

Safeguarding Adults and Children's Policy

Purpose and Scope

This policy is for staff, volunteers, Associates and Board of Trustee members of Healthwatch Bristol, North Somerset and South Gloucestershire (BNSSG).

We will work together to prevent and minimise abuse, or self-neglect and protect vulnerable adults, children, and young people from harm.

This policy applies to all individuals involved with the work of Healthwatch across BNSSG including staff, volunteers, associates and Board of Trustee members.

The fundamental principle that underpins this policy, applying to all Healthwatch activities, is that all people have the right to live their lives free from violence, fear, and abuse.

Our Process

If we know or suspect that a person is being abused or at risk of abuse, or of self-neglect, we will do something about it. We also ensure our response is recorded here; Shared online folder Safeguarding [Safeguarding record sheet 2024.docx](#)

Responsibilities

Healthwatch BNSSG have put in place the following structures:

- A Designated Safeguarding Lead (DSL) Chief Officer, and a Designated Safeguarding Officer (DSO) Engagement Programme Manager. They co-ordinate the roll out of operational best practice across the organisation. Both the DSL and DSO are the main contact points for staff, volunteers and associates and are responsible for decisions regarding escalations to Local Authorities.
- Our Safeguarding Champion Board member provides oversight and monthly updates on the Board agenda.
- Safeguarding training is mandatory to ensure staff, volunteers and the Board members can identify signs and symptoms of abuse. Training is given at induction and in refresher courses.
- We ensure all staff, volunteers and associates are familiar with procedures to report concerns internally to the DSL and DSO, unless an emergency 999 call is needed if there is immediate concern about someone's safety or their own.
- We ensure there are consistent methods used by staff to keep records of safeguarding concerns.

- Contact numbers of the Designated Safeguarding Lead (DSL) and Designated Safeguarding Officers (DSO) are displayed on the staff room notice board and communicated internally.
- We review and update this policy every two years.
- We offer an ear to staff and volunteers around the difficult life stories we hear and how they make us feel. This is provided by two staff members on request.

Information Sharing

Healthwatch will justify with the public, why they are sharing information with another agency. However we have a legal basis for sharing personal information under our 'public duty' function. This negates a need to adhere to data protection and to maintain confidentiality where;

- safeguarding concerns are identified.
- It is believed that a person could cause danger to themselves or to others.
- there is suspicion of abuse or knowledge of abuse to self or others.
- The person gives information which indicates that a crime has been committed.
- disclosure is required by law, for example, by the police.
- a person is felt to lack the mental capacity to decide.
- the person gives information which indicates a terrorist threat.

Such a disclosure will be made and recorded in line with current data protection legislation.

This policy sets out the aims and responsibilities of Healthwatch and it is designed to help Healthwatch recognise and respond to cases of abuse, to:

- Increase awareness of issues concerning abuse
- Reduce and prevent incidences of abuse.
- Respond quickly and sensitively to suspicions or disclosed incidents of abuse or self-neglect

Healthwatch will work in partnership with the Safeguarding Adults and Children's Boards and provider agencies in Bristol, North Somerset, and South Gloucestershire to ensure our staff team and volunteers understand and comply with this policy relating to vulnerable adults and children.

Additional reading and a process chart is provided. [Safeguarding Process chart 2024.pptx](#). Staff are expected to familiarise themselves with the information.

Healthwatch's Board of Trustees Safeguarding Champion and/or Chief Officer is represented on BNSSG Safeguarding Boards. The Chief Officer attends the Safeguarding All Age Providers Professional Network BNSSG.

Principles

Principles underpin all safeguarding work:

Empowerment – adults are encouraged to make their own decisions and are provided with appropriate support and information.

Prevention – strategies are developed to prevent abuse and neglect that promote resilience and self-determination.

Proportionate – a proportionate and least intrusive response is made balanced with the level of risk.

Protection – adults are offered ways of protecting themselves and there is a coordinated response to adult safeguarding.

Partnerships – local solutions are sought through services working together within their communities.

Accountable – accountability and transparency when we deliver a safeguarding escalation.

Healthwatch BNSSG supports staff, volunteers and Board members to have knowledge where appropriate that supports safeguarding awareness. These include;

- Recognising signs and symptoms of abuse
- Policy and legislative context
- Exploitation, including modern day slavery and county lines
- Domestic abuse, including awareness of female as perpetrator
- Elder abuse, financial, family care, neglect, and self-neglect
- Female genital mutilation, so called honour-based violence and forced marriage
- Prevent (relating to acts of terrorism)
- Spiritual, cultural, and religious beliefs
- Peer on peer abuse, knife crime
- Substance misuse
- Suicide and self-harm

Legislative Framework

Our children centred approach;

Supported by the Childrens Act 2004 and The Children and Social Work Act 2017 concerning Looked After Children and Care Leavers. We follow statutory guidance relating to multi-agency working in Working Together to Safeguard Children. This recognises the Domestic Abuse Act 2021 to support a child-centered approach to Safeguarding.

https://assets.publishing.service.gov.uk/media/65cb4349a7ded0000c79e4e1/Working_together_to_safeguard_children_2023_-_statutory_guidance.pdf

Fears about sharing information will not prevent us from being partners with the Local Authority or Police. This guidance requires a clear set of processes to follow where there are concerns about the welfare or safety of a child. In these circumstances our statutory functions allow us to share information without obtaining consent, using the legal basis of 'public duty'.

The Equality Act 2010

The Equality Act 2010 puts a responsibility on public authorities to have due regard to the need to eliminate discrimination and promote equality of opportunity. This applies to the process of identification of need and risk faced by the individual child and the process of assessment. No child or group of children must be treated any less favourably than others in being able to access effective services which meet their needs.

The United Nations Convention on the Rights of the Child (UNCRC)

This international agreement protects the rights of and the development of services to children. The UK Government ratified the UNCRC in 1991 and, by doing so, recognises children's rights to express and receive information.

Where Healthwatch ask children and young people to share their views on the national and local health and social care system, we will not publish person-identifying information. Prior to using photographs or case studies we will abide by Healthwatch England age guidelines to gain consent.

Feedback from children

We will invite children aged thirteen plus to make recommendations about the services and assistance they need/and or are available to them. Younger age groups can provide feedback with the consent of an adult parent or carer. We will ensure children have access to independent advice and support (for example, through advocates or children's rights officers) to be able to express their views and influence decision-making. When considering issues arising in relation to identity, diversity, culture, faith, sexual orientation, language, disability, low confidence, and trust, Healthwatch will, where appropriate, gather feedback from children.

Our adult-centred approach:

Supported by the legal framework of the Care Act 2014 which places a duty on partners to act when they suspect an adult is experiencing, or at risk of experiencing abuse, neglect, or self-neglect and is unable to protect themselves. This cooperation is carried out. The Act places a duty on all partner agencies to co-operate by sharing information and contributing to enquiries.

The Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards

provide a statutory framework to empower and protect people who may lack the capacity to make decisions for themselves and establish a framework for making decisions on their behalf. It applies to anyone over sixteen who is unable to make some or all decisions for themselves. All decisions taken in the adult safeguarding process must comply with the Act.

Temporary Vulnerability

Healthwatch BNSSG notes that under the 'Protection of Freedoms Act 2012' the term 'vulnerable' may be applied to adults for periods of time and for specific situations. An adult in hospital 'may' be vulnerable for the period of their recovery; or an adult with dementia 'may' only be vulnerable regarding a specific area of their life.

Safe Recruitment

Recruitment and selection of Healthwatch staff, volunteers, associates and Board of Trustee members includes clear statements relating to Healthwatch's commitment to safeguarding. If staff or volunteers participate in Enter and View work a standard DBS check is required. This is made clear at recruitment and is included in the Staff Handbook and Volunteer handbook. Healthwatch keeps a record of the DBS reference number and the date the check was completed.

Complaints or Allegations Against Professionals

Healthwatch recognises its duty to report concerns or allegations against its personnel (paid or unpaid) within the organisation or a professional from another organisation. Healthwatch has a procedure where complaints can be raised including allegations of abuse against a member of Healthwatch staff, board member, volunteer, or authorised representative. This will be reported to the Chair of the Board of Trustees who will allocate someone within the Board to take this further.

As outlined in the HW BNSSG Data Asset Register, if allegations are made about a member of staff, volunteer or trustee, the staff record will be retained until they reach normal retirement age or for 10 years if that is longer.

Training

Staff are required to attend safeguarding training at a level commensurate with their roles and updated every 2 years. The DSL is responsible for rolling out relevant BNSSG safeguarding policy changes to the Healthwatch staff team, who are required to keep up to date with safeguarding procedures.

Safeguarding Adults and Children training is provided for volunteers at induction with updates provided so they can review and refresh their working practice every two years. To ensure staff are up to date, safeguarding is a mandatory discussion point at staff annual appraisal sessions.

Reporting Concerns

All safeguarding 'records' and related information will be kept for 10 years. If the record relates to children and young people, the record must be kept until they are 21 years old.

All escalations regarding safeguarding will be made known to the Healthwatch Board in regular briefings.

Date Approved:

Signed.....

(Chair of the Healthwatch Board of Directors)

Reviewed:	Actual review	notes	Next review
10.03.2022	12 th March 2024		March 2026

Policy acknowledged (Staff/Volunteer)

Signature

Date