



Adults at Risk & Child Safeguarding Policy

Definitions

Key Safeguarding Terms

Adult at Risk (Vulnerable Adult) An adult aged 18 or over who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs)
- Is experiencing, or at risk of, abuse or neglect
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

This includes adults with mental health conditions, learning disabilities, physical disabilities, sensory impairments, or those experiencing crisis situations such as suicidal ideation.

Child/Young Person Any person under the age of 18 years, regardless of their physical or mental capacity.

Parental Responsibility The legal rights, duties, powers, responsibilities and authority that parents have in relation to their children under 18. This includes:

- The responsibility to provide care, guidance and supervision appropriate to the child's age and development
- Making decisions about the child's upbringing, education, medical treatment and welfare
- Protecting the child from harm and ensuring their physical and emotional wellbeing
- Respecting the child's developing autonomy and capacity to make their own decisions

Safeguarding The action taken to promote the welfare of children and adults at risk and protect them from harm. This includes:

- Protecting from maltreatment
- Preventing impairment of health or development
- Ensuring children and adults are growing up/living in circumstances consistent with safe and effective care
- Taking action to enable all to have the best outcomes

Abuse The violation of an individual's human and civil rights by another person or persons. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

Types of Abuse

Physical Abuse The deliberate causing of physical harm through hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate physical sanctions. This includes any physical harm caused to a person by another individual.

Sexual Abuse Any sexual activity that takes place without informed consent. This includes rape, sexual assault, sexual acts where consent is not or cannot be given, and sexual exploitation

including online sexual abuse.

Emotional/Psychological Abuse Behavior that harms an individual's emotional health and development, including:

- Persistent criticism, threats, or rejection
- Humiliation, controlling, intimidation, or isolation
- Emotional blackmail or manipulation
- Preventing access to services or support networks

Financial/Material Abuse The unauthorized or improper use of funds, property, or any resources belonging to another person. This includes theft, fraud, exploitation, or pressure regarding money, property, or possessions.

Neglect and Acts of Omission The persistent failure to meet basic physical and/or psychological needs, likely to result in serious impairment of health or development. This includes:

- Failure to provide adequate food, clothing, or shelter
- Failure to protect from physical harm or danger
- Failure to ensure adequate supervision or access to medical care or treatment
- Ignoring medical or physical care needs

Self-Neglect The inability (intentional or non-intentional) to maintain a socially and culturally accepted standard of self-care, which may compromise health and safety.

Discriminatory Abuse Harassment or ill-treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, or sexual orientation. This includes hate crime and discriminatory language or behavior.

Organisational Abuse The mistreatment or abuse of an individual by a regime or individuals within an institution or care setting. This may range from isolated incidents to pervasive ill-treatment and gross misconduct.

Domestic Abuse Any incident or pattern of incidents of controlling, coercive, threatening behavior, violence, or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality.

Coercive Control A pattern of behavior designed to make someone dependent by isolating them from support, exploiting them, depriving them of independence, and regulating their everyday behavior.

Modern Slavery Encompasses slavery, human trafficking, forced labor, and domestic servitude. It involves the recruitment, movement, harboring, or receipt of vulnerable people through the use of force, coercion, or deception.

Cuckooing A form of criminal exploitation where drug dealers take over the homes of vulnerable adults to use as a base for county lines drug trafficking.

Radicalisation The process by which individuals come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups.

Safeguarding Roles and Responsibilities:

Designated Safeguarding Lead (DSL) The senior staff member responsible for safeguarding and child protection issues within the organisation. They provide advice and support to staff, liaise with statutory agencies, and ensure safeguarding concerns are handled appropriately.

Deputy Safeguarding Lead Senior staff members who act in the absence of the DSL and provide local safeguarding leadership and support across different sites.

Professional Curiosity An approach that involves actively seeking to understand the full picture of an individual's circumstances rather than accepting information at face value. It requires asking respectful questions, looking beyond initial explanations, and remaining mindful of potential vulnerabilities.

Whistleblowing The disclosure of information about wrongdoing, malpractice, or risks to safety within an organization, made in the public interest and in good faith.

Legal and Procedural Terms:

Regulated Activity Work that involves close contact with vulnerable groups including intimate or personal care such as washing, dressing, or assistance with toileting. James' Place does not engage in regulated activities.

DBS (Disclosure and Barring Service) The service that provides criminal record checks for England and Wales. Enhanced DBS checks include spent convictions and may include additional information held by police.

Gillick Competence A term used to describe whether a child under 16 has sufficient understanding and maturity to make their own decisions about medical treatment or other matters affecting them.

Duty of Care The legal obligation to take reasonable steps to ensure the safety and wellbeing of individuals in one's care or those who might be affected by one's actions or omissions.

Capacity An individual's ability to make informed decisions about their own care and treatment. Adults are presumed to have capacity unless proven otherwise through proper assessment.

Consent Agreement given freely without coercion, based on sufficient information and understanding, by someone with the capacity to make the decision.

Significant Harm Harm that is substantial or considerable, which may be caused by a single incident or cumulative effect of multiple incidents over time. The threshold for intervention to protect a child or adult at risk.

Section 42 Enquiry A statutory duty under the Care Act 2014 for local authorities to investigate suspected abuse or neglect of an adult with care and support needs who is at risk and unable to protect themselves.

LADO (Local Authority Designated Officer) The person responsible for managing allegations or concerns about staff or volunteers who work with children.

POLICY STATEMENT

At James' Place, we are committed to safeguarding and promoting the welfare of all individuals we support. We recognise our duty of care in protecting adults at risk and children from all forms of abuse, harm, neglect, and exploitation.

We acknowledge that safeguarding is everyone's responsibility and expect all staff, volunteers, and representatives of James' Place to play an active role in creating a safe, respectful, and inclusive environment.

We recognise a wide range of abuse types, including but not limited to:

- Physical, emotional, sexual, and psychological abuse
- Neglect and self-neglect
- Financial and material abuse
- Discriminatory and organisational abuse
- Exploitation, including sexual exploitation, modern slavery, human trafficking, cuckooing, and servitude
- Domestic abuse and coercive control
- Radicalisation and risk related to serious violence

Our safeguarding practice is underpinned by the following principles:

- Upholding the rights, dignity, and autonomy of all individuals
- Promoting a culture of openness, transparency, and accountability
- Ensuring that individuals know how to report concerns and feel safe doing so
- Working in partnership with statutory safeguarding bodies and relevant professionals
- Acting swiftly and proportionately when concerns arise, with clear procedures and accountability
- Encouraging professional curiosity among staff to recognise and explore signs of potential harm
- Ensuring all safeguarding decisions are informed by law, guidance (including the Care Act 2014, Children Act 1989/2004, and Keeping Children Safe in Education), and data protection principles

All staff and volunteers receive safeguarding training appropriate to their role and are expected to adhere to our safeguarding policies, professional conduct standards, and whistleblowing procedures. We maintain clear escalation processes and named safeguarding leads across all locations.

This policy statement is shared with all staff and volunteers as part of their induction and is subject to annual review and update. It is also publicly accessible via the James' Place website, alongside information on raising concerns and contacting our Freedom to Speak Up Guardian.

Implementation

At James' Place, safeguarding is embedded in every aspect of our work in order to support a safe, ethical, and transparent service. James' Place commits to the following safeguarding measures:

- Providing all staff and volunteers with appropriate **safeguarding training**, including how to recognise signs of abuse, respond to disclosures, and maintain professional boundaries.
- Embedding **safer recruitment and vetting practices**, including:
 - Enhanced **DBS checks** where required
 - Collecting **two formal references** for all new staff and volunteers
 - Conducting **structured interviews** to assess suitability for working in suicide prevention and safeguarding contexts
 - Requiring staff and volunteers to **disclose any relevant convictions, arrests, or allegations** at the point of recruitment and throughout their engagement with the charity
- Promoting a culture of **professional curiosity**, where staff are encouraged to actively explore and assess potential risks rather than accept information at face value.
- Supporting **structured first-hand reporting processes** to ensure that concerns are accurately captured by the person who first becomes aware of them. This reduces the risk of information being diluted, lost, or misunderstood in the handover process, and ensures safeguarding concerns are responded to promptly and appropriately.
- Clearly outlining **safeguarding responsibilities** in all job descriptions, volunteer agreements, and codes of conduct.

Designated Person and Their Role

James' Place has a Designated Safeguarding Lead (DSL) responsible for overseeing safeguarding concerns involving children and adults at risk. In their absence, local deputy safeguarding leads are available across all sites to ensure continuous safeguarding oversight.

- **Designated Safeguarding Lead (DSL):** Allan Brownrigg
- **Deputy Safeguarding Leads:**
 - Lisa Nwosu- Oguamanam (London)
 - Andy Noon (Liverpool)
 - John Younger (Newcastle)
 - Ciaran Brady (Birmingham)

The DSL or appropriate deputy will be available for clients, staff, or volunteers who wish to raise a safeguarding concern or report an incident involving actual or suspected abuse — including physical, emotional, sexual, psychological, or neglect-related harm — whether perpetrated by another adult or young person.

Staff should always be proactive in responding to safeguarding concerns. If someone discloses a concern or an incident is witnessed, **it must never be ignored**, regardless of how minor it may seem. Staff are encouraged to listen, respond calmly and sensitively, and **either raise the concern themselves or support the individual in doing so** — whichever approach is safest and most appropriate for the person at risk.

We recognise that introducing unfamiliar personnel to a vulnerable individual at the point of disclosure can sometimes cause further distress. Therefore, where appropriate, staff who already have a trusted relationship with the client may remain involved in the communication process, either by supporting the conversation or liaising directly with the safeguarding lead on the individual's behalf.

All safeguarding concerns must be followed up using James' Place's agreed processes and reporting forms. The priority is always the safety, dignity, and wellbeing of the person at risk.

Recording and Record-Keeping

Accurate and timely recording of safeguarding concerns is essential to ensuring appropriate responses, accountability, and continuity of care.

The Designated Safeguarding Lead (DSL) or appropriate deputy will ensure that a written record is made of any safeguarding disclosure, observation, or concern raised by themselves or another member of staff or volunteer. Where required, advice will be sought promptly from statutory services, including Local Authority Safeguarding team or the police.

All staff and volunteers must ensure that their safeguarding records are:

- **Factual and evidence-based:** Observations and accounts must be recorded without embellishment. Professional opinions should be clearly identified as such and always supported by objective evidence.
- **Clear and concise:** Entries should be easy to understand, avoiding jargon or ambiguity.
- **Dated, signed, and timely:** All records must include the date and time of the entry, the name of the person recording it, and be made as soon as practicable following the incident or disclosure.
- **Up-to-date and legible:** Handwritten records, where used, must be neat and easy to read. Digital records must follow internal information governance procedures.
- **Well-organised and securely stored:** All safeguarding records must be filed in individual, confidential safeguarding files and stored in accordance with James' Place's data protection and confidentiality policies. Access is limited to authorised personnel only.

Any supporting evidence (e.g., screenshots, emails, or written notes) must be preserved, clearly labelled, and attached to the safeguarding record where appropriate.

Safeguarding records may be subject to legal disclosure and may be used in disciplinary processes, civil proceedings, or criminal investigations. Individuals have a right to access their personal safeguarding records on request, subject to data protection laws and the protection of third-party information.

Whistleblowing

James' Place is committed to creating a culture of openness, transparency, and accountability, where all staff and volunteers feel confident to raise concerns about abuse, harm, or unsafe practice without fear of retribution.

All staff and volunteers have a **duty of care** to report any concerns or suspicions relating to the abuse or neglect of children, adults at risk, or other vulnerable individuals—**regardless of the setting, the alleged perpetrator, or the person affected**.

Staff and volunteers are actively encouraged to report concerns, including those involving colleagues, volunteers, or practices within the organisation. Where staff suspect abuse is occurring, it must be reported and **must not be ignored**.

Individuals who raise concerns in good faith are protected under the **Public Interest Disclosure Act 1998**. James' Place will not tolerate any form of victimisation or disadvantage towards whistleblowers.

Additionally, under the **UK General Data Protection Regulation (GDPR)** and the **Data Protection Act 2018**, staff are permitted—and in some cases required—to share personal information without consent where there is a safeguarding concern or risk to public safety. The lawful basis for doing so is in the prevention or detection of crime and in the protection of vital interests of the individual.

Whistleblowing concerns may be raised internally with a line manager, the Designated Safeguarding Lead (DSL), or the **Freedom to Speak Up Guardian**. If concerns are not appropriately addressed, individuals have the right to escalate the matter to external safeguarding bodies or regulators.

Clarifying Responsibility for Decision-Making

All staff and volunteers at James' Place should understand that the responsibility of the person who first identifies or receives a safeguarding concern is **not to determine whether abuse has occurred**, but to **report the concern appropriately and without delay**.

The assessment, investigation, and determination of whether abuse has taken place lies with the relevant statutory agencies, such as **Children's Social Care, Adult Social Services, or the Police**, following a formal referral.

Staff and volunteers must ensure that concerns are passed on in line with James' Place's safeguarding procedures, allowing trained professionals within those agencies to undertake any necessary enquiries or interventions.

The priority for all James' Place personnel is to **recognise, record, report, and respond** to safeguarding concerns, always acting in the best interests of the individual at risk.

Displaying information

The name of the designated person shall be displayed at all James' Place centers.

All staff, volunteers and center users should be informed of the name of the designated person and how they might be contacted.

Associated Policies and Procedures

All staff and volunteers at James' Place are responsible for ensuring they are familiar with, and adhere to, the organisation's safeguarding-related policies and procedures.

These documents work together to support a safe, ethical, and transparent working culture and include, but are not limited to:

- **Adverse Incident Policy and Procedures**
- **Clinical Risk Assessment and Management Policy**
- **Whistleblowing Policy**
- **Sexual Safety Charter and Staff Code of Conduct** – outlining the standards of behaviour expected to protect both clients and staff and promote a culture of safety and respect
- **Safer Recruitment Policy** – detailing vetting, reference checks, and DBS requirements
- **Allegation Management and Disciplinary Policy** – providing clear processes for handling concerns about staff conduct

These policies are reviewed regularly and updated in line with legislative changes, safeguarding learning, or following the implementation of this safeguarding policy version. Staff will be notified of any updates and are expected to reflect them in their practice.

A strong safeguarding culture is underpinned not only by robust procedures, but also by the attitudes, behaviours, and values upheld by every individual at James' Place

Applying Safeguarding Procedures Across the Organisation

All safeguarding procedures at James' Place are designed to protect adults, children, and young people. These procedures **apply to all staff, volunteers, and others** who may come into contact with individuals accessing our services.

This is not about treating those working with vulnerable groups as being under suspicion, but about embedding **clear, proportionate, and proactive safeguarding measures** across the organisation to ensure consistency, transparency, and accountability.

Creating and maintaining a safe environment requires ongoing **thought, planning, and professional vigilance** within teams. All staff and volunteers must remain alert to signs of abuse, neglect, or harm, and be equipped to respond appropriately.

A key part of our safeguarding culture is the practice of **professional curiosity** — the commitment to **proactively explore and understand a situation**, rather than accepting information at face value. This means:

- Challenging assumptions
- Looking beyond initial explanations or behaviours
- Asking open, respectful, and probing questions
- Seeking evidence to support or refute concerns
- Remaining mindful of potential vulnerabilities that may not be immediately visible

By adopting professional curiosity, we help to ensure that no child or adult is left at risk due to missed signs or assumptions.

If a concern arises, it should be reported without delay to the **Designated Safeguarding Lead (DSL)** or deputy, as outlined in this policy.

If the concern is not appropriately addressed, or if there is **ongoing worry about risk**, staff and volunteers are empowered to **escalate the concern externally**. This may involve contacting:

- **Children's Social Care** or **Adult Social Services**
- A **Local Authority Designated Officer (LADO)** for concerns involving staff or volunteers
- A **Designated Nurse for Safeguarding** within the local Integrated Care Board (ICB)
- A **Safeguarding Partnership Manager** or other relevant professional within the statutory safeguarding network

Staff may escalate as **private citizens** where necessary, and James' Place will always support lawful and proportionate action taken in the best interest of a person at risk.

For practical guidance on how to raise or escalate concerns, please refer to the **Safeguarding Flowcharts on pages 13 and 14** of this policy.

Disclosure of Information

James' Place is committed to handling all personal and sensitive information with integrity, transparency, and in accordance with safeguarding responsibilities and data protection legislation, including the **UK General Data Protection Regulation (GDPR)** and the **Data Protection Act 2018**.

It is important to distinguish between **confidentiality** and **secrecy**. While information shared with staff or volunteers is treated as confidential, this does **not** mean it must always be kept secret. Where there is a safeguarding concern, information may need to be shared with appropriate individuals or agencies to protect the welfare of a child or adult at risk.

Personal information may be shared when:

- It is required **internally on a 'need-to-know' basis**, enabling staff or volunteers to fulfil their duties safely and appropriately;
- The person has given **informed and voluntary consent** to the sharing of their information;
- There is an **overriding justification to share without consent**, such as a risk of serious harm to the individual or others;
- **The law requires it**, such as during a criminal investigation, safeguarding enquiry, or court proceedings.

In line with the **UK GDPR**, information may also be shared **without consent** under specific lawful bases, including where it is necessary:

- To protect the **vital interests** of the individual or another person (e.g. in a life-threatening situation)
- For reasons of **substantial public interest**, such as preventing or detecting serious harm or abuse
- For the **performance of a legal obligation** or a task carried out in the **public interest**

Any decision to share information without consent must be:

- **Proportionate** to the level of risk
- **Justified** with a clear safeguarding rationale
- **Authorised** by the Designated Safeguarding Lead (DSL) or a senior member of the team
- **Clearly documented**, including what was shared, with whom, and why

All safeguarding records and information-sharing decisions must be handled securely, respecting the individual's right to privacy while prioritising their safety and wellbeing.

James' Place recognises that **timely and appropriate information sharing** is often key to effective safeguarding, and staff should never allow uncertainty about data protection to delay raising or escalating concerns.

Clear Roles and Responsibilities

Overview

Abuse of vulnerable adults and children is easily concealed where there is confusion among adults about roles and responsibilities. To prevent this, James' Place maintains clear structures and expectations for all team members.

Role Descriptions and Behavioural Expectations

All job descriptions and role specifications, for both employees and volunteers, include:

- Clear safeguarding responsibilities specific to the role
- A statement outlining the behaviour and values expected from all who work as part of James' Place
- Specific boundaries and limitations of the role in relation to vulnerable adults and children
- Reporting procedures and lines of accountability

Induction and Training

Beyond written documentation, expected behaviour towards vulnerable adults and children is explicitly explained to all new workers during their induction process. This includes:

- Practical application of safeguarding policies
- Recognition of appropriate professional boundaries
- Understanding of reporting mechanisms
- Discussion of scenarios and appropriate responses

Policy on Regulated Activities: James' Place does not engage staff or volunteers in regulated activities with vulnerable adults. Regulated activities include close or personal tasks such as:

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- Personal care (washing, dressing)
- Assistance with toileting
- Other intimate personal care tasks

DBS Checking Requirements:

- **Enhanced DBS Disclosures:** Required for all staff and volunteers who work with clients on a one-to-one basis
- **Standard DBS Checks:** Required for all other staff members
- All DBS checks must be current and appropriate to the individual's role and level of contact with vulnerable adults

Accountability and Review

Regular supervision and review processes ensure that role clarity is maintained and that all team members understand their safeguarding responsibilities within their specific position at James' Place.

Supervision as a Means of Protection

Regular staff meetings will be held to provide opportunities for the team to discuss their work, share concerns, and raise safeguarding issues. These meetings form part of James' Place's safeguarding culture, ensuring transparency, accountability, and continuous learning.

At James' Place, safeguarding responsibilities extend to both the welfare of our centre users and any **vulnerable adult volunteers** engaged in supporting our work. To ensure that those in contact with clients are safe and suitable, **robust recruitment processes** are followed for all volunteer roles.

Volunteer Recruitment Safeguards

- All recruitment decisions concerning volunteers will include:
Completion of a **detailed application form**, capturing relevant skills, experience, and safeguarding history.
- b) Collection of **two validated and relevant references** to assess the applicant's suitability for the role — references should come from individuals or organisations who can provide an informed, professional, or supervisory perspective, rather than solely from friends or informal contacts.
- c) An **informal interview** to explore the applicant's motivations for volunteering, relevant experience, and understanding of the role's responsibilities.

These steps, combined with regular supervision and safeguarding oversight, help ensure that James' Place maintains a safe, respectful, and professional environment for all those we support.

Criminal Convictions and Background Checks

Disclosure Requirements

All staff and volunteers must complete a comprehensive application form before commencing work. This includes:

- **Full disclosure** of all criminal convictions (except those 'spent' under the Rehabilitation of Offenders Act 1974)
- **Enhanced DBS disclosure** - noting that even spent convictions may be disclosed in enhanced checks, requiring organizational risk assessment
- **Adequate risk assessment** undertaken by James' Place based on disclosed information

Ongoing Disclosure Obligations

While in service, all staff and volunteers must immediately disclose:

- Any new criminal charges, convictions, or cautions
- Police arrests or ongoing investigations
- Any allegations made against them relating to safeguarding or professional conduct
- Changes in circumstances that might affect their suitability for the role

Consequences of Non-Disclosure

James' Place Trustee Board reserves the right to dismiss any staff member or volunteer if:

- Criminal convictions or relevant information is not disclosed during recruitment
- Ongoing changes in circumstances are not reported as required
- Information comes to light that was deliberately concealed

Training and Development

Initial Training Requirements

Safeguarding training forms a mandatory component of the Training and Induction Programme for all staff and volunteers, covering:

- **Prevention of abuse** - recognising warning signs and risk factors
- **Response procedures** - immediate actions when abuse is suspected or disclosed

Rolling Training Programme

Ongoing professional development includes:

- **Annual refresher training** in safeguarding practices and policy updates
- **Skills development** in specialised areas such as suicide risk assessment
- **Incident-based learning** following any safeguarding concerns or near-misses
- **Legislative updates** ensuring compliance with current legal requirements

Training Documentation

All staff and volunteers must:

- Complete initial safeguarding training before direct client contact
- Maintain up-to-date training records
- Participate in refresher training as scheduled
- Demonstrate competency in safeguarding knowledge and application

Policy Review and Governance

Review Schedule

This safeguarding policy and its implementation will be reviewed:

- **Annually** as a minimum standard
- **When legislative changes occur** affecting safeguarding requirements
- **Upon amendment** of guidance issued by relevant statutory bodies
- **Following organisational changes** that might impact safeguarding arrangements

Review Process

Policy reviews will assess:

- Effectiveness of current safeguarding procedures

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- Compliance with current legislation and best practice guidance
- Learning from any safeguarding incidents or concerns
- Feedback from staff, volunteers, and service users
- Recommendations from external safeguarding audits or inspections

Implementation Monitoring

Regular monitoring ensures:

- All staff and volunteers are informed of policy updates
- Changes are effectively communicated and understood
- Training materials reflect current policy requirements
- Documentation and procedures align with updated policies

Safeguarding Children Flow Chart

Staff or Volunteer is made aware of safeguarding concern through disclosure or observation

Staff member or volunteer discusses concerns with the Designated Person within a timely manner to decide the appropriate actions to undertake.

Designated Person is Allan Brownrigg

or in their absence Lisa Nwosu- Oguamanam (London), Andy Noon (Liverpool) . John Younger (Newcastle) ,
Ciaran Brady (Birmingham)

who will provide guidance on action that needs to be taken.

Staff member or volunteer must also complete the following electronic form: Incident Form

Child Protection Concern

Not a Child Protection Concern

- Concerns may still need to be logged and monitored
- A child in need referral (in line with local area procedures) may be required

If a child discloses abuse it must not be investigated further by any staff or volunteers of James' Place. Police are the point of contact for immediate risk and social care if it is not an immediate risk of significant and serious harm or clear crime type of abuse:

- If it is thought a child has suffered sexual abuse the police must be contacted immediately
- If it is thought a child has suffered severe harm (e.g. physical assault) the police must be contacted immediately – if medical attention is required this must take priority over any other action
- If it is thought a child may be in need of protection to prevent significant harm from occurring, they must refer the matter to the Local Authority Children's Safeguarding team

Staff member or Volunteer believes concern should be acted upon but Designated Person does not agree. Staff/Volunteer has the right to refer concern straight to social services. Staff/Volunteer should inform Designated Person of their intentions.

A verbal referral should be made within a timely manner by telephone to the Local Authority Children's Safeguarding team by either the staff/volunteer or Designated Person and followed up in writing.

Safeguarding Concern dealt with via Local Authority Children's Safeguarding team or advice given on what actions to follow.

If Local Authority Children's Safeguarding team assesses that concerns meet their referral threshold criteria and an assessment / intervention is co-ordinated, Social Care may not always be able to share all information regarding individual cases referred to them due to data protection and sensitive information. However, it is good practice to follow up that support is being appropriately provided and to continue to advocate for support if there are continuing concerns.

If Local Authority Children's Safeguarding team does not see the case as appropriately meeting their threshold for referral it may be that there is a multi- agency response required to support the child/family via a child in need arrangement which the organisation may have continued involvement within.

Safeguarding Adults at Risk Flow Chart

Staff member or volunteer discusses concerns with the Designated Person within a timely manner to decide the appropriate actions to undertake.

Designated Person is Allan Brownrigg

or in their absence Lisa Nwosu- Oguamanam (London), Andy Noon (Liverpool) . John Younger (Newcastle) ,
Ciaran Brady (Birmingham)

who will provide guidance on action that needs to be taken.

Staff member or volunteer must also complete the following electronic form: Incident Form

Staff member or Volunteer believes concern should be acted upon but Designated Person does not agree.

Staff/Volunteer has the right to refer concern straight to social services.
Staff/Volunteer should inform Designated person of their intentions.

If an adult discloses abuse it must not be investigated further by any staff or volunteers of James' Place. Police are the point of contact for immediate risk and social care if it is not an immediate risk of significant and serious harm or clear crime type of abuse:

- If it is thought an adult has suffered sexual abuse the police must be contacted immediately
- If it is thought an adult has suffered severe harm (e.g. physical assault) the police must be contacted immediately – if medical attention is required this must take priority over any other action
- If it is thought an adult may be in need of protection to prevent significant harm from occurring, they must refer the matter to the Local Authority Adults Safeguarding team.

A verbal referral should be made by telephone to the Local Authority Adults Safeguarding team.
This should be followed up in writing in a timely manner. A call back will be made to follow up the referral from the Local Authority Adults Safeguarding team.

Safeguarding Concern dealt with via the relevant Local Authority Adults Safeguarding team.

Investigations are carried out by nominated officers within individual Local Authority Adults Safeguarding team.

If the Local Authority Adults Safeguarding team assesses and concludes that the concerns meet their referral threshold criteria and an assessment / intervention is co-ordinated, the Local Authority Adults Safeguarding team may not always be able to share all information regarding individual cases referred to them due to data protection and sensitive information. However, it is good practice to follow up that support is being appropriately provided and to continue to advocate for support if there are continuing concerns.