

Date adopted: 29th November 2018
Date of last review: 11th February 2022
Date for next review: February 2023 (sooner if legislation changes)



Safeguarding Policy

1. Introduction

- 1.1 Shiloh Rotherham is fully committed to safeguarding the welfare of all vulnerable groups and individuals that are involved in its activities and will provide the necessary support and training for staff to ensure the risk of abuse is minimised.
- 1.2 The Charity also supports the sector in the provision of services to children and young people and is committed to working in line with best practice, including but not limited to Section 11 of the Children Act 2004.
- 1.3 The Board of Trustees has a duty of care to protect the reputation and assets of the Charity and will take active responsibility for safeguarding matters, including reporting of any serious safeguarding incidents to the Charity Commission.

2. Aim of this policy

- 2.1 The aim of this policy is to provide procedures for promoting safeguarding, preventing abuse and protecting vulnerable adults, children and young people, staff and volunteers. This includes clear procedures for taking appropriate action when safeguarding concerns are raised involving vulnerable adults, children and young people who we support or those who attend our activities and events.

3. Definitions

3.1 Vulnerable adults

A vulnerable adult is any person aged 18 or over who 'is or may be in need of community care services by reason of mental health or other disability, age or illness' and 'is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'.

Children and young people

A child is 'anyone who has not yet reached their 18th birthday. 'Children', therefore, means children and young people throughout. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate for children and young people, does not change his or her status or entitlement to services or protection under the Children Act 2004' (Working Together to Safeguard Children 2018).

Employee/Staff

When this policy references 'staff' or 'employee' this shall also include 'volunteers'.



4. What is meant by abuse?

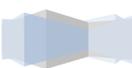
- 4.1 Abuse is the violation of an individual's human rights. It can be single or repeated acts and can include: physical, financial/material, sexual, psychological, discriminatory and emotional abuse and neglect or an omission to act. It may be something that is done to the individual or something not done when it should have been. It does not necessarily have to be intentional – if the vulnerable person experiences it as abusive, it is considered abuse.
- 4.2 Children may be abused and/or neglected by their parents, carers, guardians or other trusted adults as well as by strangers. Abuse may be perpetrated by individuals, groups or networks of individuals. Children may also be abused by other children.
- 4.3 The definitions of abuse differ slightly between adults and children. A copy of the definitions can be found at Appendix 1.

5. Recruitment, Induction and Training

- 5.1 The Charity is committed to recruitment and selection procedures that are designed to promote best practice and to protect vulnerable adults, children, young people and workers from potential harm.
- 5.2 Prospective staff will be asked to complete an application form requesting basic details, including previous experience of working with vulnerable adults and children where appropriate.
- 5.3 The Charity expects that all staff working directly with vulnerable adults and/or children will be subject to enhanced police checks through the Disclosure and Barring Service (DBS). Disclosure of a criminal record may not itself prevent appointments as the nature of any offence is considered, with the exception of convictions for crimes against vulnerable adults/children.
- 5.4 The Charity will need to obtain two references prior to appointment (non-family members). Structured interviews will be undertaken and any gaps in job history or rapid movement from one to another will be investigated.
- 5.5 All staff will receive information around the Charity's policies and procedures during induction to ensure they understand their responsibilities in relation to safeguarding vulnerable adults and children, in particular how to identify and report safeguarding concerns. **In addition** Shiloh have produced an internal leaflet "Safeguarding at Shiloh" which is available in printed format in volunteer breakout areas.
- 5.6 All staff will be expected to undertake awareness raising and/or training on safeguarding at a level appropriate to their role and will be expected to undertake refresher training when required following discussion with their line manager.
- 5.7 Individual Safeguarding Officers and managers will be expected to undertake more specialist safeguarding training, including refreshers, as appropriate.

6. Roles and Responsibilities

- 6.1 The ultimate accountability for safeguarding within the Charity lies with the Board of Trustees, however, the Charity also appoints a named Safeguarding Officer who will deal with the day-to-day work around safeguarding.



6.2 Safeguarding Officer

This person is responsible for overseeing that safeguarding issues regarding vulnerable adults are dealt with appropriately in line with this policy, referring concerns to the appropriate agencies (e.g. Single Point of Access – formerly Assessment Direct – for vulnerable adults and the Multi Agency Safeguarding Hub – MASH – for children) in a timely fashion and in line with confidentiality guidelines. They may attend further safeguarding meetings, case conferences and reviews with referral agencies.

The Safeguarding Officer will act as a source of advice on all safeguarding matters and seek further advice and guidance from Rotherham's Local Safeguarding Boards as needed.

6.3 The contact details for the Safeguarding Officer can be found in the staff area at or are available from the individual's line manager.

6.4 Line managers will ensure:

- They fully understand this policy and all other policies that have a direct link;
- All staff in their area receive appropriate safeguarding information and training commensurate with the responsibilities of their role;
- Safeguarding responsibilities are highlighted during team meetings, supervision and appraisals as appropriate;
- They encourage staff to contribute to discussions about safeguarding and positively involve them in developing safe practices where appropriate;
- They adhere to the Charity's safer recruitment procedures and that appropriate checks are undertaken;
- Any concerns reported to them regarding safeguarding issues are passed to the Safeguarding Officer for action.

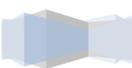
6.5 All staff will ensure they:

- Are fully aware of their responsibility to safeguard and promote the welfare of vulnerable adults and children within their role as appropriate;
- Undertake any awareness raising/training appropriate to the level and responsibilities of their role;
- Raise concerns or allegations of abuse and neglect without delay to the Safeguarding Officer or, if unsure of the process, that they inform their line manager;
- Act in a way which protects them against false allegations of abuse as far as possible in accordance with this policy and the Lone Working Policy.

7. **Identifying risks**

7.1 The Charity undertakes risk assessments for all its areas of activity in line with the Health and Safety Policy. Risk assessments in relation to safeguarding issues are undertaken as follows:

- When recruiting to a new or existing post which involves working directly with vulnerable adults or children – safer recruitment processes are undertaken, including DBS checks;
- Upon commencement of new activities or events involving or potentially involving vulnerable adults or children;



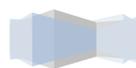
- When changes are being made to existing activities or events involving or potentially involving vulnerable adults or children.

8. How to recognise abuse

- 8.1 It is important to be aware of the possible signs and symptoms of abuse. Some signs could be indicators of a number of different categories of abuse. Appendix 2 shows the possible signs and symptoms of abuse for both adults and children.
- 8.2 It is essential to note, however, that these are only indicators of possible abuse. There may be other, innocent, reasons for these signs and/or behaviour. They will, however, provide a guide to assist in assessing whether abuse of one form or another is a possible explanation for an adult or child's behaviour.
- 8.3 Abuse can occur in all types and structures of families and situations regardless of gender, race, culture, sexual orientation, religion/belief or class. It is important to be mindful that there are many different ideas and attitudes about how children should be brought up. However, this does not mean that an individual should ignore a situation where children are clearly at risk on the grounds that the family concerned has a different set of beliefs.
- 8.4 For individuals with learning disabilities there can be additional issues in relation to abuse and individuals may have greater difficulty in being heard when trying to disclose situations of abuse.
- 8.5 It is important to be mindful of assumptions as to what is appropriate in terms of caring for individuals with learning disabilities. Sometimes practices that would clearly be seen as unacceptable in general terms are not challenged when the individual has a learning disability. If employees are in any doubt, they should refer to the relevant Safeguarding Officer for advice.

9. What to do if there has been a disclosure, allegation or concern of abuse

- 9.1 It is not the responsibility of anyone working for the Charity in a paid or unpaid capacity to decide whether or not abuse has taken place. However, there is a responsibility on the Charity to act on any concerns through contact with the appropriate agencies so that they can then make inquiries and take any necessary action to protect the individual concerned. This applies BOTH to allegations/suspicious of abuse occurring within the Charity and to allegations/suspicious that abuse is taking place elsewhere.
- 9.2 If an adult or child makes a disclosure that they are being abused and/or an allegation of abuse against someone, the person being told should:
- Stay calm and listen carefully;
 - Reassure the individual that they have done the right thing in telling;
 - NOT investigate or ask leading questions;
 - Explain that they will need to tell someone else if anyone is at risk of harm, in order to help them;
 - NOT promise to keep secret what they have been told;
 - Ensure the individual is informed about what will happen next;
 - Reassure the individual about what to expect;
 - Inform the Safeguarding Officer as soon as possible;
 - Make a written record of the allegation, disclosure or incident and sign/date this record. This should be given to the Safeguarding Officer, who will take the necessary action and store the information securely in a locked filing cabinet.



- 9.3 Appendix 3 gives further information to employees on what to do if a disclosure is made or a concern is identified.
- 9.4 The Safeguarding Officer will review the information provided and make any necessary referrals to the appropriate external agencies (Single Point of Access for adults and MASH for children/young people). Under no circumstances should the individual member of staff contact an external agency or undertake their own investigation.
- 9.5 Employees must not discuss their suspicions or any allegations made with anyone other than the designated Safeguarding Officer, their Line Manager or the Chair of the Board of Trustees.
- 9.6 The Charity will support any investigation as appropriate, therefore, any member of staff who has been involved in a safeguarding concern will be expected to give a full account of the incident or their concerns and may be called on as a witness in any subsequent proceedings.

10. What to do if there is an immediate threat of harm

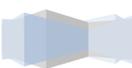
- 10.1 In most situations there will not be an immediate threat and the decision about protecting the vulnerable adult or child will be taken by the appropriate agency.
- 10.2 In certain circumstances it may be necessary to take immediate action to protect the vulnerable adult or child by calling emergency services (999). Direct calls to the police should be reserved for incidents of assault and/or violence where an element of urgency applies.
- 10.3 In all circumstances where the emergency services have been called, the employee must inform the Safeguarding Officer as soon as possible.

11. Support to employees

- 11.1 The individual's line manager or Safeguarding Officer will make themselves available to the employee reporting the incident or concern to talk it through and offer any additional support.
- 11.2 If an external agency or the police need further information or involvement from the employee, then they will be expected to co-operate fully with any investigation. The Charity will provide assistance to the individual, including attending any investigatory meetings with them, or alternatively a representative from the Charity (line manager or Safeguarding Officer) may provide information to the relevant authority on the individual's behalf.

12. Allegations against employees

- 12.1 Employees may also be subject to allegations of abusing vulnerable adults and children during the course of their employment/volunteering with the Charity.
- 12.2 In order to minimise any allegations, employees should adhere to the Lone Working Policy at all times. Where this is not possible, individuals should consider how else they might minimise any risk, including holding meetings in appropriate rooms and places.
- 12.3 Any complaint against a member of staff or volunteer must be made to the Chief



Executive, who will seek the advice of the relevant external agency and/or police on how to proceed with investigations and inform the Chair of the Board of Trustees.

- 12.4 If the Chief Executive is informed of a complaint by the authorities, he/she will meet with the authorities in order to be acquainted with the details and agree appropriate action.
- 12.5 While appropriate support will be offered to any employee facing an allegation of abuse, the Charity will ensure that the relevant authorities are given all assistance in pursuing any investigation.
- 12.6 Where an allegation is made against an employee, that employee may be suspended on full pay until such time any investigation is completed. The employee may be liable to action under the Disciplinary Procedure and they will be informed of that at the time. Employees will, therefore, need to ensure that they have a sufficient support network outside the organisation should the disciplinary procedure be invoked.
- 12.7 Whilst other employees should show due courtesy and respect, the confidentiality of colleagues and the needs, welfare and protection of vulnerable adults and children will at all times be paramount.

13. Record keeping

- 13.1 All reported incidents and concerns will be logged securely by the Safeguarding Officer and outcomes of any investigation noted. This information will be kept confidentially and under strict data protection rules. See Appendix 4
- 13.2 The Safeguarding Officer will produce regular update reports to the Board of Trustees via the Chief Executive (if the Chief Executive is not the Safeguarding Officer), including number of incidents and any reports of serious incidents to the Charity Commission.

14. Whistleblowing

- 14.1 It is important that the Charity has procedures for enabling staff to share, in confidence with a designated person, concerns they may have about a colleague's behaviour. This may be behaviour linked to safeguarding or behaviour that pushes boundaries beyond acceptable limits.
- 14.2 The Charity is fully supportive of 'whistleblowing' for the sake of the vulnerable adult or child, and will provide support and protect those who 'whistle blow'. While it is difficult to express concerns about colleagues, it is important that these concerns are communicated to the Safeguarding Officer. All staff will be encouraged to talk to the relevant Safeguarding Officer if they become aware of anything that makes them feel uncomfortable.

15. Confidentiality

- 15.1 The Charity respects everyone's right to confidentiality, however, it believes that the welfare of vulnerable people has to take priority and it has a duty to disclose abuse to the appropriate agency if deemed necessary. The Charity's Data Protection Policy may be overridden in these circumstances and reference should be made to this particular policy.



Definitions of abuse

VULNERABLE ADULTS

Abuse is a violation of an individual's human and civil rights by any other person or persons. It may consist of a single act or repeated acts. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. The following definitions have been taken from examples in the Care Act 2014.

Physical Abuse:

This is the infliction of pain or physical injury, which is either caused deliberately or through lack of care. It can include assault, misuse of medication, restraint and inappropriate physical sanctions.

Psychological or Emotional Abuse:

These are acts or behaviour that cause mental distress or anguish, or negates the wishes of the vulnerable adult. It is also behaviour that has a harmful effect on the vulnerable adult's emotional health and development or any other form of mental cruelty. It includes threats of harm or abandonment, humiliation, intimidation, verbal abuse, cyber bullying and isolation.

Sexual Abuse:

This is the involvement in sexual activities to which the person has not consented or does not truly comprehend and so cannot give informed consent, or where the other party is in a position of trust, power or authority and uses this to override or overcome lack of consent. It can include rape, assault, sexual harassment, exploitation, sexual photography, and sexual acts to which the adult has not consented or was pressured into consenting.

Neglect or Act of Omission:

This is the repeated deprivation of assistance that the vulnerable adult needs for important activities of daily living, including the failure to intervene in behaviour which is dangerous to the vulnerable adult or to others. A vulnerable person may be suffering from neglect when their general wellbeing or development is impaired.

Financial or Material Abuse:

This is the inappropriate use, misappropriation, embezzlement or theft of money, property or possessions. It includes fraud, internet scamming and coercion in relation to an adult's financial affairs.

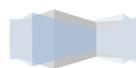
Discriminatory Abuse:

This is the inappropriate treatment of a vulnerable adult because of their age, gender, race, religion/belief, cultural background, sexuality, disability etc. Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies opportunity to some groups or individuals. Discriminatory abuse links to all other forms of abuse.

Institutional Abuse:

This is the mistreatment or abuse of a vulnerable adult by a regime or individuals within an institution (e.g. hospital or care home) or in the community. It can be through repeated acts of poor or inadequate care and neglect or poor professional practice.

Domestic Abuse:



This includes acts of domestic violence including psychological, physical, sexual and financial abuse.

Modern Slavery:

This categorises offences of slavery, domestic servitude and forced or compulsory labour, and Human Trafficking.

Exploitation:

This can be either opportunistic or premeditated and involves unfairly manipulating someone for profit or personal gain. It also includes safeguarding people and communities from the threat of people being drawn into terrorism (Prevent Strategy).

CHILDREN AND YOUNG PEOPLE

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger (e.g. via the internet). They may be abused by an adult or adults, or another child or children.

Physical Abuse:

This 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 feigns the symptoms of, or deliberately causes ill health to a child who they are looking after. This situation is commonly described using terms such as factitious illness by proxy or Munchausen's syndrome by proxy.

Emotional Abuse:

This is the persistent emotional ill treatment of a child such as to cause severe and persistent effects on the child's emotional development. It may involve conveying to children that they are worthless and unloved, inadequate, or valued only insofar as they meet the needs of another person. It may involve age or developmentally inappropriate expectations being imposed on children. It may involve 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 ill treatment of a child, though it may occur alone.

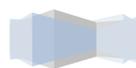
Sexual Abuse:

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

Child sexual exploitation (CSE) is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. CSE does not always involve physical contact; it can also occur through the use of technology.

Neglect:

Neglect is the persistent failure to meet a child's basic physical and or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failure to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or



treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Harmful sexual behaviour:

Children and young people who develop harmful sexual behaviour harm themselves and others. It can include using sexually explicit words and phrases, inappropriate touching, using sexual violence or threats and full penetrative sex with other children or adults. Sexual behaviour between children is also considered harmful if one of the children is much older, however, a younger child can abuse an older child, particularly if they have power over them.

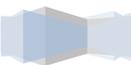
Child trafficking:

Child trafficking is child abuse. It involves recruiting and moving children who are then exploited. Many children are trafficked into the UK from overseas, however, children can also be trafficked from one part of the UK to another and to other countries.

Female genital mutilation (FGM):

FGM is the partial or total removal of external female genitalia for non-medical reasons. It is also known as female circumcision or cutting. Religious, social or cultural reasons are sometimes given for FGM, however, it is child abuse, dangerous and a criminal offence. It is used to control female sexuality and can cause severe and long-lasting damage to physical and emotional health.

Note: Children whose situations do not currently fit the above categories may also be at significant risk of harm. This could include situations where another child in the household has been harmed or the household contains a known child abuser.



Signs and Symptoms of possible abuse

VULNERABLE ADULTS

Physical:

- A history of unexplained falls, fractures, bruises, burns and minor injuries
- Signs of under or over use of medication and/or medical problems unattended

Psychological:

- Alteration in psychological state, e.g. withdrawn, agitated, anxious, tearful
- Intimidated or subdued in the presence of the carer
- Fearful, flinching or frightened of making choices or expressing wishes
- Unexplained paranoia

Sexual:

- Pregnancy in a woman who is unable to consent to sexual intercourse
- Unexplained change in behaviour or sexually implicit/explicit behaviour
- Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting
- Infections or sexually transmitted diseases
- Full or partial disclosure or hints of sexual abuse

Neglect or Omission:

- Malnutrition, weight loss and/or persistent hunger
- Poor physical condition, poor hygiene, varicose ulcers, pressure sores
- Being left in wet clothing or bedding and/or clothing in a poor condition
- Failure to access appropriate health, educational services or social care
- No callers or visitors

Financial or Material:

- Disparity between assets and living conditions
- Unexplained withdrawals from accounts or disappearance of financial documents
- Sudden inability to pay bills
- Carers or professionals fail to account for expenses incurred on person's behalf
- Recent changes of deeds or title to property

Discriminatory:

- Inappropriate remarks, comments or lack of respect
- Poor quality or avoidance of care

Institutional:

- Lack of flexibility or choice over meals, bed times, visitors, phone calls etc.
- Inadequate medical care and misuse of medication
- Inappropriate use of restraint
- Sensory deprivation e.g. denial of use of spectacles or hearing aids
- Missing documents and/or absence of individual care plans
- Public discussion of private matter
- Lack of opportunity for social, educational or recreational activity.

CHILDREN AND YOUNG PEOPLE



Extreme care should be taken as misreading signs of abuse can result in significant harm or trauma to the child and their family. In general staff employed in the voluntary sector will not have the expertise to diagnose child abuse but do have a responsibility to be alert and aware of the signs.

However, just because a child exhibits one of the signs listed below, this does not mean that they have been abused. Nevertheless, the presence of one or more of the signs, or their repeated presence, might raise concerns and should be used as a prompt for discussion with the Safeguarding Lead (Children and Young People). In their absence the matter should be brought to the attention of the Safeguarding Champion without delay.

Physical signs:

- Any injuries, bruises, bites, burns, fractures, etc., which are not consistent with the explanation given for them
- Injuries which occur to the body in places which are not normally exposed to falls, rough games, etc.
- Injuries which appear to have been caused by a weapon e.g. cuts, welts, etc.
- Injuries which have not received medical attention
- Instances where children are kept away from the group inappropriately or without explanation
- Self-mutilation or self-harm e.g. cutting, slashing, drug abuse

Emotional signs:

- Changes or regression in mood and behaviour, particularly where a child withdraws or becomes clinging. Also depression/aggression
- Nervousness/inappropriate fear of particular adults e.g. frozen watchfulness
- Sudden changes in behaviour e.g. under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults e.g. excessive dependence
- Attention-seeking behaviour
- Persistent tiredness
- Wetting or soiling of bed or clothes by an older child

Neglect signs:

- Regular poor hygiene
- Persistent tiredness
- Inadequate clothing
- Excessive appetite
- Failure to thrive e.g. poor weight gain
- Consistently being left alone and unsupervised

Sexual signs:

- Any direct disclosure made by a child concerning sexual abuse
- Child with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour, or who regularly engages in age inappropriate sexual play
- Preoccupation with sexual activity through words, play or drawing
- Child who is sexually provocative or seductive with adults
- Inappropriate bed-sharing arrangements at home
- severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
- Other emotional signs (see above) may be indicative of sexual or some other form of abuse

Possible signs of concern regarding adult behaviour:

- A person in whose presence a child or children becomes unusually distressed or agitated



- A member of staff, volunteer, or parent asking a child to lie about anything (especially if it is about meeting that child)
- Any member of staff, volunteer, or parent who asks you to lie about a situation involving a child - particularly if that child looks distressed
- Any person who persistently fails to follow the organisation's Code of Conduct / Behavioural protocols, particularly if reasons are evasive
- Private (i.e. outside of work) meetings between a child and a member of staff or volunteer



Guidelines for responding to allegations or disclosure of abuse

General Points

- Keep calm – do not appear shocked or disgusted
- Accept what the person says without passing judgement (however unlikely the disclosure may sound)
- Look directly at the person
- Be honest
- Let them know you will need to tell someone else, don't promise confidentiality
- Be aware the person may have been threatened and fear reprisals for having spoken to you
- Never push for information or question the person as this can undermine any subsequent criminal investigation. If at any point a person decides not to continue, accept that and let them know that you are ready to listen should they wish to continue at any time.

Helpful things to say or show

- Show acceptance of what the person says
- "I take what you are saying very seriously"
- "I am pleased that you have told me. Thank you for telling me"
- If appropriate, "it isn't your fault and you are not to blame at all"
- "I am sorry that happened to you"
- "I will help you"

Things not to say

- "Why didn't you say something before?"
- "I really can't believe it"
- "Are you sure this has happened?"
- "Why?" "Where?" "When?" "Who?" "What?" "How?"
- Don't make false promises to the person – like confidentiality – be honest now, any lies will be further abuse and betrayal
- Never make statements such as 'I am shocked!' or 'don't tell anyone else'.

Concluding the conversation

- Reassure the person that they were right to tell you
- Let the person know what you are going to do next and tell them that you will let them know what is happening at each stage.

The employee must compile, with help if necessary, a written record of the allegation or suspicion including:

- Date, time and place conversation and date, time and place of allegation and anyone else present
- What the concern is
- Exactly what the person has said
- What was happening immediately beforehand (e.g. description of the activity, event or interaction)
- What if anything the parent or carer is saying
- What if anything other staff are saying
- Any known relevant history
- If the initial note is handwritten, keep it if it is subsequently typed up.



- Inform the relevant Safeguarding Officer immediately. In their absence inform the Chief Executive/Chair of the Board of Trustees.
- The Safeguarding Officer will contact the relevant external agency and/or police. Whilst allegations or suspicions of abuse will normally be reported to the designated Safeguarding Officer or in their absence, the Chief Executive/Chair of the Board of Trustees, the absence of both should not delay a referral to the relevant external agency.
- Exceptionally, should there be any disagreement between the person in receipt of the allegation or suspicion and the Safeguarding Officer as to the appropriateness of a referral to an external agency, that person retains a responsibility as a member of the public to report serious matters to that agency, and should do so without hesitation.
- Do not be tempted to try to investigate further the claims – this could lead to contamination of the evidence and could jeopardise any Police investigation and criminal prosecution activity.
- The external agency will be asked to keep the Charity informed of any outcome.

Safeguarding at Shiloh leaflet:

This leaflet is used for volunteers and staff as an easy reference guide to safeguarding. This is available in paper format and available in the volunteer break out area.

Appendix 4

Record keeping

Shiloh staff/ safeguarding lead must complete a Shiloh Rotherham safeguarding form. (located on the shared drive policies and procedures file: In addition Shiloh staff/safeguard lead must record all safeguarding concerns on the internal management system “Lamplight”

Shiloh Rotherham safeguarding form is used for reporting a specific safeguarding concern to Rotherham safeguarding adult’s board (Adults) or Multi Agency Safeguarding hub (Children) this is then securely stored in the guest files.

Safeguarding logs are recorded as a Work Record on the relevant individual’s electronic file stored securely in lamplight.

Work records should be recorded as a “one to one “under the subheading “Safeguarding Log” and the details tab completed with a summary, description and follow up recorded here.

Safeguarding incidents can then be identified / reported on via Lamplight report runner.

Reports: Work report: Custom work report: set dates to search, select one to one and safeguarding logs: Run report = number of different people will indicate names when highlighted.

