Safeguarding Policy

TAAS
THE APPROPRIATE
ADULT SERVICE

The Appropriate Adult Service Limited (TAAS)

Last Updated: November 2025

1. Policy Statement

The Appropriate Adult Service Limited (TAAS) is wholly committed to safeguarding and promoting the welfare of children, young people, and adults at risk. We recognise that safeguarding is everyone's responsibility and is central to our role in supporting vulnerable individuals within the criminal justice system.

This policy applies to all staff, volunteers, trustees, contractors, and anyone working on behalf of TAAS. We are committed to creating and maintaining a safe environment where concerns are taken seriously, responded to promptly, and appropriate action is taken to protect those at risk of harm.

Our Commitment

We will:

- Place the safety and wellbeing of vulnerable individuals at the heart of everything we do
- Ensure all staff are trained to recognise and respond to safeguarding concerns
- Work in partnership with police, local authorities, health services, and other agencies to protect vulnerable people
- Act in accordance with relevant legislation, statutory guidance, and best practice
- Maintain clear procedures for reporting and responding to safeguarding concerns
- Create a culture where staff feel confident to raise concerns without fear of reprisal
- Ensure our safeguarding practices are regularly reviewed and updated

2. Legal and Regulatory Framework

This policy is underpinned by and complies with:

Primary Legislation

- Children Act 1989 & 2004 Duties to promote child welfare and cooperate with safeguarding partners
- Mental Capacity Act 2005 Protecting adults who lack capacity to make decisions
- Mental Health Act 1983 (amended 2007) Safeguards for people with mental health conditions
- Care Act 2014 Statutory duties regarding adult safeguarding
- Police and Criminal Evidence Act 1984 (PACE) & Code C Requirements for appropriate adult provision
- Data Protection Act 2018 & UK GDPR Information sharing for safeguarding purposes

- Modern Slavery Act 2015 Identifying and reporting modern slavery and human trafficking
- Serious Crime Act 2015 Mandatory reporting duties
- Counter-Terrorism and Security Act 2015 Prevent duty

Statutory Guidance

- Working Together to Safeguard Children 2023 Multi-agency safeguarding arrangements
- **Keeping Children Safe in Education 2024** Safeguarding in educational settings (relevant for staff training)
- Care and Support Statutory Guidance 2023 Adult safeguarding under the Care Act
- Information Sharing: Advice for Practitioners 2018 Lawful information sharing

Regional Frameworks

- Local Safeguarding Children Partnerships (LSCP) procedures in each operational area
- Local Safeguarding Adults Boards (LSAB) procedures in each operational area
- Multi-Agency Public Protection Arrangements (MAPPA) where applicable
- Channel Panel procedures (Prevent strategy)

3. Scope and Application

3.1 Who This Policy Protects

This policy applies to safeguarding:

Children and Young People (under 18 years)

- All individuals under 18 years of age
- Includes those in police custody requiring appropriate adult support
- Care leavers and young people transitioning to adulthood

Adults at Risk (18 years and over)

- Adults who have needs for care and support (whether or not the local authority is meeting any of those needs)
- Adults who are experiencing, or are at risk of, abuse or neglect
- Adults who, as a result of those care and support needs, are unable to protect themselves from abuse or neglect

This specifically includes adults with:

- Mental health conditions
- Learning disabilities

- Physical disabilities or sensory impairments
- Dementia or cognitive impairment
- Substance misuse issues
- Other vulnerabilities that may affect their ability to protect themselves

3.2 Who This Policy Applies To

This policy applies to:

- All TAAS employees (full-time, part-time, casual, and zero-hours)
- Volunteers and students on placement
- Agency staff and contractors
- Trustees and directors
- Any person representing TAAS or delivering services on our behalf

4. Key Safeguarding Roles and Responsibilities

4.1 Board of Directors

- Overall accountability for safeguarding within TAAS
- Ensuring adequate resources for safeguarding functions
- Receiving regular safeguarding reports and monitoring effectiveness
- Approving safeguarding policies and reviewing annually

4.2 Designated Safeguarding Lead (DSL)

Name: Leanne James

Contact: 0333 2424999 |DSL Email -

safeguarding@theappropriateadultservice.org.uk

Responsibilities:

- Strategic oversight of all safeguarding matters
- Ensuring compliance with legislation and statutory guidance
- Liaison with Local Safeguarding Children Partnerships and Adults Boards
- Oversight of safeguarding training and competency
- Managing complex or high-risk safeguarding cases
- Reporting to the Board on safeguarding matters
- Coordinating serious case reviews or safeguarding adult reviews
- Maintaining relationships with statutory partners

4.3 Deputy Safeguarding Leads

Available across all operational regions to provide 24/7 safeguarding support:

- Sue Edwards DSL 1 Region South 0333 2424999
- Deb Thompson DSL 2 Region North 0333 2424999
- Teena Sloanes DSL 3 Region London 0333 2424999

4.4 Regional Managers

- Ensuring safeguarding procedures are followed within their region
- Monitoring safeguarding concerns and responses
- Supporting staff with safeguarding decisions
- Escalating concerns to the DSL as appropriate
- Ensuring staff complete mandatory safeguarding training
- Maintaining awareness of local safeguarding arrangements

4.5 All Staff Members

Every member of staff has a responsibility to:

- Complete mandatory safeguarding training and maintain competency
- Be alert to signs of abuse, neglect, or exploitation
- Report any safeguarding concerns immediately
- Follow TAAS safeguarding procedures at all times
- Maintain appropriate professional boundaries
- Protect confidential information while sharing appropriately for safeguarding
- Cooperate with safeguarding investigations
- Challenge poor practice or concerning behaviour

5. Types of Abuse and Harm

Staff must be alert to all forms of abuse and harm. Definitions below are not exhaustive, and abuse may take multiple forms simultaneously.

5.1 Abuse of Children and Young People

Physical Abuse Hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating, or otherwise causing physical harm. Also includes fabricating or inducing illness.

Emotional Abuse Persistent emotional maltreatment causing severe and persistent adverse effects on emotional development. Includes conveying to children they are worthless, unloved, inadequate, or valued only for meeting another's needs. May involve age-inappropriate expectations, overprotection, or limitation of exploration and learning.

Sexual Abuse Forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. Includes physical contact (penetrative and non-penetrative) and non-contact activities such as involving children in viewing sexual images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Neglect Persistent failure to meet a child's basic physical and/or psychological needs, likely to result in serious impairment of health or development. Includes failure to provide adequate food, clothing, shelter, supervision, or access to medical care. Also includes neglect of emotional needs and failure to protect from danger.

Additional Concerns Specific to Criminal Justice Context:

- Child Criminal Exploitation (CCE) including county lines involvement
- Child Sexual Exploitation (CSE)
- Gang involvement and serious youth violence
- Online exploitation and abuse
- Radicalisation and extremism
- Modern slavery and trafficking
- Abuse by other young people (peer-on-peer abuse)

5.2 Abuse of Adults at Risk

Physical Abuse Assault, hitting, slapping, pushing, misuse of medication, restraint, or inappropriate physical sanctions.

Domestic Violence or Abuse Includes psychological, physical, sexual, financial, or emotional abuse by a partner or family member. Includes coercive control and so-called "honour-based violence."

Sexual Abuse Rape, indecent exposure, sexual harassment, inappropriate touching, sexual acts to which the adult has not consented or could not consent, or was pressured into consenting.

Psychological or Emotional Abuse Threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation, or unreasonable withdrawal of services or supportive networks.

Financial or Material Abuse Theft, fraud, internet scamming, coercion regarding financial affairs or arrangements, including wills, property, inheritance, or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.

Modern Slavery Encompasses slavery, human trafficking, forced labour, and domestic servitude. Includes victims being forced to work through mental or physical threat, owned or controlled by an "employer," dehumanised, treated as a commodity, or physically constrained.

Discriminatory Abuse Discrimination based on race, gender, gender identity, age, disability, sexual orientation, or religion, including hate crime.

Organisational or Institutional Abuse Neglect and poor care practice within an institution or care setting. Includes rigid routines, inadequate staffing, lack of individual care, or abuse of power.

Neglect and Acts of Omission Ignoring medical, emotional, or physical care needs, failure to provide access to health, social care or educational services, or withholding necessities of life such as medication, adequate nutrition, or heating.

Self-Neglect Neglecting to care for one's personal hygiene, health, or surroundings. Includes behaviour such as hoarding. Note: self-neglect may indicate underlying mental health, substance misuse, or cognitive impairment requiring assessment.

Additional Concerns in Criminal Justice Context:

- Cuckooing (exploitation of vulnerable adults' homes for criminal activity)
- Mate crime (befriending vulnerable people to exploit them)
- Radicalisation
- Forced marriage
- Female genital mutilation (FGM)

6. Recognising Signs of Abuse

Staff should be alert to potential indicators of abuse. The following are examples and not exhaustive lists.

6.1 Physical Indicators

- Unexplained injuries, bruises, burns, or marks
- Injuries inconsistent with explanation given
- Injuries at different stages of healing
- Patterns of injuries or repeated injuries
- Poor hygiene or unkempt appearance
- Weight loss or signs of malnutrition
- Unexplained changes in behaviour or demeanour

6.2 Behavioural Indicators

- Withdrawn, anxious, or depressed behaviour
- Significant changes in behaviour or personality
- Fear of specific individuals or situations
- Reluctance to go home or be with certain people
- Age-inappropriate sexual knowledge or behaviour
- · Self-harm or suicidal thoughts
- Substance misuse

- Running away or going missing
- Involvement in criminal activity (potentially exploitation)

6.3 Relationship and Social Indicators

- Isolation from friends, family, or support networks
- Controlling or coercive relationships
- Older "boyfriend/girlfriend" or concerning relationships (for young people)
- Association with known exploiters or criminal groups
- Unexplained gifts, money, or possessions
- Debt or financial difficulties

6.4 Context-Specific Indicators in Custody

Given our operational environment, staff should pay particular attention to:

- Multiple arrests or police contacts
- Offences that may indicate exploitation (e.g., drug dealing, theft, prostitution)
- Inconsistent accounts or evasiveness about circumstances
- Visible injuries or evidence of assault
- Substance misuse or intoxication
- Evidence of trafficking or coercion
- No fixed address or unstable accommodation
- Lack of appropriate support networks
- Communication barriers or control by others

7. Responding to Safeguarding Concerns

7.1 Immediate Response - What to Do If You Have a Concern

Step 1: React Calmly and Reassuringly

- Stay calm and listen carefully
- Do not promise confidentiality explain you may need to share information to keep them safe
- Take what is said seriously
- Reassure the person they have done the right thing by telling you

Step 2: Record

• Make detailed, contemporaneous notes of what you have seen, heard, or been told

- Use the person's own words where possible
- Record facts, not opinions or assumptions
- Note date, time, location, and any witnesses
- Record your actions and who you reported to
- Complete TAAS Safeguarding Concern Form immediately

Step 3: Report

- For immediate risk or emergency: Contact emergency services (999) immediately
- For all safeguarding concerns: Report to your Regional Manager or Safeguarding Lead within 1 hour
- Out of hours: Contact the on-call Safeguarding Lead via the 24/7 operations centre
- Do not investigate or discuss with others not involved in safeguarding response

Step 4: Referral The Safeguarding Lead or Manager will:

- Assess the level of risk and urgency
- Make referrals to appropriate agencies (Children's Social Care, Adult Social Care, MARAC, Channel Panel, etc.)
- Liaise with police where the person is in custody
- Ensure appropriate information sharing
- Document all actions taken

7.2 What NOT to Do

Do Not:

- Ignore concerns or assume someone else will act
- Delay reporting because you're "not sure"
- Investigate or interview the person repeatedly
- Promise to keep secrets or guarantee confidentiality
- Contact alleged abusers or those implicated
- Discuss concerns with colleagues not involved in the response
- Make judgments about whether abuse has occurred (that's for professionals to determine)
- Let your disbelief of the person's story prevent you from reporting
- Remove or interfere with evidence

7.3 Disclosures - If Someone Tells You They Are Being Abused

DO:

- Listen without interrupting
- Take what they say seriously
- Reassure them they have done the right thing
- Explain you need to share the information to help keep them safe
- Tell them what you will do next
- Record exactly what they said in their own words

DON'T:

- Promise to keep it secret
- Ask leading questions or repeatedly ask them to describe what happened
- Suggest answers or put words in their mouth
- Express shock, disbelief, or judgment
- Confront the alleged abuser
- Delay reporting while you "think about it"

8. Information Sharing and Confidentiality

8.1 Principles of Information Sharing for Safeguarding

Safeguarding overrides normal confidentiality requirements. We follow the "Seven Golden Rules" of information sharing:

- 1. The UK GDPR and Data Protection Act 2018 are not barriers to sharing information safeguarding is a lawful basis for processing personal data
- 2. **Be open and honest** explain to people why, what, how, and with whom their information will be shared (unless doing so would place them or others at increased risk)
- 3. **Seek consent where appropriate** but do not let lack of consent prevent sharing if there is risk of serious harm
- 4. Consider safety and wellbeing the safety and wellbeing of the individual takes priority
- 5. Share necessary and proportionate information share what is needed for the safeguarding purpose
- 6. Keep records document what you shared, with whom, when, and why
- 7. Ensure information is accurate, up-to-date, and secure

8.2 When to Share Without Consent

We will share information without consent when:

• There is risk of significant harm to the individual or others

- A serious crime has been or may be committed
- Seeking consent would place the person or others at risk
- Seeking consent would prejudice prevention, detection, or prosecution of a crime
- It is otherwise in the public interest to share

8.3 Information Sharing Partners

We share safeguarding information appropriately with:

- Children's Social Care (Local Authority Children's Services)
- Adult Social Care (Local Authority Adult Services)
- Police (including safeguarding units and Public Protection Units)
- NHS and health services (including mental health crisis teams)
- Local Safeguarding Children Partnerships (LSCP)
- Local Safeguarding Adults Boards (LSAB)
- Multi-Agency Risk Assessment Conferences (MARAC) for domestic abuse
- Multi-Agency Public Protection Arrangements (MAPPA)
- Channel Panel (Prevent)
- National Referral Mechanism (modern slavery/trafficking)
- Courts and legal representatives (where appropriate)

9. Specific Safeguarding Procedures

9.1 Child Protection Referrals

When concerns arise about a child's safety:

During Office Hours (9am-5pm, Monday-Friday):

- Contact the relevant Local Authority Children's Social Care (MASH Multi-Agency Safeguarding Hub)
- Follow the local authority's referral procedures for the area where the child lives
- Confirm referral in writing within 24 hours if required

Out of Hours:

- Contact Emergency Duty Team (EDT) for the relevant local authority
- If immediate risk, contact police (999 or 101)

Follow-Up:

Safeguarding Lead ensures referral is recorded and tracked

- Obtain written confirmation of receipt from Children's Social Care within 3 working days
- If no response within 3 days, follow up with Children's Social Care
- If we disagree with the outcome, use local escalation procedures

9.2 Adult Safeguarding Referrals

When concerns arise about an adult at risk:

Making a Referral:

- Contact the relevant Local Authority Adult Social Care safeguarding team
- Use local authority safeguarding referral forms/processes
- Provide as much detail as possible about the concern
- Confirm whether the adult has capacity to consent to the referral

With Capacity:

- Where the adult has mental capacity and refuses consent to a referral, we will:
 - Discuss the concerns and reasons for referral
 - Explain the risks and potential consequences
 - Offer support and information about services
 - Document the discussion and decision
 - Still refer if there is risk to others or public interest requires it

Without Capacity:

 Where the adult lacks capacity to consent, we will refer in their best interests under the Mental Capacity Act 2005

Emergency Situations:

- If immediate risk to life or wellbeing: Contact emergency services (999)
- Preserve evidence if a crime may have been committed

9.3 Domestic Abuse

If we identify domestic abuse concerns:

High Risk Cases:

- Refer to MARAC (Multi-Agency Risk Assessment Conference) via appropriate route (typically police or IDVA)
- Use DASH risk assessment if trained to do so
- Ensure immediate safety planning
- Provide information about specialist domestic abuse services

Medium/Standard Risk:

- Signpost to local domestic abuse services
- Provide National Domestic Abuse Helpline: 0808 2000 247 (24/7)
- Consider adult or child safeguarding referral as appropriate

Children in Household:

- Always consider impact on children and refer to Children's Social Care if needed
- Domestic abuse is a child protection concern even if children are not directly harmed

9.4 Modern Slavery and Human Trafficking

If we suspect modern slavery or human trafficking:

Indicators:

- No control over documents or money
- Restricted movement or freedom
- Fearful, withdrawn, or appearing controlled
- Evidence of physical abuse or poor living conditions
- Debt bondage or unexplained debt
- Working excessive hours in exploitative conditions
- Inconsistent or scripted account of circumstances

Response:

- Report to police immediately (101 or 999 if emergency)
- Contact Modern Slavery Helpline: 08000 121 700
- Consider referral to National Referral Mechanism (NRM) through First Responder
- Do not interview or investigate further preserve evidence for police

Child Victims:

- Automatic referral to NRM (consent not required for children)
- Immediate child protection referral to Children's Social Care

9.5 Female Genital Mutilation (FGM)

Mandatory Reporting Duty:

- If a professional discovers that FGM has been carried out on a girl under 18, they must report to police (101)
- This is a legal duty under the FGM Act 2003 (as amended by Serious Crime Act 2015)

• Report must be made by the end of the next working day

At Risk:

- If there are concerns a girl is at risk of FGM, refer to Children's Social Care
- Use local FGM safeguarding procedures

Adult Victims:

- Refer to specialist FGM services and women's health services
- Consider adult safeguarding referral

9.6 Prevent - Radicalisation and Extremism

If we identify concerns about radicalisation or extremism:

Indicators:

- Use of extremist vocabulary or hate speech
- Possession of extremist materials or literature
- Expressing support for extremist causes
- Significant changes in behaviour, appearance, or social networks
- Isolation from previous friends and family
- Travel to conflict zones or attempts to do so
- Online activity suggesting radicalisation

Response:

- Discuss concerns with Designated Safeguarding Lead
- Refer to local Prevent team (via police or local authority)
- Consider referral to Channel Panel (multi-agency support programme)
- In cases of immediate threat to life, contact police (999)

Important Note: Prevent is about early intervention and support, not criminalisation. Most Channel cases do not result in criminal proceedings.

9.7 Self-Harm and Suicide Risk

When supporting individuals in custody who present with self-harm or suicide risk:

Immediate Actions:

- Ensure person is safe and alert custody staff immediately
- Request medical assessment by healthcare professional
- Do not leave person alone if high risk

• Remove potential ligature points or harmful items if safe to do so

Information Sharing:

- Share all relevant information with custody staff and healthcare professionals
- Document previous self-harm, attempts, ideation, or risk factors
- Provide information about mental health history, current stressors, or recent events

Follow-Up:

- Ensure appropriate mental health assessment is conducted
- Advocate for suitable placement (e.g., not in police cell if appropriate diversion available)
- Liaise with mental health crisis teams or liaison and diversion services

Post-Release Concerns:

- If concerns remain after release, consider safeguarding referral to adult social care or mental health services
- Provide information about crisis support services

10. Safer Recruitment and Workforce Management

10.1 Recruitment Safeguards

All recruitment includes:

- Detailed application forms (no CV-only applications)
- Verification of identity
- Right to work checks
- Full employment history with explanations for gaps
- Minimum of two references (including most recent employer)
- Enhanced DBS checks (with barred list checks where applicable)
- Safeguarding questions at interview
- Probationary period with enhanced supervision

10.2 DBS Checks and Updates

- All staff: Enhanced DBS check (renewed every 3 years minimum)
- DBS Update Service: Staff required to register
- Barred List Checks: For all staff working with children and adults at risk
- Portability: We do not accept DBS checks from other organisations all staff require TAAS DBS

10.3 Safeguarding in Induction

All new staff receive comprehensive safeguarding training covering:

- This safeguarding policy and procedures
- Types and indicators of abuse
- How to recognise and respond to concerns
- Reporting procedures and key contacts
- Information sharing and confidentiality
- Boundaries and professional conduct
- Role-specific safeguarding considerations

10.4 Ongoing Training Requirements

Mandatory Training:

- Safeguarding Children Level 1 & 2 (refreshed every 3 years)
- Safeguarding Adults Level 1 & 2 (refreshed every 3 years)
- Prevent (refreshed every 3 years)
- Mental Capacity Act and Deprivation of Liberty
- Information sharing and confidentiality

Additional Training for Safeguarding Leads:

- Safeguarding Children Level 3 or 4
- Safeguarding Adults Advanced
- Managing safeguarding allegations
- Multi-agency working and procedures

Specialist Training as Required:

- Child sexual exploitation and county lines
- Domestic abuse awareness
- Modern slavery and trafficking
- FGM, forced marriage, and honour-based abuse
- Trauma-informed practice

10.5 Supervision and Support

All staff receive:

• Regular 1:1 supervision (minimum monthly)

- Safeguarding supervision for complex cases
- Reflective practice sessions
- Debrief following serious incidents
- Access to Employee Assistance Programme

11. Allegations Against Staff and Whistleblowing

11.1 Allegations Against Staff Members

We take all allegations against staff seriously and will:

- Respond swiftly and appropriately to protect individuals from harm
- Support the person making the allegation
- Follow fair processes for the staff member involved
- Fulfil our legal and statutory duties

Types of Allegations: An allegation may relate to a person who works with children or adults at risk who has:

- Behaved in a way that has harmed or may have harmed a child or adult at risk
- Possibly committed a criminal offence against or related to a child or adult at risk
- Behaved towards a child or children, or adult(s) at risk, in a way that indicates they may pose a risk of harm

Reporting Process:

- 1. Report allegation immediately to Managing Director or designated senior person
- 2. Do not investigate or interview the staff member
- 3. Managing Director contacts Local Authority Designated Officer (LADO) for children's allegations, or follows adult safeguarding procedures
- 4. Managing Director contacts police if criminal offence suspected
- 5. Consider whether the staff member should be suspended or redeployed while investigation takes place
- 6. Follow LADO or adult safeguarding advice regarding internal investigation
- 7. Take appropriate disciplinary action based on findings

Support:

- Support provided to the person making the allegation
- Fair treatment and support for staff member subject to allegations
- Separate pastoral support from investigation process

11.2 Low-Level Concerns

We encourage staff to report "low-level concerns" about staff behaviour that doesn't meet the threshold for an allegation but causes discomfort. Examples:

- Behaviour that is inconsistent with our code of conduct
- Boundary violations
- Concerning behaviour patterns

These concerns are recorded, monitored for patterns, and addressed through supervision or training.

11.3 Whistleblowing

We are committed to creating a culture where staff feel safe to raise concerns. Our whistleblowing policy protects staff who report:

- Concerns about safeguarding practices
- Failure to follow safeguarding procedures
- Cover-up of safeguarding failings
- Danger to service users
- Criminal activity

How to Raise Concerns:

- Report to your line manager, Regional Manager, or Designated Safeguarding Lead
- If concern involves senior management, contact Board member or use external whistleblowing channels
- Contact NSPCC Whistleblowing Helpline: 0800 028 0285 (for child protection concerns)
- Contact Care Quality Commission or Local Authority (for adult safeguarding)

Protection: Staff who raise genuine concerns will be protected from detriment or dismissal. Victimisation of whistleblowers is a disciplinary matter.

12. Professional Boundaries and Code of Conduct

12.1 Professional Boundaries

All staff must maintain appropriate professional boundaries:

Relationships:

- No personal or social relationships with service users
- No contact outside professional role (including social media)
- No accepting or giving of gifts
- No sharing of personal contact details

Communication:

- Professional and respectful at all times
- Age-appropriate language and content
- No communication outside TAAS systems
- No personal social media contact

Behaviour:

- Never engage in physical contact except where necessary for safety (and documented)
- Never be alone with service users in private or isolated locations without risk assessment
- Never transport service users in personal vehicles
- Never share personal information about your own life

Digital Safety:

- No photography of service users
- No sharing of service user information on personal devices or social media
- Maintain privacy settings on personal social media
- Be mindful of digital footprint

12.2 Position of Trust

Staff must recognise they may be in a position of trust and power in relation to vulnerable service users. This position must never be abused.

Zero Tolerance: We have zero tolerance for:

- Sexual activity or relationships with service users
- Grooming behaviour
- Abuse of power or position
- Discrimination or derogatory behaviour
- Failure to respect dignity and rights

Any breach will result in disciplinary action up to and including dismissal and may result in referral to police and/or regulatory bodies.

13. Record Keeping and Documentation

13.1 Safeguarding Records

All safeguarding concerns and actions must be recorded:

What to Record:

- Date, time, and location of concern
- Factual description of what was observed, heard, or reported
- Exact words used (where a disclosure)
- Your response and actions taken
- Who you reported to and when
- Outcome of referral or action taken

How to Record:

- Complete TAAS Safeguarding Concern Form
- Record contemporaneously (immediately or as soon as safely possible)
- Use clear, factual, objective language
- Distinguish between fact and opinion
- Sign and date all records

Storage:

- Safeguarding records stored securely and separately from general files
- Access restricted to authorised personnel on a need-to-know basis
- Maintained in accordance with data protection legislation
- Retained in accordance with statutory requirements and retention schedules

13.2 Retention Periods

Safeguarding records are retained as follows:

- Children: Until the person reaches age 25, or 7 years from last entry, whichever is longer
- Adults: Minimum 7 years from last entry, or longer if legal proceedings ongoing
- Serious incidents: Indefinite retention may be required

14. Multi-Agency Working

14.1 Partnership Approach

Safeguarding is most effective when agencies work together. We commit to:

- Active participation in Local Safeguarding Children Partnerships (LSCP)
- Active participation in Local Safeguarding Adults Boards (LSAB)
- Sharing information appropriately with partner agencies

- Attending and contributing to multi-agency meetings (strategy discussions, case conferences, MARAC, Channel Panel, etc.)
- Following multi-agency safeguarding procedures in each area we operate
- Learning from serious case reviews and safeguarding adult reviews

14.2 Key Multi-Agency Forums

We participate in:

- Child Protection Conferences: Initial and review conferences for children subject to child protection plans
- Core Groups: Multi-agency groups implementing child protection plans
- Strategy Discussions: Section 47 child protection enquiries
- MARAC (Multi-Agency Risk Assessment Conference): High-risk domestic abuse cases
- MAPPA (Multi-Agency Public Protection Arrangements): Managing high-risk offenders
- Channel Panel: Supporting individuals at risk of radicalisation
- Safeguarding Adult Enquiries: Section 42 Care Act enquiries

15. Quality Assurance and Monitoring

15.1 Monitoring Safeguarding Practice

We monitor safeguarding through:

- Monthly safeguarding reports to Senior Management
- Quarterly safeguarding reports to Board
- Regular audit of safeguarding records and case files
- Supervision and case reviews
- Staff feedback and surveys
- Service user feedback (where appropriate)
- Analysis of trends and patterns

15.2 Continuous Improvement

We are committed to continuous improvement through:

- Annual review and update of safeguarding policy and procedures
- Learning from safeguarding incidents and near misses
- Implementing learning from serious case reviews and safeguarding adult reviews
- Acting on recommendations from audits and inspections

- Regular training needs analysis
- Benchmarking against best practice

15.3 Accountability

The Board receives:

- Quarterly safeguarding reports including statistics, themes, and actions
- Annual safeguarding report
- Reports on serious incidents
- Assurance on compliance with safeguarding duties

External Scrutiny:

- Engagement with Local Safeguarding Children Partnerships
- Engagement with Local Safeguarding Adults Boards
- Cooperation with inspections and audits by commissioners
- Transparency with regulatory bodies

16. Serious Incidents and Learning

16.1 Serious Incident Reporting

We will report serious incidents to:

- Relevant commissioning bodies
- Local Safeguarding Children Partnership or Safeguarding Adults Board
- Care Quality Commission (where applicable)
- Police (where criminal offence suspected)
- Health and Safety Executive (where workplace harm)

Serious incidents include:

- Death of a service user
- Serious injury or harm to a service user
- Serious safeguarding incident
- Allegation of serious professional misconduct
- Major service failure

16.2 Serious Case Reviews and Safeguarding Adult Reviews

When a Serious Case Review (child) or Safeguarding Adult Review is commissioned, we will:

- Fully cooperate with the review process
- Provide information and records as requested
- Support staff to participate in the review
- Implement recommendations arising from the review
- Share learning across the organisation
- Report on implementation of recommendations to the Board

16.3 Internal Reviews

Following serious incidents, we conduct internal reviews to:

- Establish facts and chronology
- Identify what went well and what could be improved
- Make recommendations for practice improvements
- Share learning with all staff
- Monitor implementation of recommendations

17. Support for Staff

17.1 Wellbeing and Support

We recognise that working with safeguarding concerns can be challenging and stressful. We provide:

- Regular supervision and support
- Debrief following serious or traumatic incidents
- Access to Employee Assistance Programme (24/7 counselling and support)
- Peer support networks
- Training in self-care and resilience

17.2 Safeguarding Supervision

Staff dealing with complex or ongoing safeguarding cases receive specialist safeguarding supervision providing:

- Case consultation and decision-making support
- Emotional support and wellbeing check
- Quality assurance of safeguarding practice
- Learning and development

18. Key Contacts

18.1 Internal TAAS Contacts

Designated Safeguarding Lead:

Leanne James, Regional Manager

Tel: 0333 2424999 (24/7)

Email: safeguarding@theappropriateadultservice.org.uk

Deputy Safeguarding Leads:

Sue Edwards, South - 0333 2424999 Deb Thompson, North- 0333 2424999 Teena Sloanes, London - 0333 2424999

Managing Director:

Alex Hawkins

Tel: 0333 2424999

Email: alex@theappropriateadultservice.org.uk

24/7 Operations Centre:

Tel: 0333 2424999

18.2 External Contacts

Emergency Services: 999

Police Non-Emergency: 101

NSPCC Helpline: 0808 800 5000

NSPCC Whistleblowing Helpline: 0800 028 0285

National Domestic Abuse Helpline: 0808 2000 247 (24/7)

Modern Slavery Helpline: 08000 121 700

Samaritans: 116 123 (24/7)

Childline: 0800 1111

Action Fraud: 0300 123 2040

Prevent Advice Line: 0800 011 3764

Victim Support: 0808 168 9111

NSPCC FGM Helpline: 0800 028 3550

18.3 Local Authority Contacts

Staff should maintain up-to-date local contact details for:

- Children's Social Care / MASH (Multi-Agency Safeguarding Hub) in each operational area
- Adult Social Care Safeguarding Teams in each operational area
- Emergency Duty Teams (out of hours) in each operational area
- Local Safeguarding Children Partnership contacts
- Local Safeguarding Adults Board contacts

• LADO (Local Authority Designated Officer) contacts

A comprehensive regional directory is maintained in TAAS operational systems.

19. Related Policies

This policy should be read in conjunction with:

- Data Protection and Confidentiality Policy
- Privacy Policy
- Lone Working Policy
- Health and Safety Policy
- Whistleblowing Policy
- Disciplinary and Grievance Procedures
- Code of Conduct
- Equality, Diversity, and Inclusion Policy
- Training and Development Policy

20. Policy Review

This policy is reviewed annually by the Designated Safeguarding Lead and Board of Directors, or sooner if:

- Legislative changes require updates
- Serious incidents indicate policy gaps
- Learning from reviews recommends changes
- Best practice developments necessitate updates

Next Review Date: November 2026

Policy Owner: Designated Safeguarding Lead

Approved By: Board of Directors **Approval Date:** November 2025

Appendix A: Quick Reference Guide for Staff

If you have ANY safeguarding concern:

- 1. **RECOGNISE** Be alert to signs of abuse or harm
- 2. **RESPOND** React calmly and appropriately
- 3. **RECORD** Document what you saw, heard, or were told

- 4. **REPORT** Tell your manager or Safeguarding Lead immediately
- 5. **REFER** Ensure appropriate referral is made to statutory agencies

Emergency? Call 999

Safeguarding concern? Call Safeguarding Lead: [Number] (24/7)

Remember: ✓ It's not your job to investigate

✓ It IS your job to report

✓ When in doubt, report

✓ Safeguarding is everyone's responsibility

The safety and wellbeing of vulnerable people is our absolute priority. Every member of staff has a duty to safeguard those we support.