u>Clinical commissioning groups</u> are one of the statutory safeguarding partners and the
  major commissioners of local health services. They are responsible for the provision of
  effective clinical, professional and strategic leadership to child safeguarding, including the
  quality assurance of safeguarding through their contractual arrangements with all
  provider organisations and agencies, including from independent providers.

## **Designated health professionals**

<u>Clinical commissioning groups</u> should employ, or have in place, a contractual agreement to secure the expertise of designated practitioners; such as dedicated designated doctors and nurses for safeguarding children and dedicated designated doctors and nurses for <u>looked</u>after children (and designated doctor or paediatrician for <u>unexpected deaths</u> in childhood).

In some areas, there will be more than one <u>clinical commissioning group</u> per local authority, and they may consider 'lead' or 'hosting' arrangements for their designated health professionals, or a clinical network arrangement with the number of Designated Doctors and Nurses for child safeguarding equating to the size of the child population. Designated doctors and nurses, as senior professionals, clinical experts and strategic leaders, are a vital source of safeguarding advice and expertise for all relevant organisations and agencies but particularly the <u>clinical commissioning group</u>, NHS England, and the local authority, and for advice and support to other health practitioners across the health economy. The NHS commissioners and providers should ensure that designated professionals are given sufficient time to be fully engaged, involved and included in the new safeguarding arrangements.

All providers of NHS funded health services including NHS Trusts and NHS Foundation Trusts should identify a dedicated named doctor and a named nurse (and a named midwife if the organisation or agency provides maternity services) for safeguarding children. In the case of ambulance trusts and independent providers, this should be a named practitioner. Named practitioners have a key role in promoting good professional practice within their organisation and agency, providing advice and expertise for fellow practitioners, and ensuring safeguarding training is in place. They should work closely with their organisation's/agency's safeguarding lead on the executive board, designated health professionals for the health economy and other statutory safeguarding partners.

<u>Clinical commissioning groups</u> should employ a named GP to advise and support GP safeguarding practice leads. GPs should have a lead and deputy lead for safeguarding, who should work closely with the named GP based in the <u>clinical commissioning group</u>.

Other public, voluntary and independent sector organisations, agencies and social enterprises providing NHS services to children and families should ensure that they follow this guidance.

### **Public Health England**

Public Health England (PHE) is an executive agency of the Department of Health and Social Care which has operational autonomy to advise and support government, local authorities and the NHS in a professionally independent manner. PHE's mission is "to protect and improve the nation's health and to address inequalities", and was established in 2013 following the Health and Social Care Act 2012. PHE's Chief Nurse provides advice and expertise in their capacity as the government's professional advisor (Public Health Nursing), which in the context of children's health includes health visitors and school nurses.

#### **Police**

The police are one of the three statutory safeguarding partners as set out in chapter 3 and are subject to the section 11 duties set out in this chapter. Under section 1(8)(h) of the Police Reform and Social Responsibility Act 2011, the Police and Crime Commissioner (PCC) must hold the Chief Constable to account for the exercise of the latter's duties in relation to safeguarding children under sections 10 and 11 of the Children Act 2004.

All police officers, and other police employees such as Police Community Support Officers, are well placed to identify early when a child's welfare is at risk and when a child may need protection from harm. Children have the right to the full protection offered by criminal law. In addition to identifying when a child may be a victim of a crime, police officers should be aware of the effect of other incidents which might pose safeguarding risks to children and where officers should pay particular attention. For example, an officer attending a domestic abuse incident should be aware of the effect of such behaviour on any children in the household. Children who are encountered as offenders, or alleged offenders, are entitled to the same safeguards and protection as any other child and due regard should be given to their safety and welfare at all times. For example, children who are apprehended in possession of Class A drugs may be victims of exploitation through county lines drug dealing.

The police will hold important information about children who may be suffering, or likely to suffer, significant harm, as well as those who cause such harm. They should always share this information with other organisations and agencies where this is necessary to protect children. Similarly, they can expect other organisations and agencies to share information to enable the police to carry out their duties. All police forces should have officers trained in child abuse investigation.

The police have a power to remove a child to suitable accommodation under section 46 of the Children Act 1989, if they have reasonable cause to believe that the child would otherwise be likely to suffer significant harm. Statutory powers to enter premises can be used with this section 46 power, and in circumstances to ensure the child's immediate protection. Police powers can

help in emergency situations, but should be used only when necessary and, wherever possible, the decision to remove a child from a parent or carer should be made by a court.

Restrictions and safeguards exist in relation to the circumstances and periods for which children may be taken to or held in police stations. PCCs are responsible for health commissioning in police custody settings and should always ensure that this meets the needs of individual children.

#### **Adult Social Care Services**

Local authorities provide services to adults who are responsible for children who may be in need. When staff are providing services to adults they should ask whether there are children in the family and consider whether the children need help or protection from harm. Children may be at greater risk of harm or be in need of additional help in families where the adults have mental health problems, misuse substances or alcohol, are in a violent relationship or have complex needs or have learning difficulties.

Adults with parental responsibilities for disabled children have a right to a separate parent carer's needs assessment under section 17ZD of the Children Act 1989. Adults who do not have parental responsibility, but are caring for a disabled child, are entitled to an assessment on their ability to provide, or to continue to provide, care for that disabled child under the Carers (Recognition and Services) Act 1995. That assessment must also consider whether the carer works or wishes to work, or whether they wish to engage in any education, training or recreation activities.

Adult social care services should liaise with children's social care services to ensure that there is a joined-up approach when carrying out such assessments.

### **Housing Services**

Housing and homelessness services in local authorities and others at the front line such as environmental health organisations are subject to the duties set out in Working Together 2015. Professionals working in these services may become aware of conditions that could have an adverse impact on children. Under Part 1 of the Housing Act 2004, authorities must take account of the impact of health and safety hazards in housing on vulnerable occupants, including children, when deciding on the action to be taken by landlords to improve conditions. Housing authorities also have an important role to play in safeguarding vulnerable young people, including young people who are pregnant, leaving care or a secure establishment.

## **British Transport Police**

The British Transport Police (BTP) is subject to the section 11 duties set out in this chapter. In its role as the national police for the railways, the BTP can play an important role in safeguarding and promoting the welfare of children, especially in identifying and supporting children who have run away, are truanting from school or who are being exploited by criminal gangs to move drugs and money.

The BTP should carry out its duties in accordance with its legislative powers. This includes removing a child to a suitable place using their police protection powers under the Children Act 1989, and the protection of children who are truanting from school using powers under the Crime and Disorder Act 1998. This involves, for example, the appointment of a designated independent officer in the instance of a child taken into police protection.

#### **Prison Service**

The Prison Service is subject to the section 11 duties set out in this chapter. It also has a responsibility to identify prisoners who are potential or confirmed 'persons posing a risk to children' (PPRC) and through assessment establish whether the PPRC presents a continuing

risk to children whilst in prison custody. Where an individual has been identified as a PPRC, the relevant prison establishment:

- should inform the local authority children's social care services of the offender's reception to prison, subsequent transfers, release on temporary licence and of release date and of the release address of the offender
- should notify the relevant probation service provider of PPRC status. The police should also be notified of the release date and address
- may prevent or restrict a prisoner's contact with children. Decisions on the level of
  contact, if any, should be based on a multi-agency risk assessment. The assessment
  should draw on relevant risk information held by police, the probation service provider
  and the prison service. The relevant local authority children's social care should
  contribute to the multi-agency risk assessment by providing a report on the child's best
  interests. The best interests of the child will be paramount in the decision-making
  process.

A prison is also able to monitor an individual's communication (including letters and telephone calls) to protect children where proportionate and necessary to the risk presented.

Governors/Directors of women's establishments which have Mother and Baby Units (MBUs) should ensure that:

- there is at all times a member of staff allocated to the MBU, who as a minimum, is trained in first aid, whilst within the prison there is always a member of staff on duty who is trained in paediatric first aid (including child/adult resuscitation) who can be called to the MBU if required
- there is a contingency plan/policy in place for child protection, first aid including paediatric first aid and resuscitation, which should include advice for managing such events, and which provides mothers with detailed guidance as to what to do in an emergency
- each baby has a child care plan setting out how the best interests of the child will be maintained and promoted during the child's residence in the unit

This also applies to MBUs which form part of the secure estate for children

#### **Probation Service**

Probation services are provided by the National Probation Service (NPS) and 21 Community Rehabilitation Companies (CRCs). The NPS and CRCs are subject to the section 11 duties.

They are primarily responsible for working with adult offenders both in the community and in the transition from custody to community to reduce reoffending and improve rehabilitation. During the course of their duties, probation staff come into contact with offenders who:

- have offended against a child
- pose a risk of harm to children even though they have not been convicted of an offence against a child
- are parents and/or carers of children
- have regular contact with a child for whom they do not have caring responsibility They
  are, therefore, well placed to identify offenders who pose a risk of harm to children as
  well as children who may be at heightened risk of involvement in, or exposure to, criminal
  or anti-social behaviour, and of other poor outcomes due to the behaviour and/or home
  circumstances of their parent/carer(s).

They should ask an offender at the earliest opportunity whether they live with, have caring responsibilities for, are in regular contact with, or are seeking contact with children. Where this applies, a check should be made with the local authority children's services at the earliest

opportunity on whether the child/children is/are known to them and, if they are, the nature of their involvement.

Where an adult offender is assessed as presenting a risk of serious harm to children, the offender manager should develop a risk management plan and supervision plan that contains a specific objective to manage and reduce the risk of harm to children. The risk management plan should be shared with other organisations and agencies involved in the risk management.

In preparing a sentence plan, offender managers should consider how planned interventions might bear on parental responsibilities and whether the planned interventions could contribute to improved outcomes for children known to be in an existing relationship with the offender.

#### Children's homes

The registered person of a children's home must have regard to the Guide to the Children's Homes Regulations, including the quality standards (April 2015), in interpreting and meeting the Regulations. The Guide covers the quality standards for children's homes, which set out the aspirational and positive outcomes that we expect homes to achieve, including the standard for the protection of children. The registered person is responsible for ensuring that staff continually and actively assess the risks to each child and the arrangements in place to protect them. Where there are safeguarding concerns for a child, their placement plan, agreed between the home and their placing authority, must include details of the steps the home will take to manage any assessed risks on a day to day basis.

In addition to the requirements of this standard, the registered person has specific responsibilities under regulation 34 to prepare and implement policies setting out: arrangements for the safeguarding of children from abuse or <a href="neglect">neglect</a>; clear procedures for referring child protection concerns to the placing authority or local authority where the home is situated if appropriate; and specific procedures to prevent children going missing and take action if they do.

Each home should work with their local safeguarding partners to agree how they will work together, and with the placing authority, to make sure that the needs of the individual children are met.

#### The Secure Estate for Children

Governors, managers and directors of the following secure establishments are subject to the section 11 duties set out in Chapter 2 of Working Together:

- a secure training centre
- a young offender institution
- a secure college/school.

Each centre holding those aged under 18 should have in place an annually reviewed safeguarding children policy. The policy is designed to promote and safeguard the welfare of children and should cover issues such as child protection, risk of harm, restraint, recruitment and information sharing. A safeguarding children manager should be appointed and will be responsible for implementation of this policy.

Each centre should work with their local safeguarding partners to agree how they will work together, and with the relevant YOT and placing authority (the Youth Custody Service), to make sure that the needs of individual children are met.

## Youth Offending Teams

Youth Offending Teams (YOTs) s are subject to the section 11 duties set out in this chapter. YOTs are multiagency teams responsible for the supervision of children subject to pre-court interventions and statutory court disposals. They are therefore well placed to identify children

known to relevant organisations and agencies as being most at risk of offending and the contexts in which they may be vulnerable to abuse, and to undertake work to prevent them offending or protect them from harm. YOTs should have a lead officer responsible for ensuring safeguarding is embedded in their practice.

Under section 38 of the Crime and Disorder Act 1998, local authorities must, within the delivery of youth justice services, ensure the 'provision of persons to act as appropriate adults to safeguard the interests of children detained or questioned by police officers'.

#### **UK Visas and Immigration Enforcement and the Border Force**

Section 55 of the Borders, Citizenship and Immigration Act 2009 places upon the Secretary of State a duty to take account of the need to safeguard and promote the welfare of children in discharging its functions relating to immigration, asylum, nationality and customs. These functions are discharged on behalf of the Secretary of State by UK Visas and Immigration, Immigration Enforcement and the Border Force, which are part of the Home Office.

See Arrangements in the United Kingdom Border Agency to Safeguard and Promote Children's Welfare (Every Child Matters).

### Children and Family Court Advisory and Support Service (CAFCASS)

The responsibility of the Children and Family Court Advisory and Support Service (Cafcass), as set out in the Children Act 1989, is to safeguard and promote the welfare of individual children who are the subject of family court proceedings. It achieves this by providing independent social work advice to the court.

A Cafcass officer has a statutory right in public law cases to access local authority records relating to the child concerned and any application under the Children Act 1989. That power also extends to other records that relate to the child and the wider functions of the local authority, or records held by an authorised body that relate to that child.

Where a Cafcass officer has been appointed by the court as a child's guardian and the matter before the court relates to specified proceedings, they should be invited to all formal planning meetings convened by the local authority in respect of the child. This includes statutory reviews of children who are accommodated or <u>looked after</u>, <u>child protection conferences</u> and relevant Adoption Panel meetings.

#### **Armed Services**

Local authorities have the statutory responsibility for safeguarding and promoting the welfare of the children of service families in the UK (when service families or civilians working with the armed forces are based overseas the responsibility for safeguarding and promoting the welfare of their children is vested in the Ministry of Defence).

In discharging these responsibilities:

- Local authorities should ensure that the Ministry of Defence, soldiers, sailors, airmen, and Families Association Forces Help, the British Forces Social Work Service or the Naval Personal and Family Service is made aware of any service child who is the subject of a <u>child protection plan</u> and whose family is about to move overseas
- each local authority with a United States (US) base in its area should establish liaison arrangements with the base commander and relevant staff. The requirements of English child welfare legislation should be explained clearly to the US authorities, so that the local authority can fulfil its statutory duties

## **Multi-Agency Public Protection Arrangements**

Many of the agencies subject to the section 11 duty are members of the Multi-Agency Public Protection Arrangements (MAPPA), including the police, prison and probation services. MAPPA should work together with duty to co-operate (DTC)64 agencies to manage the risks posed by violent and sexual offenders living in the community in order to protect the public and should work closely with the safeguarding partners over services to commission locally.

# Voluntary, charity, social enterprise, faith-based organisations and private sectors

Voluntary, charity, social enterprise (VCSE) and private sector organisations and agencies play an important role in safeguarding children through the services they deliver. Some of these will work with particular communities, with different races and faith communities and delivering in health, adult social care, housing, prisons and probation services. They may as part of their work provide a wide range of activities for children and have an important role in safeguarding children and supporting families and communities.

Like other organisations and agencies who work with children, they should have appropriate arrangements in place to safeguard and protect children from harm. Many of these organisations and agencies as well as many schools, children's centres, early years and childcare organisations, will be subject to charity law and regulated either by the Charity Commission or other "principal" regulators. Charity trustees are responsible for ensuring that those benefiting from, or working with, their charity, are not harmed in any way through contact with it. The Charity Commission for England and Wales provides guidance on charity compliance which should be followed. Further information on the Charity Commission's role in safeguarding can be found on: the Charity Commission's page on Gov.uk.

Some of these organisations and agencies are large national charities whilst others will have a much smaller local reach. Some will be delivering statutory services and may be run by volunteers, such as library services. This important group of organisations includes youth services not delivered by local authorities or district councils.

All practitioners working in these organisations and agencies who are working with children and their families are subject to the same safeguarding responsibilities, whether paid or a volunteer.

Every VCSE, faith-based organisation and private sector organisation or agency should have policies in place to safeguard and protect children from harm. These should be followed and systems should be in place to ensure compliance in this. Individual practitioners, whether paid or volunteer, should be aware of their responsibilities for safeguarding and protecting children from harm, how they should respond to child protection concerns and how to make a referral to local authority children's social care or the police if necessary.

Every VCSE, faith-based organisation and private sector organisation or agency should have in place the arrangements described in this chapter. They should be aware of how they need to work with the safeguarding partners in a local area. Charities (within the meaning of section 1 Charities Act 2011), religious organisations (regulation 34 and schedule 3 to School Admissions) and any person involved in the provision, supervision or oversight of sport or leisure are included within the relevant agency regulations. This means if the safeguarding partners name them as a relevant partner they must cooperate. Other VCSE, faith-based and private sector organisations not on the list of relevant agencies can also be asked to cooperate as part of the local arrangements and should do so.

### Sports clubs/organisations

There are many sports clubs and organisations including voluntary and private sector providers that deliver a wide range of sporting activities to children. Some of these will be community amateur sports clubs, some will be charities. All should have the arrangements described in this chapter in place and should collaborate to work effectively with the safeguarding partners as required by any local safeguarding arrangements. Paid and volunteer staff need to be aware of

their responsibilities for safeguarding and promoting the welfare of children, how they should respond to child protection concerns and how to make a referral to local authority children's social care or the police if necessary.

All National Governing Bodies of Sport, that receive funding from either <u>Sport England</u> or <u>UK Sport</u>, must aim to meet the <u>Standards for Safeguarding and Protecting Children in Sport</u>.

## **Organisations without Statutory Duties**

All organisations that do not have statutory duties under Section 11 of the Children Act 2004, but that have involvement with children, directly or indirectly, have a responsibility to ensure that their employees, volunteers and service users are aware of these procedures and know where to access them.

Everybody who works with children, parents and other adults in connection with children should be able to recognise indicators of concern about a child's welfare or safety. A staff member or volunteer who may encounter concerns about the safety and well-being of a child should know:

- Who in their organisation can offer support and guidance;
- When and how to make a referral to Children's Social Care under the Referrals Procedure:
- What other services are available locally and how to gain access to them;
- How to access and receive appropriate training.