

Hyh Safeguarding Policy

Safeguarding is our first priority and it lies at the heart of everything we do at Herts Young Homeless (hyh). We have a duty to safeguard, protect and promote the welfare of anyone who works for or comes into contact with our organisation through our activities. This includes, but is not limited to, statutory duties to promote the wellbeing of children, young people and adults at risk, and to protect them from harm.

Safeguarding is everyone's responsibility. This policy must be followed by the whole hyh team including all staff, volunteers, trustees and anyone else working at or on behalf of hyh in any capacity.

This policy applies to all the work we do, including all the services we deliver, the premises we operate from, any events or activities we run and all interactions we have with everyone, including children, young people and adults at risk. It includes safeguarding all members of the hyh team, including volunteers and paid members of staff.

This policy explains what we expect of the whole hyh team and should be read alongside our Safeguarding Procedure which outlines how we protect those who come into contact with our organisation, especially children, young people and adults at risk and how we respond to and report any concerns, allegations or disclosures.

Policy statement

Hyh is committed to safeguarding adults, children and young people of all backgrounds and identities.

Hyh creates an atmosphere where everybody feels valued and safe and a place where everybody's welfare is promoted.

Where there are concerns about the welfare of children, young people, adults at risk and unborn babies, hyh works with agencies to take appropriate actions to address those concerns, working to agreed local policies and procedures in full partnership with other local agencies.

Our safeguarding procedures are linked with the Hertfordshire Local Safeguarding Children's Board procedures and equivalent Safeguarding Adults procedures.

We recognise and respond to concerns, allegations and disclosures of all types of harm, including, but not limited to:

- **Abuse**
 - **Domestic**, including psychological, physical, sexual, economic, emotional abuse and 'honour' based violence.
 - **Economic**, including misappropriation of an individual's personal finances, which could include borrowing from people using our services.
 - **Emotional** – any type of abuse that involves the continual emotional mistreatment of an individual including any actions or comments which fail to show dignity and respect for the individual.

- **Physical**, including actual or threatened physical attacks, verbal assault, or neglect.
- **Religious** – abuse administered through religion, including harassment or humiliation that may result in psychological trauma.
- **Sexual**, which can be contact or non-contact, including rape, other sexual assault, threatened touching or inappropriate sexual remarks or exposure to sexual behaviour or material, including online and digital.
- **Non-recent child abuse** – refers to abuse that occurred when an adult was under the age of 18.
- **Discriminatory**, meaning forms of abuse motivated by prejudice or bias, including against those who have protected characteristics.
- **Organisational**, including neglect and poor care practice within a care setting.
- **Bullying and Cyberbullying**, including name calling, hitting, pushing, spreading rumours, threatening, or undermining someone; Cyberbullying is bullying that takes place online.
- **Criminal Exploitation**, including involvement with gangs and victims of violence, being pressured into doing criminal acts, such as stealing, carrying weapons or drugs.
- **Female Genital Mutilation** – when genitals are deliberately altered or removed for non-medical reasons.
- **Grooming** – when someone builds a relationship, trust, and emotional connection so they can manipulate, exploit, and abuse an individual or individuals. This includes grooming in the context of trafficking and modern slavery.
- **Harassment** – unwanted behaviour that someone finds offensive, makes them feel intimidated or humiliated, or creates a hostile or degrading environment.
- **Modern Slavery**, including child trafficking, forced labour, sexual exploitation, criminal exploitation and domestic servitude.
- **Neglect**, which is a failure to properly care for the physical and emotional needs of the person and to protect them from harm.
- **Radicalisation** – radicalisation aims to inspire new recruits, embed extreme views and persuade vulnerable people to support a cause. This may be through a direct relationship, or through social media.
- **Sexual Exploitation**, when an individual is given items, drugs, money, status, and affection in exchange for performing sexual activities.
- **Self-harm** – any behaviour, initiated by an individual, which directly results in physical harm to that individual themselves.
- **Trafficking**, which involves the recruitment or movement of people for exploitation by the use of threat, force, fraud, or the abuse of vulnerability.

More detailed information about types and indicators of abuse is included in the 'Understanding and Recognising Abuse Policy' (available to external stakeholders on request).

How hyh safeguards its service users, staff, volunteers and others it works and comes into contact with

Policies, procedures and governance

- We have a Safeguarding Policy, Safeguarding Procedure and associated other policies that are regularly updated and approved by our Board of Trustees.

- We have a safeguarding structure in place, with a Lead Trustee for Safeguarding, a Designated Safeguarding Lead and Deputy Safeguarding Leads.
- Our Safeguarding Leads meet regularly to review our safeguarding data to identify issues, respond to emerging trends and monitor safeguarding performance.
- We hold an annual safeguarding meeting. We produce an annual safeguarding report and present this to the Board of Trustees. We report on safeguarding at each regular Board of Trustees Meeting and at Governance Committee Meetings.
- We administer an annual staff safeguarding survey to gather information and feedback about safeguarding practice and culture within the organisation.

Our team

- We operate a safer recruitment practice, recruiting, selecting and vetting staff using our Recruitment Policy, and volunteers using our Volunteers Policy.
- We provide our staff with safeguarding training, including regular refreshers, to ensure they understand safeguarding best practice.
- We provide on-going staff and volunteer supervision, as well as monitoring and guidance on appropriate behaviour.
- Safeguarding is a high priority across all services, and a standing agenda item in all team meetings, ensuring regular monitoring and updates to promote a safe culture and consistent application of safeguarding procedures across the charity.

Handling concerns, allegations and disclosures

- We take all concerns, allegations and disclosures seriously and act on them appropriately, following our Safeguarding Procedure.
- We share concerns and information with other agencies when appropriate, including the police and the County Council's children's or adult services.

Working with partner organisations

- We have arrangements in place to work effectively with other organisations to safeguard and promote the welfare of children, young people and adults at risk, including arrangements for sharing information.
- We work with partner agencies to identify young people who are at risk of radicalisation and support adults at risk to access appropriate networks where they can function away from this pressure.

Providing a safe environment

- We ensure all our activities and premises are safe by implementing up to date health and safety policies, based on the law and statutory guidance.
- We risk assess all of our events, including fundraising events.

Expectations

hyh expects all its staff and volunteers to:

- Follow our Safeguarding Procedure.

- Respond appropriately to all concerns, allegations and disclosures. All hyh team members have a responsibility to act where they have a concern about any of the harms or forms of abuse listed above, where they suspect harm or abuse may be taking place or an allegation/disclosure of harm or abuse has been made.
- Be accountable - never assume someone else has responded to a concern.
- Be vigilant, so they recognise when something is worrying.
- Keep accurate safeguarding records as per the Record Keeping Action Policy.
- Complete and continue to renew their safeguarding training.
- Ask for help and seek support if they have any concerns or questions about safeguarding – we are all here to help, to support and to ensure the protection and wellbeing of those we work with.

Hyh Safeguarding Procedure

Contents

1. Introduction	6
2. Definitions	6
3. Roles and responsibilities.....	6
4. General principles that apply to all safeguarding allegations, disclosures or concerns	7
4.1. Responsibility of the hyh team to act	7
4.2. Is there an immediate danger or risk of harm?	7
4.3. Initial response to any allegations, disclosures or concerns	7
4.4. Duty to refer to Children's Services or Adult Services	8
4.5. Allegations, disclosures or concerns about a member of the hyh team	8
5. Education team safeguarding guidance (when delivering external sessions)	8
6. Safeguarding allegations, disclosures or concerns involving children, unborn babies or adults at risk	9
6.1. Missing children	10
6.2. Record keeping	10
6.3. Consent and information sharing	11
7. Making A Referral to Children's Services or Adult's Services	11
7.1. Unborn children	11
7.2. Referring a child:	12
7.3. Referring an adult at risk:.....	12
7.4. Information to be provided with any referral	12

Hyh's Designated Safeguarding Representatives are:

Designated Safeguarding Lead – Becca Froggett, Head of Outreach Services

(Becca.Froggett@hyh.org.uk)

Deputy Designated Safeguarding Lead (Children) – Emma Manners, Head of Prevention Services (Emma.Manners@hyh.org.uk)

Deputy Designated Safeguarding Lead (Adults) – Carli Hedges, Outreach Housing Lead (carli.hedges@hyh.org.uk)

In the absence of the above please contact Jonny Whitehead, Chief Executive.

(Jonny.Whitehead@hyh.org.uk)

1. Introduction

Safeguarding is our first priority and it lies at the heart of everything we do at Herts Young Homeless (hyh). We have a duty to safeguard, protect and promote the welfare of anyone who works for or comes into contact with our organisation through our activities. This includes, but is not limited to, statutory duties to promote the wellbeing of children, young people and adults at risk, and to protect them from harm.

Safeguarding is everyone's responsibility. This procedure applies to the whole hyh team including all staff, volunteers, trustees and anyone else working at or on behalf of hyh in any capacity.

This procedure applies to all the work we do, including all the services we deliver, the premises we operate from, any events or activities we run and all interactions we have with everyone, including children, young people and adults at risk.

The procedure explains what we expect of the whole hyh team. It also outlines how we act to protect those who come into contact with our organisation, especially children, young people and adults at risk and how we respond to and report any concerns, allegations or disclosures.

This Procedure is to be read alongside the Safeguarding Policy.

2. Definitions

Abuse

- Abuse is when a person has been caused harm or distress, or is likely to be caused harm or distress, by another. This would include causing harm to the physical, sexual, emotional or economic wellbeing of the individual.
- Abuse may be caused by direct acts, or by failure to provide adequate care. It may be systematic and repeated or may consist of a single incident.
- There are many different forms of abuse (see Safeguarding Policy for further details).

Child / Adult at risk

- A child is anyone under the age of 18 years old.
- An adult at risk is a person aged 18 years or over who: has needs for care and support and is experiencing, or is at risk of, abuse or neglect and is unable to protect themselves from that experience, or risk of, abuse or neglect because of their care and support needs (Care Act 2014).

3. Roles and responsibilities

Safeguarding is everyone's responsibility. As noted above, this policy applies to the whole hyh team. Additionally, hyh has a designated person within the organisation who is responsible for safeguarding issues. The Designated Safeguarding Lead is supported by at least two Deputy Designated Safeguarding Leads. Deputies may assume the role and responsibilities of the Designated Safeguarding Lead if the same is absent and must brief the Designated Safeguarding Lead on their return should that happen. Along with the Chief Executive, they comprise hyh's Designated Safeguarding Representatives.

The Designated Safeguarding Lead should ensure that

- They and their Deputies keep themselves updated on all issues relating to safeguarding.
- Staff and volunteers have read and understood the hyh Safeguarding Policy and Procedure.
- Staff and volunteers are familiar with different types of abuse.
- Staff and volunteers know how to respond if a person talks to them about abuse.
- Staff and volunteers follow the hyh Safeguarding Procedure.
- Information is available about help lines and other sources of help for both service users and staff.
- Young people using hyh teams are aware that hyh has a Safeguarding Policy and Procedure.
- People know who to speak to if they have any concerns.

4. General principles that apply to all safeguarding allegations, disclosures or concerns

4.1. Responsibility of the hyh team to act

Everyone on the hyh team has a responsibility to act if they suspect abuse or harm may be taking place or an allegation of abuse or harm has been made.

DOING NOTHING IS NOT AN OPTION.

It is a duty of all the hyh team to report all safeguarding concerns to their Line Manager and/or others in accordance with the procedures set out below. Any suspected harm or abuse must be reported even if no allegation or disclosure has been made by the person/s in question.

4.2. Is there an immediate danger or risk of harm?

The safety of everyone that hyh works with is paramount in all decisions relating to their welfare and every step should be taken to ensure that no person is left in immediate danger. This refers to everyone, not just children or adults at risk.

If someone is in immediate danger, the relevant Emergency Service(s) should be called by ringing 999. Once that has happened, if the person is a child or an adult at risk then Children's Services or Adults Services must also be informed.

If there is no immediate danger or risk of harm then the rest of this Procedure should be followed.

4.3. Initial response to any allegations, disclosures or concerns

When abuse or harm is alleged, disclosed or suspected, the initial response by the **hyh** team is limited to listening carefully to what the person in question says so as to:

- Clarify the concern(s)
- Offer re-assurance about how they will be kept safe
- Explain what action will be taken

The initial response is not an investigation. The service user must not be pressed for information, led, cross-examined or given false assurances of absolute confidentiality. Such actions could prejudice police investigations and risk causing additional harm to the service users involved, particularly if they are a child or adult at risk.

4.4. Duty to refer to Children's Services or Adult Services

The hyh team has a professional duty to make a referral to Children's Services or Adult's Services if there are signs that an unborn child, a child under the age of eighteen or an adult at risk is:

- Suffering or has suffered abuse and / or neglect, or is
- Likely to suffer abuse and / or neglect

Referrals should usually be made as soon as possible. If there will be any significant delay, following our recognition of duty to refer, this must be discussed with your line manager.

4.5. Allegations, disclosures or concerns about a member of the hyh team

If the allegation, disclosure or concern relates to a member of the hyh team, that person should not be informed about this until the Chief Executive Officer (or, in their absence, the Designated Safeguarding Lead) has been advised of the situation and confirmed their course of action. If the allegation, disclosure or concern relates to the Chief Executive Officer, the Whistleblowing Policy and Procedure should be used to report the matter immediately to the Chair or Vice Chair of Trustees.

If, following an investigation, the concern, allegation or disclosure is substantiated, further action will be taken according to the staff Disciplinary Procedure, the Volunteer Policy or the Trustee Manual, depending on their role.

5. Education team safeguarding guidance (when delivering external sessions)

As visitors to an education provider, hyh education team members have a duty of care to inform the education provider of any safeguarding concerns they become aware of during their visit. The team members need to provide, in writing, a full account of any disclosure made to the provider to support further action. Hyh education team members must follow the guidance in this section when they are delivering external sessions as visitors to education providers. At all other times, education team members must act in accordance with the remainder of this procedure.

If hyh does not have details of the person e.g. full name, date of birth, address etc., a safeguarding referral would need to be completed by the education provider's designated safeguarding lead. When a student's full name and school is known, following discussion with the hyh Designated Safeguarding Lead, it may be necessary to complete a referral.

If a young person (during an education session) makes a disclosure of a safeguarding nature or a hyh team member observes indicators of abuse then the following actions must be taken.

If a student makes a disclosure during the lesson or in front of other students, the hyh team member should calmly explain that they would like to continue talking to them about it but in a quieter setting. Make a suggestion to talk further about it at the end of the lesson, confirming what they are saying is important and you would like to give more attention to what they are saying. Ask the student and teacher to remain in the classroom at the end of the lesson. Inform the teacher that a disclosure was made (if not already witnessed) and request the designated safeguarding lead of the education provider is contacted immediately so they can attend and discuss the discloser with the student.

If a disclosure is overheard or indicators of abuse are observed, take a note of the seating location of the student and if possible, their name. At the end of the session ask to speak privately with the teacher (or other professional in charge of the lesson) to discuss the disclosure/observation. In both scenarios, provide a full account of what was heard/observed and confirm the discussion will be followed up with an e-mail to the designated safeguarding lead of the education provider.

If the disclosure involves a teacher then a discussion must take place with the Headteacher as soon as possible with a follow-up email being sent to the Local Authority's Designated Officer.

If it is not possible to discuss our concerns (due to another session commencing), take note of the class time and discuss at the end of the teaching day with the education provider's designated safeguarding lead.

An e-mail must be sent to the education provider's Designated Safeguarding Lead with a written account of disclosure/observation, what was discussed and all agreed actions.

The appropriate line manager must be informed of all safeguarding concerns and if deemed appropriate, must discuss these with hyh's Designated Safeguarding Lead.

6. Safeguarding allegations, disclosures or concerns involving children, unborn babies or adults at risk

If an hyh team member receives an allegation or disclosure of abuse, suspects a case of abuse or has a safeguarding concern they must:

- Remain calm
- Reassure the person and be clear in their communication
- Listen carefully to the person and take what they are saying seriously
- Record what is being said as accurately and fully as possible
- Advise the person of their course of action where appropriate, explaining that they will need to talk to other people in order to help them
- Where appropriate, keep the matter strictly confidential and do not inform the alleged abuser. If the alleged abuser is a service user, follow our Information sharing policy.
- Update Salesforce in line with the Record keeping provisions under 6.2.

hyh expects all team members to discuss any welfare or safeguarding concerns with their Line Manager as soon as possible.

If this is not possible, and the team member is confident that a safeguarding referral must be made – taking into account their training, knowledge, and experience – they are authorised to make the referral without prior consent from a Line Manager. However, they must ensure that

the relevant Line Manager or Safeguarding Lead is informed as soon as possible thereafter. If discussing concerns with their Line Manager is not possible and the team member is not confident that a safeguarding referral must be made, they should seek support from another manager, as soon as possible.

Support and Guidance: Support is always available to team members when making safeguarding referrals. Line Managers and Safeguarding Leads are available to discuss complex cases, particularly where a team member is uncertain whether a referral should be made.

Involving the Child, Parent, or Adult at Risk

Where appropriate, the team member should discuss the intention to make a referral with the child, parent of an unborn baby, or adult at risk, provided that:

- The individual has sufficient understanding of the significance and potential consequences of the referral, and
- The discussion does not increase the risk of significant harm. .

Please refer to our Information Sharing policy, for more guidance.

Responsibility for Making Referrals

It remains the responsibility of the hyh team member to make the referral, regardless of the views of the child or adult at risk.

All referrals should be made in line with the guidance set out in hyh's Sharing Safeguarding Information Policy

6.1. Missing children

When a child/young person has been reported missing to the Police and then makes contact with **hyh**, strongly advise them that they should contact the police or Children's services to let them know they are safe.

Inform the child/young person that we will contact Children's Services to inform them that we have received contact from the child/young person and we will be passing on any information to CS to safeguard them.

6.2. Record keeping

In all cases, the hyh team member must complete actions on Salesforce immediately after, or as soon as practical after the event occurs. As a maximum, this should be within two working days, except in exceptional circumstances which must be discussed with your Line Manager. This is in line with the Record Keeping Action Policy. The recording to Salesforce must include all necessary information such as dates, times, incident, actions taken and outcomes. It should not however

cause any delay in taking any of the immediate required steps outlined above or the actions required below. All safeguarding cases must be recorded on the database.

6.3. Consent and information sharing

In all cases, unless by discussing it the hyh team member will put the young person at risk of harm, the team member should discuss their concerns with the alleged victim, the options available to them and seek their consent for steps they believe to be necessary. They should also explain that they are obliged to discuss their concerns with a manager. There may be instances when a safeguarding issue must be reported without the person/s who is the subject of the concern being informed.

If consent is not given it may still be deemed appropriate to make a referral where:

- They or others are at risk of serious harm.
- The young person is not the only one affected and risks to others need to be considered, e.g. where a child/adult at risk is involved, their safety will always be paramount.

Where consent was not given, this should always be made known to the authority the information has been passed onto. The young person should also be informed of the steps the team member has taken, unless this would put the person at significant risk of harm.

At all times, the hyh team member should follow hyh's Sharing Safeguarding Information Policy, which provides more information on this subject.

7. Making A Referral to Children's Services or Adult's Services

7.1. Unborn children

A Referral must always be made for a pre-birth assessment in any of the following circumstances:

- There has been a previous unexpected death of a child whilst in the care of either parent where abuse or neglect is/was suspected;
- There are children in the household / family currently subject to a Child Protection Plan or previous child protection concerns;
- Children in the household / family currently subject to a Child Protection Plan or previous child protection concerns;
- A sibling (or a child in the household of either parent) has previously been removed from the household either temporarily or by court order;
- There is knowledge that parental risk factors e.g. domestic violence, mental illness / impairment or substance misuse may impact on the unborn baby or child's safety or development;
- There are concerns about parental ability to self-care and/or to care for the child e.g. unsupported young parent or parent with a learning disability;
- There are maternal risk factors e.g. denial of pregnancy, avoidance of antenatal care (failed appointments), non-co-operation with necessary services, non-compliance with treatment with potentially detrimental effects for the unborn baby for example with substance misuse;
- Any other concern exists that the baby may be likely to suffer significant harm, including a parent previously suspected of fabricating or inducing illness in a child;

- Where the concerns centre around a category of parenting behaviour e.g. substance misuse, the referrer must make clear how this is likely to impact on the baby and what risks are predicted.

7.2. Referring a child:

If the decision is made to make an urgent referral (4.4. & 6 above) you must contact Hertfordshire Children's Services on: **0300 123 4043 when you have obtained the information as detailed in section 7.4.**

If you are made aware of a child that requires a referral but they are not from Hertfordshire, you will need to find the area's referral information online.

Non-urgent referrals (i.e. where there is no immediate risk of harm) and all phone referrals must be followed up by completing the online safeguarding/child protection contact form <https://www.hertfordshire.gov.uk/services/childrens-social-care/child-protection/professionals-report-a-concern.aspx> as soon as possible.

You will need to complete the registration process before you will be able to complete the online contact form. After your referral has been submitted, you will receive a unique reference number along with a transcript of the referral. The transcript and unique reference number must be saved in Salesforce following the Record Keeping Action Policy.

7.3. Referring an Adult at Risk:

If the decision is made to make an urgent referral (4.4. & 6 above) you must contact Hertfordshire Adult's Services on: **0300 123 4042 when you have obtained the information as detailed in sec. 7.4.**

Non-urgent referrals (i.e. where there is no immediate risk of harm) and all phone referrals must be followed up by completing the online form below:

<https://www.hertfordshire.gov.uk/services/adult-social-services/report-a-concern-about-an-adult/professionals-request-social-care/professionals-make-an-social-care-referral.aspx>

After completing the online form, you will receive an email, which will provide a copy of the information completed online. This must be saved in Salesforce following the Record Keeping Action Policy.

7.4. Information to be provided with any referral

Where available, the following information should be provided with the referral (**but an absence of information must not delay a referral**):

- Cause for concern including details of any allegations, the source/s of these, timing and location of incident/s
- Child's/adult at risk current location and emotional and physical condition

- Whether the child/adult at risk needs immediate protection
- Full names, date of birth and gender of child/ren/ adult at risk (including all surnames used).
- Family address (current, when last moved and previous address)
- Identity of those with parental responsibility
- Identity of any carers
- Names and date of birth of all household members and any known regular visitors to the household (including all surnames used)
- Details of child's/ adult at risk's extended family or community who are significant for the child
- Ethnicity, first language and religion of children/adult at risk's parents / carers
- Any need for an interpreter, signer or other communication aid
- Any special needs of child/ren/adult at risk and other household members
- Any significant / important recent or historical events / incidents in child/ adult at risk or family's life, including previous concerns
- Details of any alleged perpetrators (if relevant)
- Background information relevant to referral e.g. positive aspects of parents' care, previous concerns, pertinent parental issues e.g. mental health, domestic violence, drug or alcohol abuse, threats and violence towards professionals
- Referrer's relationship and knowledge of child/adult at risk and parents / carers
- Known current or previous involvement of other agencies / professionals e.g. schools, GPs
- Information regarding carer or parental knowledge of, and agreement to, a referral being made.

8. RAG Rating of Cases

hyh is committed not only to safeguarding but also to promoting the general wellbeing of young people.

To support consistent risk management and oversight, hyh has introduced a RAG (Red, Amber, Green) Rating System which applies to all service users accessing hyh services—with the exception of Education and 18+ Advice Line services.

RAG Rating Process

All staff members must RAG rate each case they manage and review the rating every three months, or sooner if there has been a change in circumstances.

Each case will be graded as follows:

- Low – Green:
- Significant – Amber:
- Critical – Red:

Staff will complete the rating using hyh's RAG Grading Guidance and may seek support from their Line Manager or Safeguarding Lead where needed.

Once graded, the Line Manager must approve the rating, and an action plan will be agreed between the staff member and Line Manager.

All actions and decisions must be recorded in line with hyh's Record Keeping Policy.

Escalation Process

Low (Green) Cases:

- Monitored by the Team Member and their Line Manager.
- The Line Manager must approve the grading and action plan.

Significant (Amber) Cases:

- Must be approved by both the Line Manager and a Safeguarding Lead.
- An action plan will be developed collaboratively to address the identified risks.

Critical (Red) Cases:

- Must be approved by the Designated Safeguarding Lead.
- The Designated Safeguarding Lead will complete an Escalation Form, which is sent to the hyh Chief Executive and the relevant Board Member.

At this stage, the Chief Executive will consider whether the situation constitutes a Major or Serious Incident, in line with hyh's Policies and Procedures.

Depending on the findings, this may result in further escalation to the Chair of Trustees or notification to the Charity Commission, in accordance with hyh's Major and Serious Incidents Policies.