

## **Safeguarding Policy**

### **Introduction**

Safeguarding is a key governance priority for SIA and is a shared responsibility, across all parts of the organisation and at all levels to ensure a welcoming, inclusive, dignified and safe environment for those who come into contact with us.

SIA is committed to addressing safeguarding throughout all of our work and this Safeguarding policy applies to all employees, officers, consultants, self-employed contractors, casual workers, agency workers, volunteers and interns. It does not form part of any contract of employment or other contract to provide services, and we may amend it at any time.

### **Purpose**

The purpose of this policy is to protect people, particularly children, 'at risk' adults and service users, from any harm that may be caused due to their coming into contact with SIA. This includes harm arising from:

- The conduct of staff or personnel associated with SIA
- The design and implementation of SIA's services and activities

The policy lays out the commitments made by SIA and informs staff, volunteers and members of their responsibilities in relation to safeguarding. This policy does not cover:

- Sexual harassment in the workplace – this is dealt with under SIA's Harassment & Bullying Policy
- Safeguarding concerns in the wider community not perpetrated by SIA staff or associated personnel

### **Policy Statement**

SIA believes that everyone we encounter, regardless of age, gender identity, disability, sexual orientation, or ethnic origin has the right to be protected from all forms of harm, abuse, neglect and exploitation. SIA will not tolerate abuse and exploitation by staff or associated personnel.

Key areas of safeguarding have different policies and procedures associated with them (see Related Policies), all of which must be regularly reviewed.

SIA commits to addressing safeguarding throughout its work, through the three pillars of prevention, reporting and response. It will work in partnership with local/national agencies to put in place appropriate procedures for reporting, making referrals and accessing training and specialist support, as and when required.

## **PREVENTION**

### **Safe recruitment**

SIA will seek to recruit staff and volunteers using appropriate procedures, safeguards, and checks. It will take up references for all staff and volunteer posts prior to appointment. It will provide an induction programme for all new staff and volunteers and provide appropriate training and ongoing/refresher training for them at regular intervals to enable them to undertake their roles safely, effectively and confidently. The induction will make clear their obligation to implement this and other related policies and to learn about protection issues and their related responsibilities.

Where it should do so, SIA will use Disclosure & Barring Service (DBS) checks to help assess the suitability of a candidate for a particular volunteer or staff role, carrying out enhanced DBS checks when appropriate. SIA will assess any criminal record information that is disclosed in line with its data protection and equalities policies. SIA will regularly review its recruitment and other human resources procedures in response to changes in legislation and systems external to the Charity, e.g. DBS and barring list checks.

### **Safeguarding co-leads**

SIA's Safeguarding co-leads are the Head of services and the Head of people & operations. They have access to the appropriate training to support them in the role of Safeguarding co-leads, and will be available to all staff, volunteers and service users to speak to when they have any concerns, issues, or complaints regarding safety, well-being or conduct.

The Safeguarding co-leads will coordinate SIA's response to any safeguarding issues, including our contact with the appropriate local and national agencies. They will also contribute to appropriate policies at SIA, maintain records, keep confidentiality, adhere to and promote safeguarding within the Charity, and support or provide access to support for individuals suffering harm or abuse.

Relevant safeguarding information, policy and procedures can also be found on the SIA website for service users, and any enquiries can be sent directly to the Safeguarding co-leads.

### **Awareness of harm and abuse within the Charity**

All incidents of harm to any service user, staff member or volunteer will require an appropriate response to reduce risks and improve the Charity's services. Harm is caused by accidents, deliberate abuse (physical, psychological, sexual, emotional, financial), or factors such as bullying, prejudicial attitudes, or a failure to enable a person to participate in activities that are open to most of their peers. It can also include abuse via use of Information & Computer Technology facilities (e.g. grooming, bullying via the internet).

Deliberate acts of harm are abuses against the person. Those acts will incur disciplinary proceedings and require reports and referrals to social services, the police, other professional bodies, and the DBS if appropriate. If a criminal offence is thought to have been committed, the police will be informed.

### **Communication by the Charity about safeguarding**

All staff and volunteers have an obligation to learn about protection issues and their related responsibilities. SIA will communicate this Policy to all of its staff, trustees, volunteers, service users and their families/carers and will also make it available to the public. The appointed Safeguarding co-leads will be responsible for communicating this Policy to SIA's Board of Trustees.

To encourage everyone involved in SIA to understand that safeguarding is the business of everyone, and to assist all staff and volunteers to learn about protection issues and their related responsibilities, SIA will hold meetings open to all staff and volunteers about safeguarding and provide other opportunities for discussion about issues and concerns, policy and procedures to reflect, review and continue to learn and improve in relation to SIA's safeguarding responsibilities. SIA have a safeguarding working group that meet once a month, the group consists of various members of the organisation representing our people and continually look at ways to improve our processes and mitigate any safeguarding risks.

### **Implementation of this Policy**

This Policy must be followed by all staff and volunteers of the Charity and must be promoted by all of its trustees and senior staff. Failure to follow it will be treated as a very serious matter.

## **REPORTING**

### **Reports of possible or actual harm**

SIA supports and encourages all staff and volunteers to promptly speak up and contact the Safeguarding co-leads where there is a concern (i.e. a worry, issue or doubt about practice or about treatment of a service user or colleague), or a disclosure (i.e. information about a person at risk of or suffering from significant harm) or an allegation of an incident or a possibility that a staff member or volunteer has caused harm or could cause harm to a person for whom they are providing support.

Staff or volunteers can report, and have a responsibility to report, something that they become aware of if they suspect or discover that it is not right or is illegal, or if it appears to them that someone at work is neglecting their duties, putting someone's health and safety in danger or covering up wrongdoing. They may become aware of any of these things from what they see or hear or from something another person has disclosed to them.

In the first instance the staff member or volunteer making a report should speak to their line manager/supervisor who will then liaise with the Safeguarding co-leads. Where the report implicates the line manager/supervisor, the staff member or volunteer making the report should instead speak directly to the Safeguarding co-leads. Where the report implicates a trustee, the staff member or volunteer making the report should instead speak directly to the Chief Executive Officer, who will inform the most appropriate Trustee.

SIA prefers that anyone should use internal processes whenever possible to make a report as above, but this does not prevent them from making a report or referral in their own right as a private individual to statutory agencies such as social services or the police. SIA cannot promise confidentiality to staff or volunteers making an internal report where it has to be shared with any statutory agencies. SIA also supports its staff or volunteers to raise concerns or to disclose information that they believe shows malpractice via processes set down in its Whistleblowing policy.

### **Safeguarding co-leads action**

Where there is risk of significant harm to any staff member, volunteer or service user, the Safeguarding co-leads have the power to act as necessary and, in particular, as follows:

- log all conversations regarding the issue
- sign and request signatures on reports and statements which are recorded and uploaded on SIA's CRM
- confidentially seek advice from expert sources
- share concerns (with consent where required and appropriate) internally with senior staff / Chair of the Board of trustees
- share concerns and coordinate referrals to external agencies such as Social Services or the Police, as appropriate to the circumstances
- make a referral to the DBS regarding staff or volunteers in Regulated Activity whose conduct is harmful to service users and refer them to DBS when they are removed from Regulated Activity.

## Responses to Safeguarding Reports and Confidentiality

Safeguarding reports and subsequent responses will be dealt with in accordance with the following procedures. All reports and logs will be kept securely and confidentially in accordance with SIA's Data Protection Policy and Confidentiality Statement until or unless it is necessary to share this material with the agencies named above. Information will be shared on a 'need-to-know' basis only.

### Receiving Reports

Reports can reach the organisation through various routes. This may be in a structured format such as a letter, email, text, or message received via SIA's social media'. It may also be in the form of informal discussion or rumor. If a staff member hears something in an informal discussion or chat that they think is a safeguarding concern, they should report this to the appropriate staff member in their organisation.

If a safeguarding concern is disclosed directly to a member of staff or volunteer, the person receiving the report should bear the following in mind:

- Listen
- Empathise with the person
- Ask who, when, where, how, what **but not why**
- Repeat/ check your understanding of the situation
- Report to the appropriate staff member (see below)

The person receiving the report should then document the following information using the cause for concern form:

- Name of person making report
- Name(s) of alleged individual(s) of safeguarding incident(s) if different from above
- Name(s) of alleged perpetrator(s)
- Description of incident(s)
- Dates(s), times(s) and location(s) of incident

They should then forward this information to their line manager or supervisor within 24 hours, who should liaise with the designated Safeguarding co-leads as soon as is practicably possible. Where the report involves the line manager or supervisor, the report should be sent directly to the designated Safeguarding co-leads.

Due to the sensitive nature of safeguarding concerns, confidentiality must be maintained during all stages of the reporting process and information shared on a limited 'need to know' basis only. This includes senior management who might otherwise be appraised of a serious incident.

If the reporting staff member or volunteer is not satisfied that the organisation is appropriately addressing the matter, they have a right to escalate it, either up the management line, to the Board of Trustees, or to an external statutory body. They will be protected against any negative repercussions because of this report (see SIA's Complaints Policy and Whistleblowing Policy).

## 1. Assessing how to proceed with the report

The Safeguarding co-leads will determine whether it is possible to take a report forward by reviewing whether:

- The reported incident(s) represents a breach of safeguarding policy
- There is sufficient information to follow up this report

They will also check whether separate policies and procedures are in place for the type of concern the report relates to (for example workplace sexual harassment is dealt with through SIA's Harassment & Bullying policy). If there isn't a policy for the type of report that has been made, they should follow these procedures:

- If the reported incident does not represent a breach of Safeguarding Policy but represents a safeguarding risk to others (such as a child safeguarding incident), the report should be referred through the appropriate channels (e.g., local authorities) if it is safe to do so.
- If there is insufficient information to follow up the report and no way to ascertain this information (for example if the person making the report did not leave contact details), the report should be filed in case it can be of use in the future and look at any wider lesson learning we can take forward.
- If the report raises any concerns relating to children under the age of 18, the Safeguarding co-leads should seek expert advice immediately, sourcing this externally if necessary.
- If at any point in the process of responding to the report (for example during an investigation) it becomes apparent that anyone involved is a child under the age of 18, the Safeguarding co-leads should seek expert advice before proceeding any further, sourcing this externally if necessary.
- If a decision is made to take the report forward in-house, the Safeguarding co-leads must ensure that there is relevant expertise and capacity to manage a safeguarding case or should seek immediate assistance through external capacity if necessary.
- They will also clarify what, how and with whom information will be shared relating to this case, recognising that information needs will be different for each stakeholder. Confidentiality should be always maintained, and information shared on a need-to-know basis only.
- They will check SIA's obligations on informing relevant bodies when receiving a safeguarding report. These include (but are not limited to):
  - Funding organisation's
  - Umbrella bodies/networks
  - Statutory bodies (such as the Charity Commission in the UK)

Some of these bodies may require SIA to inform them when they receive a report, others may require information on completion of the case, or annual top-line information on cases. When submitting information to any of these bodies, the confidentiality implications must be thought through very carefully.

## **2. Appoint roles and responsibilities for in-house case management**

A Decision Maker must be appointed for the case and should be someone at Head level or above not implicated or involved in the case in any way. If the report alleges a serious safeguarding violation, a case conference should be held and should include:

- Decision Maker
- Person who received the report (i.e., the manager or supervisor)
- The designated Safeguarding co-leads

The case conference should decide the next steps to take, including any protection concerns and support needs for the affected individual where needed/requested (NB: all decision-making on support should, insofar as is possible, be led by the affected individual).

The Safeguarding co-leads should report all safeguarding cases to SIA Directors and keep them up to date throughout the process.

## **3. Assess any protection or security risks to stakeholders**

For reports relating to serious incidents:

- Undertake an immediate risk assessment to determine whether there are any current or potential risks to any stakeholders involved in the case and develop a mitigation plan if required.
- Continue to update the risk assessment and plan on a regular basis throughout and after the case as required.

## **4. Decide on next steps**

The Decision Maker decides the next steps. These could be (but are not limited to):

- No further action (for example if there is insufficient information to follow up, or the report refers to incidents outside the organisation's remit)
- Investigation is required to gather further information
- Immediate disciplinary action if no further information needed
- Referral to relevant authorities

If the report concerns associated personnel (for example contractors, consultants, or suppliers), the decision-making process will be different. Although associated personnel are not staff members, we have a duty of care to protect anyone who meets any aspect of our activities from harm.

We cannot follow disciplinary processes with individuals outside our organisation, however decisions may be made for example to terminate a contract with a supplier based on the actions of their staff. If an investigation is required and SIA does not have internal capacity, it should identify external resources to conduct the investigation and determine which budget this will be covered by.

## **5. Manage investigation if required**

Refer to the organisation's procedures for investigating breaches of policy. If these do not cover safeguarding investigations, use external guidelines for investigating safeguarding reports, such as the referring to the local authority who will have their own guidelines and process.

## **6. Make decision on outcome of investigation report**

The Decision Maker decides based on the information provided in the investigation report. Where the Subject of Concern is a member of staff, decisions should be made in accordance with existing policies and procedures for staff misconduct.

If at this or any stage in the process criminal activity is suspected, the case should be referred to the relevant authorities (the police). In this case, the Decision Maker, together with other senior staff, will need to decide how best to proceed. This decision should be made bearing in mind a risk assessment of potential protection risks to all concerned, including the affected individual and the Subject of Concern.

### **Conclude the case**

Document all decisions made resulting from the case clearly and confidentially, storing all information relating to the case in accordance with SIA policy and data protection law. Record anonymized data relating to the case to feed into organisational reporting requirements (e.g., serious incident reporting to the Board of Trustees, safeguarding reporting to donors) and to feed into learning for dealing with future cases.

The Safeguarding co-leads should report the outcome of the case to SIA Directors.

Data Protection is not a barrier to sharing concerns about a child or an individual at risk. You should make a note in the safeguarding report of any express wish not to share the information but not let this prevent you from sharing. If you have any concerns about information sharing, contact the NSPCC helpline for advice. For guidance on information sharing, see:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/721581/Information\\_sharing\\_advice\\_practitioners\\_safeguarding\\_services.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf).

### **Lawful Basis**

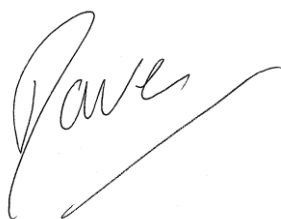
When a safeguarding incident takes place, it may be difficult to gather consent because the priority is to ensure safety of the individuals. If there's a risk of harm to a child or vulnerable adult, their safety takes priority over confidentiality.

In such circumstances mentioned above, in order to comply with our duty of care and safeguarding, our organisation would process information raising safeguarding concerns and share them with relevant authorities when required, based on the lawful basis of Vital Interest, or legitimate interest, read with substantial public interest and conditions from the legislation (e.g. Safeguarding of children and of individuals at risk / Safeguarding of economic well-being of certain individuals)

### **Data Subject Rights**

Data subjects' rights and other UK GDPR provisions may be restricted when concerning personal data processed for safeguarding incidents. Examples of exemptions that might apply in the circumstances of safeguarding are defined under the UK GDPR such as the Crime and Taxation, the Rights of Others, and Child Abuse Data.

<b>Policy Owner (responsibility)</b>	Safeguarding co-leads – Head of Services, and the Head of people & operations
<b>Review schedule</b>	Annual
<b>Date of last review</b>	December 2025
<b>Date of next review</b>	December 2026
<b>Approval level</b>	SLT (if significant changes)
<b>Related policies</b>	Child Protection, Complaints, Communications, Data Protection, Equality & Diversity, Harassment & Bullying, relevant Health & Safety Policies, Wellbeing, Whistleblowing, Adult Safeguarding policy



**Dave Bracher**  
Head of people & operations  
December 2025

## Appendix One: Safeguarding Process Flow

