

## POLICIES AND PROCEDURES

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## Safeguarding Adults Policy

### 1. Policy statement

The Orpheus Centre is committed to the aims of adult safeguarding:

- prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- stop abuse or neglect wherever possible
- safeguard adults in a way that supports them in making choices and having control about how they want to live
- Confidential information will not be shared with anyone, including family and friends, without the consent of the student, except in the circumstances set out in Section 15 of this policy
- promote an approach that concentrates on improving life for the adults concerned
- raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse, neglect and exploitation
- provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult
- address what has caused the abuse or neglect

To achieve these aims, we will

- Manage our services in a way which minimises the risk of abuse occurring
- Work with adults with care and support needs and other agencies to end any abuse that is taking place
- Ensure that all managers, employees and volunteers, including trustees, have access to and are familiar with this safeguarding adult policy and procedure and their responsibilities within it
- Ensure concerns or allegations of abuse are always taken seriously
- Ensure the Mental Capacity Act is used to make decisions on behalf of those adults at risk who are unable to make particular decisions for themselves
- "It is good practice, unless there are clear reasons for not doing so, to work with the carers, family and friends of an individual to help them to get the care and support

they need. Sharing information with these people should always be with the consent of the individual. If the person lacks the mental capacity to make a decision about sharing information with key people, then the Mental Capacity Act should be followed to ensure each decision to share information is in the person's best interests. Decisions and reasoning should always be recorded." (Safeguarding adults: sharing information: SCIE 2019)

- Ensure all staff and volunteers, including trustees, receive training in relation to safeguarding adults at a level relevant to their role, at induction at regular intervals throughout the academic year
- Ensure that people using our services, and where relevant, their relatives and their friends, have easy access to information about how to report concerns or allegations of abuse. This will be displayed visually across the site, in visitor information documentation and on the Orpheus Centre's website
- Ensure there is a named lead person to promote adult safeguarding awareness and practice within the organisation. The current named lead person is Chloe Smith, principal

This policy and procedure has been developed to be consistent with the Surrey Safeguarding Adults Board Adult Safeguarding Policy and Procedures.

## **2. Scope**

This policy applies to all students, staff, trustees, volunteers, trainees, contractors, operational partners and visitors to the Orpheus Centre

The policy is fully incorporated into the whole college ethos and is underpinned throughout the teaching of the curriculum and within the safety of the physical environment.

Safeguarding work is about protecting adults with care and support needs from abuse, neglect and exploitation, and about responding well when adults with care and support needs are experiencing or are at risk of abuse, neglect or exploitation.

## **3. Definitions and explanation of terms**

### **3.1. Who does adult safeguarding apply to?**

Safeguarding applies to adults at risk.

The Care Act 2014 defines an adult at risk as a person:

- Aged 18 years or over

- Who may be in need of community care services by reason of mental or other disability, age or illness (whether or not the local authority is meeting any of those needs)
- Who 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.

(Care Act 2014 Section 42 [England]).

This includes adults with physical, sensory and mental impairments and learning disabilities, however those impairments have arisen, such as whether present from birth or due to advancing age, chronic illness or injury. Also included are people with a mental illness, dementia or other memory impairments, and people who misuse substances or alcohol.

**3.2. Abuse:** A violation of an individual’s human and civil rights by any other person. It may consist of a single act or repeated acts. Abuse can occur in any relationship and may result in significant harm to, or exploitation of the person subject to it.

**3.3. Allegation:** A member of staff (including agency staff), trustee, contractor, visitor, or volunteer working with Adults at Risk or another Orpheus student is accused of committing an abuse

**3.4. A complaint:** an expression of dissatisfaction from someone using services or their representative

**3.5. Disclosure:** A person states they have been or are being abused by another

**3.6. What is abuse?**

Abuse can take many forms and the circumstances of the individual should always be considered. It may consist of a single act or repeated acts. The following are examples, but not a complete list, of issues that would be considered as abuse/neglect or potential indicators:

**3.7 What is abuse/potential indicators or abuse?**

|                 |  |
|-----------------|--|
| <b>Physical</b> | E.g. hitting, slapping, pushing, kicking, misuse of medication, unlawful or inappropriate restraint, or inappropriate physical sanctions.  |
| Domestic Abuse  | “An incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality” (Home Office, 2013). Domestic violence and abuse may include psychological, physical, sexual, financial, emotional abuse; as well as so called ‘honour’ based violence, forced marriage and female genital mutilation, including where |

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|                                     | they see, hear, or experience its effects.   |
| <b>Sexual</b>                       | E.g. rape and sexual assault or sexual acts to which the adult at risk has not consented, or could not consent or was pressured into consenting, including sexual photography.   |
| <b>Psychological</b>                | E.g. emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal from services or supportive networks |
| <b>Financial and material abuse</b> | E.g. theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, the misuse or misappropriation of property, possessions or benefits.  |
| <b>Modern slavery</b>               | E.g. human trafficking, forced labour and domestic servitude. Traffickers and slave masters use the means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhuman treatment   |
| <b>Neglect and acts of omission</b> | E.g. ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.  |
| <b>Discriminatory</b>               | E.g. abuse based on a person's race, sex, disability, faith, sexual orientation, or age; other forms of harassment, slurs or similar treatment or hate crime/hate incident.  |

### 3.7 What is abuse/potential indicators or abuse? (Continued)

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| <b>Organisational</b>  | E.g. neglect and poor practice within an institution or specific care setting, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.   |
| <b>Self-neglect</b>    | Covers a wide range of behaviours, such as neglecting to care for one's personal hygiene, health or surroundings and includes behaviours such as hoarding. A safeguarding response in relation to self-neglect may be appropriate where: <ul style="list-style-type: none"> <li>• a person is declining assistance in relation to their care and support needs, and</li> <li>• the impact of their decision, has or is likely to have a substantial impact on their overall individual wellbeing</li> </ul> |
| <b>Forced Marriage</b> | Used to describe a marriage in which one or both of the parties is married without his or her consent or against his or her will. A forced marriage   |

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|                                     | differs from an arranged marriage, in which both parties consent to the assistance of their parents or a third party (such as a matchmaker) in identifying a spouse.   |
| <b>Extremism and Radicalisation</b> | Vocal or active opposition to British fundamental values, including democracy, the rule of law, individual liberty, mutual respect and tolerance of different faiths and beliefs. The process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. Associated with exploitation of vulnerability / individuals seeking a sense of belonging / having a sense of injustice |
| <b>Female Genital Mutilation</b>    | Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act 2003 (“the 2003 Act”). It is a form of child abuse and violence against women. FGM comprises all procedures involving partial or total removal of the external female genitalia for non-medical reasons.   |
| <b>Criminal Exploitation</b>        | Criminal exploitation is a geographically widespread form of harm. E.g. benefit fraud; forced theft; forced begging; cannabis cultivation; money mule (where the young person’s bank account is used by others for money laundering); county lines (drug networks or gangs groom young people to carry drugs and money from urban areas to suburban and rural areas).  |
| <b>Peer on peer abuse</b>           | This can include (but is not limited to) bullying (including cyberbullying); sexual violence and sexual harassment; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sexting and initiating/hazing type violence and rituals between students.  |
| <b>Bullying</b>                     | A type of peer-on-peer abuse. This is behaviour that hurts someone else. It includes name calling, hitting, pushing, spreading rumours, threatening or undermining someone. It can happen anywhere – at college, at home or online. It is usually repeated over a long period of time and can hurt both physically and emotionally.  |
| <b>Cyberbullying</b>                | A type of peer-on-peer abuse. Cyberbullying is bullying that takes place online. Unlike bullying offline, online bullying can follow the person wherever they go, via social networks, gaming and mobile phone.  |

### 3.7 What is abuse/potential indicators or abuse? (Continued)

|   |   |
|---|---|
| <b>Missing and/or Absent from Education</b> | <p>People missing in education or unexplainable and or/persistent absences from education, is often an indicator for other potential safeguarding concerns.</p> <p>The College should have measures, through its attendance reporting and follow up procedures, to ensure it is following up on students, who could potentially be ‘missing in education’</p> |
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| <b>Child Sexual Exploitation</b>    | Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. |
| <b>Homelessness</b>                 | Being homeless or being at risk of becoming homeless presents a real risk to welfare. The designated safeguarding lead (and any deputies) should be aware of contact details and referral routes in to the Local Housing Authority so they can raise/progress concerns at the earliest opportunity.   |
| <b>Up-skirting</b>                  | The taking of surreptitious, sexually intrusive photographs – punishable by up to two years in prison. Such invasive behaviour is currently prosecuted as a crime of voyeurism under the Sexual Offences Act 2023.  |
| <b>Wider Mental Health Concerns</b> | Mental health problems may be an indicator that an adult at risk has suffered or is at risk of suffering abuse, neglect or exploitation. Childhood trauma can have a lasting impact throughout adolescence and into adulthood. Staff should be aware of how these experiences can affect mental health, behaviour and education   |

### 3.8 What is an adult safeguarding enquiry?

Section 42 of the Care Act 2014 says that when the tests are met (an adult who is experiencing or is at risk of abuse or neglect which they cannot protect themselves from because of their care and support needs) there must be an adult safeguarding enquiry.

The objectives of an adult safeguarding enquiry are to

- Establish facts
- Ascertain the adult's views and wishes
- Assess the needs of the adult for protection, support and redress and how they might be met
- Protect from the abuse, neglect and exploitation, in accordance with the wishes of the adult
- Make decisions as to what follow-up action should be taken with regard to the person or organisation responsible for the abuse, neglect and exploitation
- Enable the adult to achieve resolution and recovery

The Care Act 2014 does not specify what an enquiry will consist of, nor does it create any power for carrying out an adult safeguarding enquiry. An adult safeguarding enquiry is

simply the collection of whatever actions using existing powers, duties and processes is needed to meet the purposes. The benefit of putting the matter in to an adult safeguarding framework is:

- To ensure there is proper recognition of the abuse, neglect and exploitation issue
- To help the multi-agency response to the concern do the best at involving the right organisations and people, sharing information between them, having a shared understanding of the risks and how to respond to them and to minimise duplication of effort
- To give a focus on ensuring the care and support needs of the person are taken into account

### **3. Raising Awareness**

Every member of staff and all volunteers have a responsibility to act immediately on concerns of possible abuse and must inform the Orpheus Centre Designated Safeguarding Leads [DSLs]. For the avoidance of doubt, 'volunteers' includes trustees of the charity.

All those who express concern about safeguarding will be treated seriously and will receive a positive response from managers.

Staff are made aware of safeguarding policy and procedures through recruitment, interview, induction, supervision / line management and training. Learning from incidents, accidents, near misses and safeguarding concerns is disseminated through team meetings, Trustee Committee and Board meetings, training and organisational emails.

Students receive safeguarding information at the start of each year through induction as well as at other times during the year through the curriculum.

Parents are made aware of the safeguarding policy at new student induction and the policy is accessible via the website.

There is a Designated Safeguarding Lead [DSL] available at all times during College days, and SMT on-call service out of hours, and there are posters around the site identifying the DSLs.

### **4. Key Roles and responsibilities**

**5.1. Chief Executive Officer** has overall responsibility for ensuring the implementation of this policy and that adequate resources are made available to implement this policy and carry out any necessary remedial action or amendments to this policy

**5.2. The Principal**, as the Organisational Lead for safeguarding adults, is responsible for ensuring this policy and procedure is reviewed and up to date.

**5.3. Senior Management Team [SMT]** ensure that the policy is implemented within their departments.

**5.4. Line Managers** ensure the staff and volunteers they manage are made aware of the expectations on them regarding adult safeguarding issues and have access to the support they need in order to meet those expectations

**5.5. Organisational Lead for safeguarding adults:** The Principal, Chloe Smith, is the Designated Safeguarding Lead and also the Organisational Lead for safeguarding adults. The Principal heads a team of Designated Safeguarding Officers and Deputy Designated Safeguarding Lead.

**5.6. The Designated Safeguarding Officers** have the responsibility, as lead safeguarding concerns managers, to decide whether it is appropriate to refer a safeguarding concern to the local authority and what other actions might be needed. They are supported by the Principal and Chief Executive.

**5.7. The Deputy Designated Safeguarding Lead** supports the day to day operational safeguarding work across the organisation. They will respond to concerns and escalate accordingly. They also can decide to refer a safeguarding concern to the local authority and what other actions might be needed.

**The safeguarding email address for all DSLs is:** [safeguarding@orpheus.org.uk](mailto:safeguarding@orpheus.org.uk)

**Deputy Designated Safeguarding Officers:**

- The Head of Care – Sam Owen
- The Deputy Head of Care – Harriet Ayhan
- The Assistant Principal SENCO – Brooke Smith
- The Assistant Principal curriculum and Quality – Chris Lammin
- The Curriculum Manager – Alex Gordon

**The Designated Safeguarding Team** meet monthly to monitor progress with any safeguarding actions and also have a monthly safeguarding team meeting. The Chief Executive attends meetings as required. During the meetings, the safeguarding concerns log and any safeguarding concerns and queries are reviewed for actions and updates.

The purpose of the Safeguarding team meetings is to:

- Ensure the College provides the highest quality care for all adults at risk
- Minimise the risk of harm to adults at risk
- Address concerns about the welfare of adults at risk

- Identify and respond to adults at risk who may be suffering significant harm and take appropriate actions
- Meet its legal requirements relating to safeguarding issues including monitoring and updating the organisational PREVENT risk assessment and action plan where required
- Reviewing the filtering and monitoring log that has met the threshold for safeguarding following review by the digital technology meeting

Minutes are kept of the monthly meetings. Additional meetings are held as required for urgent issues. A report is provided to the Board of Trustees at least every three months, including cumulative analysis of trends and patterns in safeguarding, with more frequent escalation of safeguarding concerns to the Chair of Trustees as required.

**5.8. Designated Safeguarding Trustee:** The Designated Trustee – Nicola Temko - is responsible for liaising with the Principal and Designated Safeguarding Lead on all matters regarding safeguarding, including:

- Ensuring the College has procedures and policies in place which are consistent with guidelines and that Orpheus safeguarding practice is compliant with its policy
- Ensuring the Trustees consider the College policy on safeguarding each year
- Receive notification from the safeguarding team should concerns possibly meet serious incident reporting procedures
- Ensure safer recruitment practices are followed
- Ensure allegations against staff are dealt with as per the guidance
- Ensure staff are trained adequately and effectively to deal with safeguarding concerns
- The Designated Trustee is responsible for overseeing the liaison between agencies, e.g. police, social services etc. in connection with allegations against the Principal or the CEO member of staff. This will not involve undertaking any form of investigation, but will ensure good communication between the parties and provide information to assist enquiries. To assist in these duties, the Designated Trustee receives appropriate training.

**5.9. The Trustees** should regularly review the effectiveness of college filters and online monitoring systems, which will be done through quarterly Care and Learning Committee meetings. These checks should ensure that the leadership and safeguarding teams are: aware of and understand the systems in place, manage the systems effectively and know how to escalate concerns when identified.

**5.10. The role of Surrey Local Authority in an adult safeguarding enquiry:**

Local authorities have a particular role which they cannot delegate to others. Where an adult safeguarding enquiry is required, the local authority must:

- Decide what enquiries it thinks are necessary to make up the adult safeguarding enquiry;
- Make those enquiries or cause others to make them; and
- When the enquiry is completed, it must decide whether any action should be taken, and if so, what and by whom.

In Surrey, this role is taken on by the social work team in adult social care or, where the adult's care and support needs relate to serious mental health issues, by the integrated health and social care services for people with mental health needs.

For the purposes of clarity, in this policy and procedure the term “adult social care” is used to mean the relevant service for that person.

Where the local authority requires another organisation to carry out enquiries in connection with an adult safeguarding concern, the local authority is required to ensure that these enquiries are carried out satisfactorily. Where they have not been, the local authority may need to carry out those enquiries itself. The local authority may also decide to carry out enquiries itself rather than require another organisation to do so if there are issues that mean the local authority is best placed to make those enquiries. For example, where a conflict of interest might arise if the other organisation were to undertake then enquiries.

**5.10.1. Safeguarding Adults Decision Maker (SAD):** This local authority role is the person who makes the decisions in s42 Care Act 2014 on behalf of the local authority on the piece of adult safeguarding work. The decisions they make are:

- Whether or not there will be an adult safeguarding enquiry
- What that enquiry will consist of
- When that enquiry has been completed
- Whether there needs to be a Safeguarding Plan as a result of the enquiry
- Whether to refer the matter to Surrey Safeguarding Adults Board for consideration for a Safeguarding Adults Review

**5.10.2. Safeguarding Adults Manager (SAM):** The SAM is a local authority role and defined in the Surrey Safeguarding Adults Policy and Procedures. It is the person responsible for overseeing the carrying out of an adult safeguarding enquiry. In Surrey this will typically be a Team Manager or a senior Social Worker in an adult social care team. One person can act as both SAD and SAM, or this can be split between two people.

**5.10.3. Lead Enquiry Coordinator (LEO):** This local authority role is the person who will lead on the carrying out of the enquiry, under the instruction of the SAM. In Surrey this will typically be a Social Worker in an adult social care team. Where the adult safeguarding enquiry is being led by a team in Surrey and Borders Mental Health Trust it might be a Social Worker, Nurse or Occupational Therapist in that team.

## **6. The Expectations of all Employees and Volunteers:**

**All Employees and Volunteers** must understand their own role and responsibilities regarding adult safeguarding:

- They must be aware of the Surrey Safeguarding Adults Board Adult Safeguarding Policy and Procedures
- They must keep their knowledge and skills up to date by meeting the training requirements expected of their role
- They must understand what is expected of them if they become aware that an adult with care and support needs is experiencing or is at risk of abuse or neglect
- They must take all reasonable actions in line with those expectations
- They must take all reasonable actions to prevent adults with care and support needs from experiencing abuse, neglect, exploitation
- They have a responsibility to act on concerns of possible abuse and must inform Designated Safeguarding Leads [DSLs] for the Orpheus Centre.

## **7. Safer Recruitment**

The Orpheus Centre is committed to achieving best practice in respect of the safe recruitment of employees and volunteers and to working within best practice as established by the Disclosure and Barring Scheme (DBS).

All staff are checked appropriately before they start employment, including a Disclosure and Barring Service (DBS) check. Volunteers are also subject to DBS check as appropriate to their specific role.

The Centre's recruitment and selection procedures include the following requirements:

- For each role the recruitment process is planned in advance to ensure a consistent approach each time a new employee or volunteer is recruited. The recruitment policy and procedure is followed
- The role is defined in a job description and person specification which highlights the safeguarding responsibilities of all employees
- The advertisement of the role includes a clear message about the organisations commitment to safeguarding and will include if the role requires a criminal records check
- Applicants are required to complete an application form on the Orpheus Centre applicant tracking system and sign to declare the information they have provided is true. This includes a self-disclosure area which is confidential from the hiring manager until an offer of employment has been made. This does not replace the need for a criminal record check

- Shortlisting will be carried out by at least two people by completing a recruitment matrix assessing each applicant against the person specification criteria
- All hiring managers will have completed safer recruitment training before involvement in the recruitment process
- The interview panel will be at least two people and a member of HR to chair the interview and they will ask questions in respect of areas of concern and ensure the right people are selected for employment. The panel will ensure all assessments are conducted fairly and candidates are treated equally
- Evidence of qualifications and identity is obtained, including the eligibility of the candidate to work in the UK
- Employment/educational references are required for successful candidates.
- The successful candidates' application form is reviewed by Human Resources and any gaps in employment or other missing information followed up.
- Enhanced Disclosure and Barring Service (DBS) disclosures are undertaken where required and are treated sensitively and confidentially.
- The College will inform shortlisted candidates that online searches will be carried out by the Human Resources team as part of the due diligence checks.
- For qualified teachers with a QTS (Qualified Teacher Status) or QTLS (Qualified Teacher Learning and Skills Status), we will check teacher records for prohibition, sanction or restriction that may/will affect their ability to carry out certain activities or work in particular roles.
- Where a DBS disclosure has not been received before a candidate is due to start employment, a risk assessment will be undertaken and authorised, to determine whether and how it is appropriate for the candidate to start work.
- Where a DBS returns a previous conviction, a risk assessment will be carried out by the Head of HR, CEO and the Principal and the appointment of that staff member confirmed or rejected as appropriate.

Refer to the relevant Human Resource Policies for further information.

## **8. Confidentiality and Information sharing arrangements**

Confidentiality and trust should be maintained as far as possible, but staff must act on the basis that the safety of the person disclosing is the overriding concern. The degree of

confidentiality will be governed by the need to protect those concerned. The adult at risk should be informed at the earliest possible stage of the disclosure that the information may be passed on. Information sharing with families and carers must be compliant with Mental Capacity Act and any Lasting Powers of Attorney or Deputyships in place for the individual.

The college complies with current legislation, including General Data Protection Regulations (GDPR) 2018, which allows for disclosure of personal data where this is necessary to protect the vital interests of a student or adult at risk.

**Surrey Safeguarding Adults Board:** Safeguarding concerns will be escalated to Surrey Safeguarding in accordance with their guidance.

**CQC** require submission of a notification regarding abuse or allegations of abuse concerning a person using Orpheus domiciliary care services if any of the following applies:

- the person is affected by abuse
- they are affected by alleged abuse
- the person is an abuser
- they are an alleged abuser

CQC notifications are completed through the CQC portal by the Registered Manager. In the absence of the Registered manager, the Nominated Individual will complete the notification.

**Certain funders** require notification of safeguarding incidents: the Chief Operating Officer will review these requirements in their role as a Designated Safeguarding Lead.

## **9. Training and Supervision**

**9.1.** The Orpheus Centre has a duty to promote safeguarding issues and guidance to staff to ensure that they analyse their own working practice against established good practice; assess risk to ensure their practice is likely to protect them from false allegations; recognise their responsibilities and report any concerns about suspected poor practice or possible abuse.

**9.2. Training records** are audited quarterly and reported to the Trustee Board within the safeguarding report to ensure compliance.

**9.3. The Designated Safeguarding Lead Team** is required to provide training in safeguarding and inter-agency working. The Designated Safeguarding Leads, as indicated in this policy, will have completed at least Level 3 Designated Safeguarding Lead training through the Local Authority or another appropriate body, refreshed every two years. The team will ensure they remain up to date with the process and systems for filtering and monitoring.

**9.4. All new staff and volunteers, including trustees, will undertake an induction which will include**

In person safeguarding training

PREVENT training

IT user training that promotes understanding of IT User Policy including the filtering and monitoring systems and processes in place

Issued with Safeguarding Policy and Procedures

**9.5. Trustees** will receive training which provides them with the knowledge to ensure the college safeguarding policies and procedures are effective. The Safeguarding Trustee will read the annually updated Keeping Children Safe in Education document in its entirety

**9.6. All staff and volunteers** will access face to face Safeguarding updates through the annual training plan, to raise awareness of current issues and legislation. There are also monthly updates sent via email and available in paper format to share internal and external trends and reminders about key topics and safeguarding concerns. Face to Face training is repeated at least every 3 years. Understanding is checked within line management or supervision meetings. All staff will receive training on the requirements and provisions of the Mental Capacity Act and Deprivation of Liberty Safeguards (DoLS)

**9.7. All members of staff** are provided annually with a copy of the updated Part One of “Keeping Children Safe in Education” which covers Safeguarding information for all staff. College Managers and CEO will read the entire document. All staff will access the annually updated Annex A within Keeping Children Safe in Education. Members of staff sign to confirm that they have read Part One and Annex A. This record is kept on People HR. Learning disabled staff are supported by their line manager to review the documentation and agree their understanding.

**9.8. Supervision:** All Staff will review safeguarding procedures and learning from safeguarding, incidents, accidents and near misses during line management / supervision meetings.

## **10. Prevention of abuse, neglect and exploitation**

The Orpheus Centre has policies, procedures and required practices that minimise the risk of abuse occurring. Staff or volunteers may need to refer to these in order to determine whether abuse has occurred and how to respond:

- Whistle blowing Policy
- The boundaries of personal relationships with service users
- The handling of money and personal effects
- Learner Behaviour Policy
- IT User Policy
- Safeguarding Prevent Policy

- Complaints Policy
- Equality, Diversity and Inclusion Policy
- Managing restraint and other physical interventions
- Mental Capacity Act (Inc. Advanced Decisions and Lasting Powers of Attorney)
- Deprivation of Liberty Safeguards (DoLS)
- Incident Reporting procedures
- Risk assessment and risk management, including for events and trips and with respect to required staffing levels

## **11. Record Keeping and Sharing**

**11.1. W Drive:** Individual safeguarding records, the Safeguarding Log and historic Safeguarding Records are held securely on the W Drive with access being restricted to the Designated Safeguarding Team and Senior Management Team.

**11.2. Databridge:** Student safeguarding incidents from 2021-22 academic year onwards are noted within the individual student record on the Databridge system. Each student's safeguarding record contains a chronological summary of significant events and the actions and involvement of the college.

Recording and monitoring of Personal Development Behaviour and Welfare (PDBW) Logs: Databridge allows the recording of personal development behaviour and welfare incidents for all learners. These are categorised as follows:

**Red:** Serious incidents including acts of violence, damage to property

**Amber:** Actions/Experiences that may need signposting of further intervention or support such as student purposefully using inappropriate derogatory language, issues with attendance and/or punctuality or consistent refusal to engage with support or follow reasonable instructions.

**Green:** Wow moment where student has demonstrated achievement such as academic progress, target achievement or positive attitude.

Each log allows for the recording of the antecedent (trigger), what happened during and after and to detail who was present during the action/experience which supports next steps or action plans/strategies to support development and reduction in further incidents.

Alerts will automatically be sent to appropriate staff attached to the learner for information or further exploration. Personal tutors will use PDBW data to inform conversation during 1:1 tutorials with their tutees half termly where appropriate

The data is analysed on a monthly basis and reported to the safeguarding trustee during monthly safeguarding meetings and the Board of Trustees each quarter. Data is used to

observe trends and behaviours which are then analysed against safeguarding concerns and this informs the PSHE curriculum or increased intervention for those students who require it

### **11.3. Document Control of Each Safeguarding Recording Form and Safeguarding Concern Folder:**

- Once the decision is made to complete a safeguarding referral form, a named member of the DSL team will be assigned to oversee the concern and its documentation.
- Every communication concerning the individual safeguarding issue is to be noted in the safeguarding recording form, including any actions with deadlines and named responsible persons. This is held within the students Databridge record under safeguarding.
- Email communications should be copied and pasted into the form and a copy of the email saved to the individual safeguarding concern folder on the W drive.
- All phone calls should be noted, including the details of the correspondents, relevant telephone numbers, and a summary of the conversation, including any actions with deadlines and named responsible persons.
- All additional documents/emails saved in the safeguarding concern folder should be numbered in order of their appearance in the safeguarding recording form and clearly labelled to identify their relevance to the record.
- Once the safeguarding concern has closed, the record should be downloaded from Databridge and stored securely in the safeguarding concern folder in the W:Drive.

**11.4. Resignation of DSL:** When a DSL member of staff resigns from their post or no longer has safeguarding responsibility, there should be a full face to face handover/exchange of information with the new post holder. Before leaving they must also ensure the W Drive and Databridge safeguarding record keeping is up to date.

**11.5. Transfer of safeguarding records:** When a student leaves the Orpheus Centre, consideration will be given to the student's wishes and feelings about their safeguarding / child protection information being passed on, in order that the receiving organisation can provide appropriate support.

Due consideration must be given to the sharing of any additional information and any such requests from the receiving establishment. If there is an existing risk management plan/assessment in place for behaviours that are deemed potential harmful to the student or others (i.e. self-harming or harmful sexualised behaviour), the risk management plan/assessment must be shared with the destination provision prior to the student

starting, so that appropriate care and control measures can be put in place to mitigate the potential of any risk of further harm occurring.

Student records should be transferred in a secure manner. A receipt of file transfer should be obtained for audit purposes. If sending by post, records should be sent, "Special Delivery". A note of the special delivery number should also be made to enable the records to be tracked and traced via Royal Mail. Electronic transfer should be secure, e.g. password protected documents, with passwords shared in a separate email to the document transfer.

For audit purposes a list of the names of all those whose records are transferred and the name of the organisation they are transferred to must be made and a signature obtained from the receiving organisation as proof of receipt. Likewise, a note of all records received should be kept. Records will be kept in the student's individual Databridge file by the learning administrators. This will include where and to whom the records have been sent, or from whom they have been received, the date sent and/or received.

**11.6. Archive of safeguarding records:** When a student leaves the Orpheus Centre, the Centre will retain the student's safeguarding record in electronic format on the W drive and on Databridge as an archived record in accordance with the Data Retention Policy. Prior to 2021-22 academic year, the archived records are a combination of electronic and paper and are kept securely in accordance with the data retention policy.

**11.7. Student and Parent access to safeguarding records:** Student's and parents' access to child protection and/or safeguarding files: Under the Data Protection Act 2018, a student or their nominated representative has the legal right to request access to information relating to them. This is known as a subject access request. Therefore it is important to remember that all information should be accurately recorded, objective in nature and expressed in a professional manner. Any student who has a safeguarding file has a right to request access to it. The student's parent may only have access to records in accordance with the Mental Capacity Act legislation.

However, neither the student nor the parent has an automatic right to see all the information held. Information can be withheld if disclosure could cause serious harm or is likely to cause serious harm to the physical or mental health or condition of the student or another person, could reveal that the student or another person has been a subject of or may be at risk of abuse, or if the disclosure is not in the best interests of the student, likely to prejudice an on-going criminal investigation, or if information about the student also relates to another person who could be identified from it or the information has been given by another person who could be identified as the source, unless the person has consented to the disclosure or the person providing the information is an employee of the establishment or the Local Authority.

**11.8.** Reports are available to the student unless the exceptions described above apply. If an application is made to see the whole record, advice should be sought from Designated Safeguarding Leads and the CEO.

**11.9. Safe Destruction of the student record:** Student data will be retained or destroyed in accordance with the Orpheus Centre Data Retention Policy.

Where records have been identified for destruction, they should be disposed of securely at the end of the academic year (or as soon as practical before that time).

Records which have been identified for destruction should be confidentially destroyed. This is because they will either contain personal or sensitive information, which is subject to the requirements of the Data Protection Act 2018 or they will contain information which is confidential to college or the Local Education Authority. Information should be shredded prior to disposal or confidential disposal can be arranged through private contractors.

For audit purposes the college should maintain a list of records which have been destroyed and who authorised their destruction. This will be maintained by the learning administrator and saved in the Learning Drive.

**11.10. Family context of safeguarding:** On occasions when safeguarding concerns exist for a student in the context of a family situation and siblings attend other educational establishments or the children are known to other agencies, it may be appropriate for the designated safeguarding staff to consult with, on a confidential basis, their counterpart from other establishments or other agencies to share and jointly consider concerns. If in any doubt about the appropriateness of this process, advice can be sought from Surrey Safeguarding Adults Board [SSAB] or Surrey Safeguarding Children Partnership (SSCP).

**11.11. Police:** The police are allowed access to college records in certain circumstances such as criminal investigations. If you have any queries regarding police access to any college records please contact the Chief Executive Officer, Chief Operating Officer or Principal

It is good practice to seek consent from the student or their advocate before sharing information. If the young person is over 16, they should be involved in decision-making about information sharing, unless they do not have the capacity to give consent. However, consent is not always a condition for sharing and sometimes we do not inform the student or family that their information will be shared, if doing so would: place a person (the student, family or another person) at risk of significant harm, if a child, or serious harm, if an adult; or prejudice the prevention, detection or prosecution of a crime; or lead to unjustified delay in making enquiries about allegations of significant harm to a child or serious harm to an adult.

Consent should not be sought if the establishment is required to share information through a statutory duty, e.g. section 47 of the Children Act 1989 as discussed above, or court order.

## **12. Safeguarding Procedure**

### **12.1. Context of Safeguarding Procedure**

Adult safeguarding work is about protecting adults with care and support needs from abuse and neglect and exploitation, and about responding well when adults with care and support needs are experiencing or are at risk of abuse or neglect.

Adult safeguarding work in Surrey takes place in the context of

- The Care Act 2014: This sets out the duties and powers in law around adult safeguarding issues. It says the local authority is the lead agency on responding to adult safeguarding concerns and that Safeguarding Adults Boards (SABs) have the strategic lead for their area;
- The Care and Support Statutory Guidance: This gives detail about what must and should be done in relation to adult safeguarding issues. As it is statutory guidance, it must be followed unless you have good reason not to
- The Surrey Safeguarding Policy and Procedures: This gives the framework adopted across Surrey for multi-agency responses to adult safeguarding concerns.

### **12.2. Making Safeguarding Personal**

“Making safeguarding personal means [adult safeguarding work] should be person-led and outcome-focused. It engages the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.” (Paragraph 14.15 of the Care and Support statutory guidance)

In our organisation we will meet the aims of Making Safeguarding Personal by:

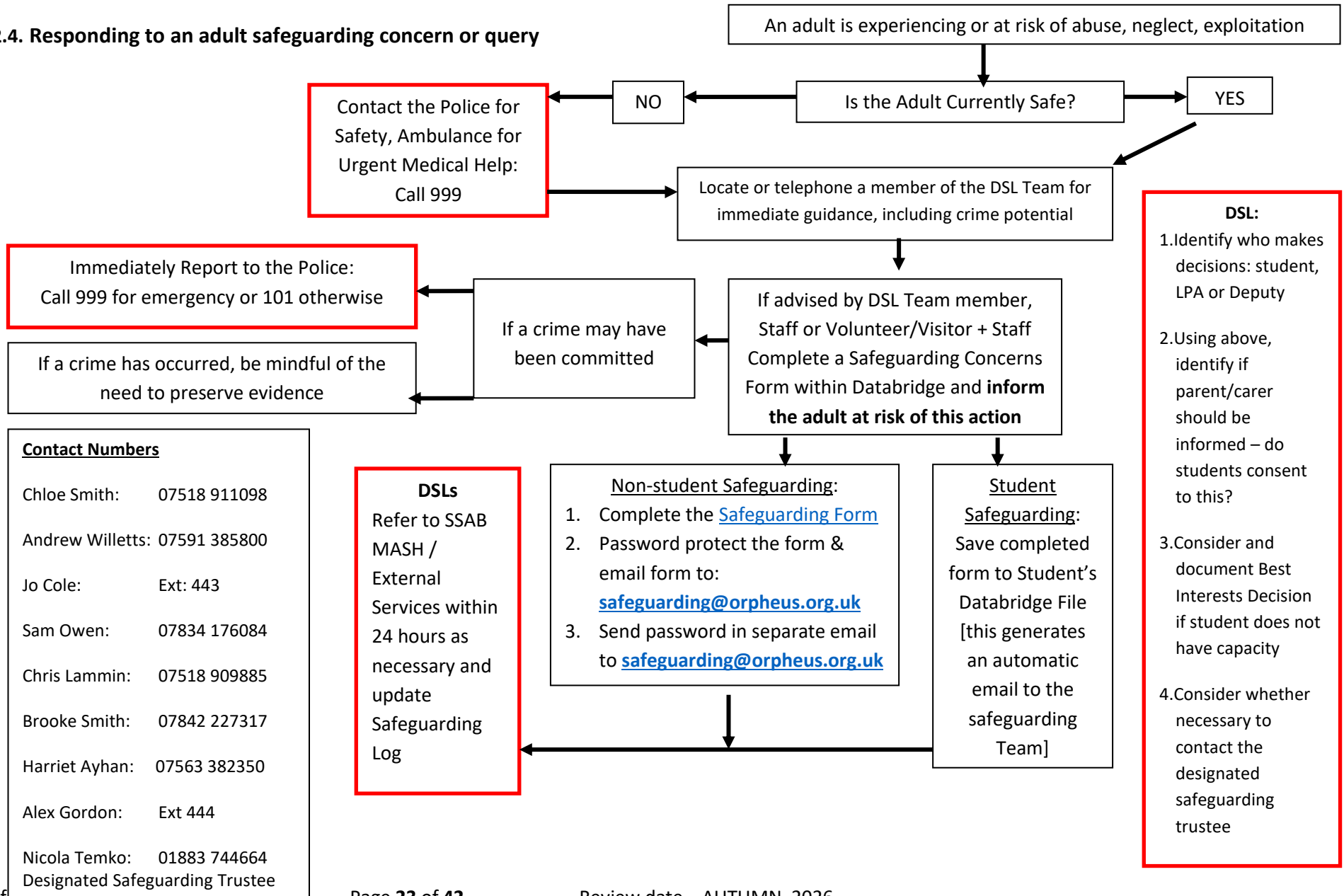
- Keeping the person at the heart of the process
- Making efforts to understand the outcomes they want to achieve from the adults safeguarding work and support them to achieve those

### **12.3. Before adult safeguarding concerns arise**

- All students take part in induction when they join the college and are informed about safeguarding, who the DSLs are, and their role in safeguarding themselves and each other.
- This information is refreshed for all students at the start of every academic year.
- Easy read leaflets are available and activities are undertaken to ensure that all are aware of what safeguarding is and what to do if they have concerns.
- All students are made aware that their concerns will be treated seriously and that we will keep their concerns confidential and only inform people who need to know.

- Students are informed that there is a policy and procedure in place in relation to any safeguarding concerns, whether in relation to themselves or others, and that the college will follow the correct procedures in order to safeguard them
- There are posters around the site identifying the designated safeguarding leads and highlighting the contact email address for the group.
- The Orpheus Centre website provides a link to the safeguarding policy as well as identifying the designated safeguarding leads.
- Student safeguarding representatives attend part of the DSL meetings to provide student insight into non-confidential safeguarding management matters

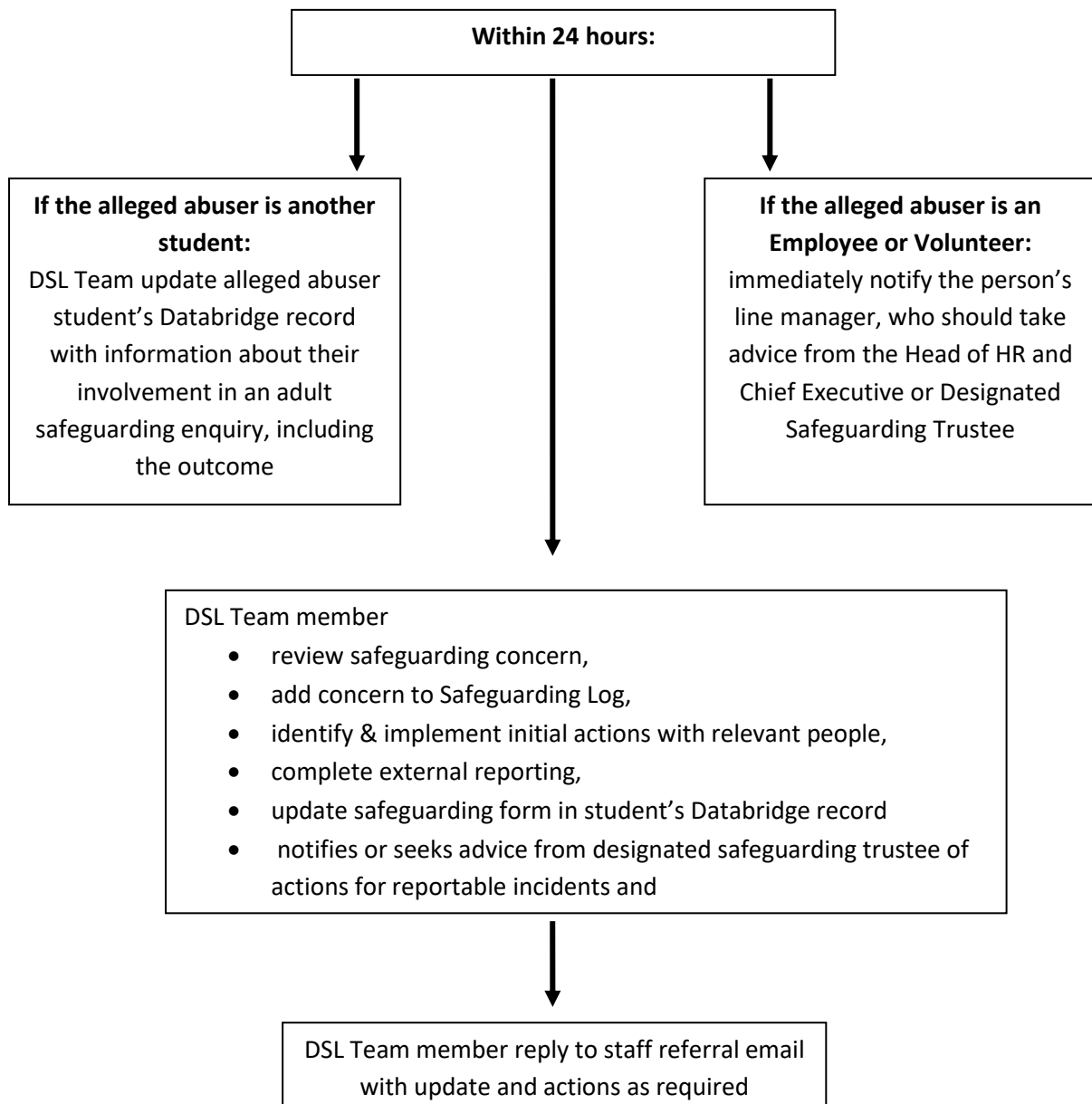
## 12.4. Responding to an adult safeguarding concern or query



**Contact Numbers**

|                                 |              |
|---------------------------------|--------------|
| Chloe Smith:                    | 07518 911098 |
| Andrew Willetts:                | 07591 385800 |
| Jo Cole:                        | Ext: 443     |
| Sam Owen:                       | 07834 176084 |
| Chris Lammin:                   | 07518 909885 |
| Brooke Smith:                   | 07842 227317 |
| Harriet Ayhan:                  | 07563 382350 |
| Alex Gordon:                    | Ext 444      |
| Nicola Temko:                   | 01883 744664 |
| Designated Safeguarding Trustee |              |

### 12.5 Actions for DSL and DSL Team following an allegation of abuse:



## **Responding to adult safeguarding concerns, queries, actions and reviews**

If any member of staff or volunteer has reason to believe that abuse is or may be taking place, they have a responsibility to act on this information.

It does not matter what your role is, doing nothing is not an option. You must always assume it could happen here. Safeguarding is everyone's responsibility

Safeguarding concerns and queries may be raised by any staff, volunteer or visitor in the Orpheus centre. Volunteers, visitors or students should seek the support of a staff member immediately who will lead on the following actions.

**If an adult tells you about abuse, neglect or exploitation** they are experiencing or are at risk of, use the following principles to respond to them:

- Where possible, provide a calm and quiet space that allows the young person to feel free to share their concerns
- Assure them that you are taking the concerns seriously
- Do not be judgemental or jump to conclusions
- Listen carefully to what they are telling you, stay calm, get as clear a picture as you can. Use open ended questions
- Do not start to investigate or ask detailed or probing questions
- Explain that you have a duty to tell your manager or the designated safeguarding leads and that information may be shared further if appropriate
- Reassure the person that they will be involved in decisions about them

### **Your responsibilities are:**

- To take action to keep the person safe if possible.
- If an urgent police presence is required to keep someone safe, call 999
- If the person needs urgent medical assistance, call 999
- Clearly record what you have witnessed or been told, record your responses and any actions taken. For accuracy, document this as soon as possible.

### **If the adult at risk cannot be kept safe immediately, the police should be called.**

If you think a crime might have occurred, the police must be notified and you should be mindful of the need to preserve evidence

The individual staff member who is raising the concern, or supporting a concern raised by a volunteer, student, or visitor, should locate or telephone a member of the Designated Safeguarding Lead Team for immediate advice and the discussion will determine if the query is a safeguarding concern or a personal development, behaviour and welfare matter.

If advised by the Designated Safeguarding Team member, complete a Safeguarding Referral Form:

- For Student Safeguarding Concern: complete the safeguarding form within the student's Databridge file. This generates an automatic email to the safeguarding team
- For Non-student Safeguarding Concerns:
  - a) Electronically complete a safeguarding form: <J:\SAFEGUARDING TEMPLATE FORMS\SAFEGUARDING RECORDING BLANK FORM.doc>
  - b) Password protect the form [with the safeguarding form document open select the File tab, Click Protect, Click Encrypt with Password, Create and Type in a password
  - c) Email the password protected form to [safeguarding@orpheus.org.uk](mailto:safeguarding@orpheus.org.uk) N.B. Delete any copies of the completed document
  - d) Send the password in a separate email to [safeguarding@orpheus.org.uk](mailto:safeguarding@orpheus.org.uk)
  - e) **Inform the adult at risk of this action**
- If consulting with the Designated Safeguarding Leads will lead to an undue delay and thereby leave a person in a position of risk, you should refer the safeguarding concern to the local authority by contacting the Multi-Agency Safeguarding Hub [MASH] Team at Surrey Local Authority:
  - 9am to 5pm, Monday to Friday Phone: 0300 470 9100
  - Out of hours call the Adult Social Care Emergency Duty Team on: 01483 517898
  - Please use the Adult Safeguarding Concern [ASC] level of need toolkit to assist you in referring to the correct team: this is available on the Surrey Safeguarding Adults Website: <https://www.surreysab.org.uk/concerned-about-an-adult/>
  - Email: [ascmash@surreycc.gov.uk](mailto:ascmash@surreycc.gov.uk)
- Always inform the Designated Safeguarding team of any safeguarding concerns or queries. You cannot keep this information secret, even if the person asks you to.
- The Designated Safeguarding Officer/Lead can advise, provide support to the member of staff and:
  - Will know how to make an appropriate referral, including contacting the police if it is suspected that a crime has been committed. [N.B. Contacting the police should not be delayed if there is a delay in contacting the DSL]
  - Will be available to provide advice and support to other staff on issues relating to Safeguarding, e-Safety and Prevent
  - Have particular responsibility to be available to listen to adults at risk

- Will deal with individual cases, including attending case conferences and review meetings, as appropriate
  - Will have completed the online safeguarding training modules, taken part in designated safeguarding lead training in adult protection issues and inter-agency working with Surrey County Council, and will receive refresher training at least every two years
  - In the event the Designated Safeguarding Officers are unavailable, the chief executive or a member of SMT will be notified
  - There is always a DSL on duty during the college day, SMT for out of hours support, and there are posters raising awareness of who DSLs are around the site
  - Where appropriate, a case review will be undertaken to learn and share best practice.
- The Safeguarding Referral form will be reviewed and actioned by the Designated Safeguarding Leads within 24 hours, including a check for past incidents, concerns, risks and patterns for the individual. In many situations, abuse and neglect and exploitation arise from a range of incidents over a period of time.
  - The safeguarding concern will be logged in the Safeguarding Log and the safeguarding referral form will be stored in the safeguarding folder of the W Drive.
  - Each Safeguarding Referral form will be updated with any actions and reviews.
  - Records will be available to service commissioners, Ofsted and the CQC as required, in accordance with GDPR principles.
  - Where requested, records may also be made available to those adults affected by, and subject to, a safeguarding enquiry. Where necessary, the record will be a redacted version to protect the privacy of other persons [e.g. other alleged victims].
  - If the alleged abuser is using care and support themselves, then information about their involvement in an adult safeguarding enquiry, including the outcome, should be included in their case record. If it is assessed that the individual continues to pose a threat to other people then this should be included in any information that is passed on to service providers or other people who need to know.

### **Managing Radicalisation Concerns**

We will help support individuals who may be vulnerable to radicalisation and where we believe an individual is being directly influenced by extremist materials or influences, we will ensure that the person is referred to the 'Channel' process through direct liaison with the Multi Agency Safeguarding Hub (MASH). In such instances, the Designated Safeguarding Lead will seek external support from the Local Authority and Prevent Coordinator. If the risk is seen to be serious and dangerous behaviour imminent, the matter will be reported to the Police via 999. If the risk arises outside of the student body, the Designated Safeguarding Lead will liaise with the Surrey Police Prevent team and MASH.

## **Allegations against Orpheus staff or volunteers**

- The safety of the adult at risk is of paramount importance.
- Immediate action may be required to safeguard investigations and any other children, young people or adults at risk.
- Any concern that adults may be at risk of harm, abuse or exploitation, must immediately be reported to the Designated Safeguarding Lead
- The concern must also be reported to the staff member's line manager, who should take advice from Designated Safeguarding Leads and/or the Chief Executive
- Reputational issues must be managed appropriately through discussion with the Chief Operating Officer, Principal and CEO.
- Any action taken to manage an allegation must not jeopardise any external investigations, such as a criminal investigation.
- It is essential that every effort must be made to maintain confidentiality and manage communications while an allegation is being investigated.
- The Designated Safeguarding Lead will discuss the case and allegations with the Local Authority Safeguarding Adults Manager [SAM] and, where relevant, with the police and identify which agency will be leading on the investigation.
- The Designated Safeguarding Lead should contact the HR department for advice regarding the action to be taken in relation to the employee. In conjunction with HR and the staff member's line manager, a decision will be made whether suspension is appropriate during the period of investigation.
- Concerns expressed about agency staff or contractors should be notified to their employers.
- Concerns expressed about the Designated Safeguarding Lead should be notified to the Designated Safeguarding Trustee and Chair of Trustees
- Learning lessons applies to all cases, not just those which are concluded and found to be substantiated. In all cases, the DSL will review lessons learned with the Head of Human Resources and share these appropriate

Planning should be carried out with the SAM. The planning should consider:

- Whether the adult at risk of abuse, neglect or exploitation is safe.
- What other strands there may be to the adult safeguarding enquiry and what the strategy will be for any internal investigation so that it contributes in the best way to the adult safeguarding enquiry.
- What further contact is required with adult social care services in other areas, police, commissioners of the service, regulators of the service.
- Who will form the investigation team for our organisation, and which member of the Investigation Team should be nominated as the link person with other organisations.
- Review what action has already been undertaken so far to ensure the safety of the victim.
- Whether there needs to be a referral to any appropriate professional regulatory body should the member of staff be a registered professional.
- Decide how to present the allegations to the relevant staff member concerned and how to manage the investigatory process.

- Agreement should be reached with the SAM about what information should be passed to the staff member concerned.
- The Line Manager should be asked to provide appropriate support to the individual while the case is on-going and keep them regularly informed.
- Further support may be considered necessary from Occupational Health.
- Decide how the adult at risk of harm or abuse, or their representative, and the person making the allegation are to be kept informed of what is happening to their allegation, whilst adhering to the requirements of maintaining confidentiality and observing the requirements of the Human Rights Act and the Data Protection Act. The sharing of information must not 'contaminate' any enquiries that are on-going.
- The Communications team should provide additional support and advice in relation to the handling of any queries from the media concerning the allegation.
- The information to be shared with the senior management team.
- What needs to be done if the allegation is about a person not directly employed
- Decide the frequency and format of review meetings which need to be set up to manage the on-going investigation and the various actions required
- Low level concerns – “Low level concerns may arise as a result of naivety, be accidental or unintentional, be the result of misinformed action, a failure to follow procedures, a lack of training or, more rarely, deliberate abuse” – Keeping Children Safe in Education 2022. All low-level concerns MUST be reported, no matter how low level the concern may be perceived to be. The Designated Safeguarding Lead will evaluate and record the concern, escalating to external bodies as detailed above.

### **13 Deciding whether a referral to the local authority is required and making the referral**

Reporting abuse to the local authority, in line with the Surrey Safeguarding Adults Board Safeguarding Policy and Procedures, can be undertaken by anyone.

Often however this is undertaken by a manager in the organisation. At Orpheus, this is the Designated Safeguarding Leads. The local authority the matter should be reported to, is the one where the abuse or neglect took place, or where the risk of it arises.

Information about how to refer an adult safeguarding concern in Surrey can be found on Surrey Safeguarding Adults Board website: <https://www.surreysab.org.uk/concerned-about-an-adult/>

“No professional should assume that someone else will pass on information which they think may be critical to the safety and wellbeing of the adult. If a professional has concerns about the adult’s welfare and believes they are suffering or likely to suffer abuse or neglect, then they should share the information with the local authority and/or the police if they believe or suspect that a crime has been committed.” (Care and Support Statutory Guidance, March 2016, paragraph 14.43)

“It is not for front line staff to second-guess the outcome of an enquiry in deciding whether or not to share their concerns. There should be effective and well-publicised ways of escalating concerns where immediate line managers do not take action in response to a concern being raised.” (Care and Support Statutory Guidance, March 2016, paragraph 14.199)

### **13.1. Escalating adult safeguarding concerns where immediate line managers do not take action**

At the Orpheus Centre, if a person is concerned that an adult safeguarding concern has not been acted upon, we expect them to raise the matter with their manager.

If the matter still has not been dealt with it should be escalated to, in order:

- One of the Deputy Designated Safeguarding Leads
- The Organisational Lead for Adult Safeguarding
- The Chief Executive

If the concern has still not been acted upon, you should refer to the Whistleblowing policy and procedure.

### **14. Responding to adult safeguarding concerns in a regulated health or social care setting**

“When an employer is aware of abuse or neglect in their organisation, then they are under a duty to correct this and protect the adult from harm as soon as possible and inform the local authority and CQC” (Care and Support Statutory Guidance March 2016, paragraph 14.69).

The Orpheus Centre is a regulated social care setting and this duty applies.

#### **14.1. Referrals to the Disclosure and Barring Service**

“If someone is removed by being either dismissed or redeployed to a non-regulated activity, from their role providing regulated activity following a safeguarding incident, or a person leaves their role (resignation, retirement) to avoid a disciplinary hearing following a safeguarding incident and the employer/volunteer organisation feels they would have dismissed the person based on the information they hold, the regulated activity provider has a legal duty to refer to the Disclosure and Barring Service. If an agency or personnel supplier has provided the person, then the legal duty sits with that agency. In circumstances where these actions are not undertaken then the local authority can make such a referral.” (Care and Support Statutory Guidance March 2016, paragraph 14.75)

The Orpheus Centre is a regulated social care and education setting and this duty applies.

## **15. Considering whether to report an adult safeguarding concern to the police**

When a person raises a safeguarding concern with a DSL Team member, the two of them should discuss whether a crime might have occurred. If it is not clear, the DSL may seek additional and/or external advice.

If a crime has been or may have been committed, the DSL Team member advising the person reporting the concern will ask them to seek the victim's consent to report the matter immediately to the police. However, where a crime may have been committed, the report will be made to the police with or without the victim's consent. This will be in addition to the DSL Team Member raising a safeguarding concern with the local authority.

If the person has mental capacity in relation to the decision and does not want a report made, this should be noted in the safeguarding recording form and respected unless there are justifiable reasons to act contrary to their wishes, such as:

- the person is subject to coercion or undue influence, to the extent that they are unable to give consent, or
- there is an overriding public interest, such as where there is a risk to other people
- it is in the person's vital interests (to prevent serious harm or distress or in life-threatening situations)
- where there is an expectation on you to report the matter arising from, for example, your organisation's obligations to contribute to the prevention and detection of crime under the Crime and Disorder Act
- where there is a statutory reporting requirement on you

There should be clear reasons for overriding the wishes of a person with the mental capacity to decide for themselves. If a person refuses intervention to support them with a safeguarding concern, or requests that information about them is not shared with other safeguarding partners, their wishes should be respected. However, there are a number of circumstances where the practitioner can reasonably override such a decision, including:

- the person lacks the mental capacity to make that decision – this must be properly explored and recorded in line with the Mental Capacity Act
- other people are, or may be, at risk, including children
- sharing the information could prevent a crime
- the alleged abuser has care and support needs and may also be at risk
- a serious crime has been committed
- staff are implicated
- the person has the mental capacity to make that decision but they may be under duress or being coerced

- the risk is unreasonably high and meets the criteria for a multi-agency risk assessment conference referral
- a court order or other legal authority has requested the information.  
(Safeguarding adults: sharing information: SCIE 2019)

A judgement will be needed that takes into account the particular circumstances and this judgement will be the work of the DSL Team member in consultation with the person raising the safeguarding concern. The DSL Team member may seek further advice from other DSL Team members as necessary. If the person does not have mental capacity in relation to this decision, a 'best interests' decision will need to be made in line with the Mental Capacity Act. In all circumstances, the reasons for and the details of the decision and the decision-making process must be noted in the safeguarding recording form.

### **15.1. Preserving evidence**

If a crime has occurred, try to preserve evidence in case there is a criminal investigation.

- try not to disturb the scene, clothing or victim if at all possible
- secure the scene, for example, lock the door, if possible
- preserve all containers, documents, locations, etc.
- evidence may be present even if you cannot actually see anything
- if in doubt, contact the police and ask for advice

### **16. What happens once an adult safeguarding concern has been reported?**

The local authority will consider if the conditions set out in section 42 of the Care Act are met. These are

- That the matter relates to an adult, aged 18 or over, who has care and support needs; and
- They are unable to protect themselves from the abuse or neglect, or the risk of it, because of those care and support needs

If those conditions are met, then there must be an adult safeguarding enquiry. The local authority will determine what actions are required, who by, and when they need to happen.

The Designated Trustee is responsible for overseeing the liaison between agencies, e.g. police, social services etc. in connection with allegations against the Principal or the CEO member of staff. (Section 5.7 of policy)

### 16.1. The relationship of an adult safeguarding enquiry to other processes

Situations that meet the test in section 42 of the Care Act may also require other types of responses such as

- Internal management review, including processes such as “Untoward incident” or “Serious Incident” investigations
- Complaint
- Disciplinary process
- Contract management action
- Criminal investigation

These processes should not be seen as separate from, or an alternative to, an adult safeguarding enquiry, but as strands of that enquiry. Such processes will often have their own usual arrangements and timescales, but where they are contributing to an adult safeguarding enquiry there may have to be some flexibility about these arrangements so that the various strands of the enquiry work well together.

### 17. Contributing to an adult safeguarding enquiry

The Designated Safeguarding Leads will contribute to an adult safeguarding enquiry; details of which DSL is working on the enquiry will be documented in the safeguarding concerns form.

The Designated Safeguarding Leads will work with the SAM and the Enquiry Officer; details of which DSL is working on the enquiry will be documented in the safeguarding concerns form.

All information related to enquiries, actions and reviews will be documented in the safeguarding referral form and stored in accordance with GDPR either in the student’s Databridge file or on the W Drive [non-student issues].

### 18. Distinguishing between terms

**An allegation:** This is a safeguarding concern relating to a member of staff (including agency staff), trustee, contractor, or volunteer working with Adults at Risk or another adult at risk as the source of the risk

**A concern about the quality of care or practice:** This can arise when someone has experienced or seen poor care

**A complaint:** This is an expression of dissatisfaction from someone using services or their representative

As noted above in 16.1 “The relationship of an adult safeguarding enquiry to other processes”, a single issue may fall in to more than one category. Where there is an adult

safeguarding concern, an adult safeguarding enquiry can be an effective means of coordinating the different strands.

### **19. Resolving disputes**

If disputes arise between organisations and professionals involved in adult safeguarding work attempts should be made to resolve them locally in the first instance. If this is not successful then the person in the SAM role should be consulted. If the matter is still not resolved, then reference should be made to Surrey Safeguarding Adults Board's dispute resolution arrangements.

When resolving disputes, the primacy of the interests of the adult at risk abuse or neglect should be taken in to account.

### **20. Taking actions following an adult safeguarding enquiry**

The Organisational Lead for Safeguarding Adults will be accountable for ensuring the completion of any actions that the local authority requires at the completion of an adult safeguarding enquiry. At Orpheus, this is the Principal.

### **21. Learning lessons from adult safeguarding enquiries**

Any learning from adult safeguarding enquiries will be captured through case review in the monthly designated safeguarding lead team meetings. This will be reported to the Trustee Board through the quarterly reporting schedule or sooner and disseminated to staff and volunteers through line management and/or supervision and team meetings and safeguarding updates at organisational training. Risk assessment and training will be updated as required.

### **22. Safeguarding Adults Reviews**

When Surrey Safeguarding Adults Board commissions a Safeguarding Adults Review (SAR) to which the Orpheus Centre is required to contribute, a Designated Safeguarding Lead will attend the meeting. The Designated Safeguarding Leads will coordinate the timely submission of any reports required for the review.

Any learning from a Safeguarding Adults Review (SAR) will be captured through case review in the monthly designated safeguarding lead team meetings. This will be reported to the Trustee Board, through the quarterly reporting schedule or sooner, and disseminated to staff and volunteers through line management and/or supervision and team meetings and safeguarding updates at organisational training. Risk assessment and training will be updated as required.

### **23. Governance, monitoring and quality assurance**

The Designated Safeguarding Leads have a monthly designated safeguarding lead team meeting with the chief executive. During the meetings, the safeguarding log and any safeguarding concerns and queries are reviewed for actions and updates.

The DSL will meet monthly with the trustee for safeguarding to share any relevant updates related to concerns [confidentially] or safeguarding team activity.

A report is provided to the Board of Trustees at least every three months (and more frequently with the Designated Safeguarding Trustee), including cumulative analysis of trends and patterns in safeguarding concerns or queries, any safeguarding concerns referred to the local authority, any safeguarding concerns have others had about the Orpheus Centre or its services, any contribution to adult safeguarding enquiries and any learning and practice implications from adult safeguarding enquires. Risk assessment, policies, procedures and training will be updated as required.

### **24. Safeguarding Adults Board membership**

The organisation is represented on the Board by a DSL, usually the Registered Manager.

The expectation is that the DSL or an assigned Deputy engages with the safeguarding adults board and contributes to discussions and initiatives, ensuring the organisation is aware of updates and developments within safeguarding. It is their responsibility to cascade this information to DSLs within Orpheus and to the wider college to ensure compliance and engagement.

### **25. References / Legal Framework**

**The Care Act 2014** sets out the duties and powers in law around adult safeguarding issues. It says the local authority is the lead agency on responding to adult safeguarding concerns and that Safeguarding Adults Boards (SABs) have the strategic lead for their area. For the Orpheus Centre, the Local Authority is Surrey. The Act places emphasis on the overall well-being of the adult at risk, rather than basic safety and protection. Enshrined in this Act are the key principles of Empowerment, Prevention, Proportionality, Protection, Partnership and Accountability.

**The Care and Support Statutory Guidance** within the Care Act 2014 gives detail about what must and should be done in relation to adult safeguarding issues. As it is statutory guidance, it must be followed unless you have good reason not to.

**Surrey Safeguarding Adults Board (SSAB) Policy and Procedures** give the framework for multiagency responses to adult safeguarding concerns.

**The Education Act 2002** requires that governing/trustee bodies of FE providers have a statutory duty to make arrangements to safeguard and promote the welfare of students and adults at risk.

The College takes account of guidance issued by the **Department for Education, the Disclosure and Barring Service** and other relevant bodies and Colleges.

**The Safeguarding Vulnerable Groups Act 2006** establishes procedures for checking an individual's criminal history to prevent unsuitable people from working with adult at risk. The disclosure and barring system defines the type of work that requires a check of the list, with regulated and controlled workplaces. It aims to prevent future abuses being carried out by someone with convictions of crimes that are abusive.

**The Health and Social Care Act 2012** protects adults within the health and social care system from being abused, including deprivation of liberty safeguards and provisions to prevent incorrect use of restraint.

**The Mental Capacity Act 2005** applies to anyone over the age of 16, and presumes adults have the capacity to make their own choices until it can be determined otherwise. This includes the ability to make unwise decisions.

**The Equality Act 2010** establishes nine protected characteristics: Age, Disability, Gender reassignment, Marriage and civil partnership, Pregnancy and maternity, Race, Religion or belief, Sex, Sexual Orientation. When assessing whether a person is vulnerable, there can't be any discrimination based around these characteristics – all choices, assessments, and decisions must be consistent and positive action will be taken, where proportionate, to deal with the disadvantages such people face. People with protected characteristics may be at increased risk of harm and this should be considered when assessing whether a person is vulnerable and at all stages of safeguarding practice.

**The Human Rights Act 1998** establishes everyone's basic rights in law. Article 2 protects the right to life; Article 3 affords freedom from degrading and inhumane treatment; Article 5 enshrines the right to liberty and security; Article 8 guarantees the right to a private life, family life, and a home life. A person is able to seek legal recourse or have someone go through the law on their behalf, if these rights are violated.

**The Data Protection Act 2018** brought into law the General Data Protection Regulation (GDPR). It establishes how and when information about a person may be processed, including information sharing.

**The Public Interest Disclosure Act 1998** provides process for workers in both the public and private sector to disclose usually private information to protect the public interest -

“whistleblowing”. Whistle-blowers are protected from victimisation and discrimination at their workplace.

**Keeping Children Safe in Education annual update** is statutory guidance from the Department for Education. Schools and colleges must have regard to it when carrying out their duties to safeguard and promote the welfare of students.

**The Female Genital Mutilation FGM Act 2003 Section 5B** introduces a mandatory reporting duty which requires regulated health and social care professionals and teachers in England and Wales to report “known” cases of FGM in under 18s which they identify in the course of their professional work to the police. The Duty came into force on 31st October 2015.

**Safeguarding adults: sharing information: SCIE** Published: January 2015 | last updated: January 2019; accessed 12.09.2025

<https://www.scie.org.uk/safeguarding/adults/practice/sharing-information>

**Sexual violence and sexual harassment between children in schools and colleges (2018)** highlights the advice to prevent and deal with sexual violence and sexual harassment between students.

**The Department for Education [DFE]** (September 2025) require an FE College to make DFE aware if it is the subject of an investigation by the local authority or the police. The college Designated Safeguarding Lead will provide the required information by email.

In the event of a sudden death of a student or adult at risk, the College has its own policy statement and procedures which provides clear lines of responsibility to ensure the correct notification and dissemination of information occurs (D1020 DCA Notification of Death).

**The Counter-Terrorism and Security Act 2015** places a duty on certain bodies, in the exercise of their functions, to have “due regard to the need to prevent people from being drawn into terrorism”.

**Appendix 1:**

**Additional Tasks of DSLs and their Deputies:**

| <b>DSL / Deputy DSL</b>                       | <b>TASK</b>  |
|---|--|
| Principal                                     | Ensure annual review and update of policy  |
| Principal                                     | Quarterly safeguarding report to Trustee committees and Board Meetings with training data  |
| Principal [May be delegated to DSL team]      | Face to Face safeguarding training delivery to staff and volunteers  |
| Registered Manager                            | Represent Orpheus at SSAB  |
| Chief Operating Officer                       | Certain funders require notification of safeguarding incidents: the Chief Operating Officer will review these requirements in their role as a Designated Safeguarding Lead |
| Assistant Principals                          | Support Student Safeguarding Representatives to attend part of safeguarding meetings   |
| Deputy Designated Safeguarding Leads/Officers | Delivery of learning and trends from safeguarding events at organisational training weeks  |



Appendix 2

**CONFIDENTIAL  
SAFEGUARDING RECORDING**

| Consent  |     |    |
|--|-----|----|
| Has the student given consent for information to be shared:  | YES | NO |
| If consent has NOT been given, you must still report your concerns to a member of the safeguarding team. |     |    |

| Student: Personal Information |  |
|-------------------------------|--|
| Name of student               |  |
| Date of Birth                 |  |
| Address                       |  |
| Date they started college     |  |
| Impairment                    |  |
| Emergency contact name        |  |
| Relationship                  |  |
| Phone                         |  |

| Safeguarding referral made by: |  |
|--------------------------------|--|
| Full Name:                     |  |
| Job title:                     |  |
| Contact details:               |  |

| Safeguarding referral made to: |                            |
|--------------------------------|----------------------------|
| Full Name:                     |                            |
| Job title:                     |                            |
| Contact details:               |                            |
| Date of referral:              |                            |
| Time of referral:              |                            |
| Immediate Actions agreed:      | Completed by who and date: |
| 1                              | 1                          |
| 2                              | 2                          |
| 3                              | 3                          |
| 4                              | 4                          |

| Background information |
|------------------------|
|                        |

| Safeguarding Incident Details |
|-------------------------------|
|                               |

| Witness Details if applicable |  |
|-------------------------------|--|
| Witness name                  |  |
| Date of Birth                 |  |
| Position/role/relationship    |  |
| Address                       |  |



**Policy update review:**

| <b>Date:</b> | <b>Updated by:</b> | <b>Section updated:</b> | <b>Update:</b>              |
|--------------|--------------------|-------------------------|-----------------------------|
| 16.01.2026   | CS                 | Policy reviewed         |                             |
| 16.01.2026   | CS                 | 3.6                     | Last sentence updated       |
| 16.01.2026   | CS                 | 3.7                     | Updated                     |
| 16.01.2026   | CS                 | 5.5                     | Last sentence updated       |
| 16.01.2026   | CS                 | 5.7                     | First paragraph new         |
| 16.01.2026   | CS                 | 11.1                    | Last sentence updated       |
| 16.01.2026   | CS                 | 11.3                    | Second bullet point updated |
| 16.01.2026   | CS                 | 14                      | Updated                     |