



Sutton and Merton Human Resources Multi Agency Safeguarding Good Practice for HR Practitioners

Date: August 2015



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Version Control

The master copy of the Good Practice Guidance is held by the London Borough of Sutton, HR Business Partnership Team.

Version	Date
Original issue	August 2012
Re-issued following review	August 2015

Foreword

Across Sutton and Merton we are committed to safeguarding children, young people and vulnerable adults from risk of harm. There is a collective responsibility for safeguarding within an organisation and therefore 'safeguarding is everyone's business'. Human Resources (HR) has a key role, working with operational managers in ensuring that the organisational employment procedures and processes are adopted and implemented in terms of safer recruitment practices, creating a 'safe' environment and taking action where allegations are made against staff.

This safeguarding good practice has been developed by the HR Multi Agency Safeguarding Group in conjunction with the Sutton Safeguarding Adults Board, Merton Vulnerable Adults Strategy Team, Sutton Local Children Safeguarding Board, and Merton Children Safeguarding Board.

This good practice is for HR practitioners working with frontline managers in organisations across Sutton and Merton that work with children, young people and adults at risk of harm. Many of the organisations already have in place good recruitment, supervision and how to manage allegations, guidelines, processes and practice and we hope that they are similar to these, or they will adopt this good practice as their own.

This good practice is supported by the Safeguarding Boards across both Sutton and Merton.



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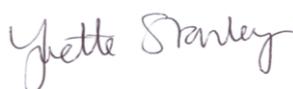
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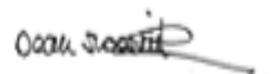
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1.0 Introduction

Aims

- 1.1 The HR Multi Agency Good Practice document has been developed to support HR practitioners in their safeguarding role working with operational managers, and to ensure that unsuitable people do not work or volunteer to work with children or adults at risk of harm, and to ensure that the employer fulfils their responsibilities at the commencement, during and at the end of the employment relationship.
- 1.2 The good practice document has been developed by members of the HR Multi Agency group representing the London Borough's of Sutton and Merton, South West London and St George's Mental Health Trust, Epsom and St Helier NHS Trust, Carshalton College, Orchard Hill College, Sutton Housing Partnership, The Royal Marsden Hospital, The London Ambulance NHS Trust, the Private Voluntary and Independent Sector with support from the safeguarding leads and development officers across Sutton and Merton.

Local Implementation

- 1.3 Each HR team within the multi-agency community is asked to adopt this good practice guidance, in order to work towards a consistent approach in safeguarding HR practice across both Sutton and Merton. However, some HR teams may want to adapt some aspects in order to meet their local arrangements.
- 1.4 Where there are contracting arrangements in place for 3rd party suppliers it is recommended as good practice that local arrangements regarding the safer recruitment, management and termination of workers are also reflected in contracts.

HR Practitioners

- 1.5 As a HR practitioner you must ensure that you understand how and why safeguarding is your business and how this links to your work and your wider responsibilities as an employee within the organisation where you work and the community that you live in. There are 4 key elements that you need to ensure you do:
 - Attend safeguarding training (as determined by your organisation including refresher training);
 - Understand what you need to do to raise a safeguarding alert;
 - Know who your organisational safeguarding lead is;

- Understand how safeguarding links into your job role.

Review

- 1.5 The good practice outlined here is the first step in improving HR input into the safeguarding of vulnerable adults, children and young people and enabling HR practitioners to work with operational managers. The document will be reviewed on an annual basis, by members of the HR Multi Agency Group, with an update into the Sutton and Merton safeguarding boards.

2.0 Creating and Maintaining a Safer Culture

Introduction

- 2.1 Safeguarding children, young people and vulnerable adults is everyone's responsibility. Professionals in all agencies that work with children, young people and/or vulnerable adults share a commitment to safeguard and promote their welfare and this is underpinned by statutory duties.
- 2.2 Making sure that safeguarding features highly in all employment processes, policies, procedures and practice sends a clear message to applicants, existing staff and volunteers, and helps to deter unsuitable individuals from becoming employed.
- 2.3 It is important that all staff have appropriate induction, probation, training, supervision and appraisal to ensure that they understand their roles and responsibilities and are confident about carrying them out. The diagram below is a helpful reminder that safeguarding should run as a thread throughout the work life cycle.



2.4 Workers, volunteers, children, young people and their parents/carers, vulnerable adults and their carers, or members of the general public need to feel confident that they can raise issues or concerns and that they will be listened to and taken seriously. This can be achieved by maintaining an ethos of safeguarding and promoting the welfare of children, young people and vulnerable adults and protecting staff, supported by:

- Establishing and maintaining a robust recruitment and vetting process including obtaining enhanced Disclosure and Barring Scheme (DBS) checks
- A clear written statement of the standards of behaviour, understood by all;
- Provision of safeguarding policies, known and easily accessible to all staff;
- Ensuring staff induction includes advice and instruction on the individual's professional responsibilities in relation to promoting the welfare of children, young people and vulnerable adults, and safeguarding them from harm;
- Appropriate use of probationary periods and probationary support;
- Ensuring staff receive regular supervision, sufficient to support staff to recognise children, young people and vulnerable adults in need of support and/or safeguarding, as appropriate to their responsibilities in the organisation;
- Regular and effective appraisal and performance management in accordance with requirements and the organisation's policy and procedures;
- Provision of ongoing Child Protection and Vulnerable Adults training and any other relevant training appropriate to the role;
- Clear procedures for managing allegations against staff;
- Referral to professional/regulatory body/DBS where appropriate;
- A clear reporting system if a child, young person or vulnerable adult or other person has concerns;
- Provision of relevant policies and procedures e.g. safeguarding, disciplinary, capability, professional registration and whistle blowing;

- A clear statement of workforce requirements within commissioned contracts for 3rd party providers based on those requirements that are in place for the directly contracted workforce e.g. agency provider, health, social care or education provider, or those providers that may have contact with vulnerable groups;
- Maintenance of accurate records of decision making and actions;
- A commitment to safeguarding and an ongoing culture of vigilance;
- A process of monitoring, feedback and review of safeguarding to improve the delivery and/or commissioning of services;
- Effective multi-agency working to promote welfare and safeguarding including information sharing;
- Effective arrangements for internal and external challenge, conflict resolution and complaint in relation to delivery of services; and
- Effective sharing of information with third party parties such as professional bodies, DBS and the police.

Induction and probation

2.5 Regardless of role or previous experience of working with children, young people and vulnerable adults, there should be a plan for induction and probation programme for all staff and volunteers newly appointed. The purpose of induction and probation is to:

- Provide training and information about the organisation's policies and procedures;
- Support individuals in a way that is appropriate for the role for which they have been engaged;
- Explain fully their role and responsibilities and confirm the standard of conduct and behaviour expected (including professional standards expected, if applicable);
- Explain who they are accountable to within the organisation and externally, within partner agencies, in relation to safeguarding;
- Provide information about safe practice and the arrangements in place to give support;
- Provide opportunities for a new member of staff or volunteer to discuss any issues of concern about their role or responsibilities;

- Enable the line manager or mentor to recognise any concerns or issues about the individual's ability or suitability at the outset and address them immediately.

2.6 The content and nature of the induction and probation process will vary according to the role and previous experience of the new member of staff or volunteer. However, from a safeguarding perspective, the induction and probation programme should include information about, and written statements of:

- Policies and procedures in relation to safeguarding and promoting welfare e.g. protection of children, young people and vulnerable adults, anti-bullying, anti-racism, physical intervention or restraint, intimate care, health and safety, internet safety and any local safeguarding procedures;
- Safe practice and the standards of conduct and behaviour expected of staff, children, young people and vulnerable adults and other service users in the organisation;
- How and with whom any concerns should be raised;
- Other relevant procedures e.g. disciplinary, conflict resolution, whistle blowing, Corporate or Professional Standards of Behaviour and/or Conduct;
- Child protection and vulnerable adults training appropriate to the role should also be provided to all new staff and volunteers as a mandatory element of the induction and probation programme;

2.7 Managers should ensure that staff are adequately and appropriately supervised and have ready access to advice, expertise and management support in all matters relating to safeguarding. Regular review meetings between the appointee and responsible manager should be convened, by the manager, throughout the induction period.

Supervision and Support

2.8 There should be a written policy that defines the levels of supervision for staff within organisations that have operational responsibility for the protection of children, young people and vulnerable adults.

2.9 Managers should ensure that staff are adequately and appropriately supervised and that they are clear what advice, expertise and support is available and how to access this.

2.10 Supervision should form part of day-to-day support which should also include systems and procedures for:

- Managing workloads;
 - Managing sharing and reporting individual and aggregated client information;
 - Easy access for staff to advice, expertise and management support (including recognition of need for additional support in particular cases or circumstances);
 - Risk assessment and appropriate measures taken to safeguard staff from violence and harassment, from clients and staff;
 - Maintaining quality standards through regular audits of cases that involve children, young people and vulnerable adults;
 - Advising staff, contractors or clients how to complain or blow the whistle;
 - Effective staff appraisal;
 - Managing poor practice, performance, misconduct, or negligence;
- 2.11 Supervision policy and practice must maximise staff safety and remain alert to the possibility that some staff may be anxious about their personal safety and yet reluctant to acknowledge their concern. There are occasions when a risk assessment should be undertaken regarding employee safety, this must include their emotional well-being as well as any physical risk.
- 2.12 Such supervision should ensure that protection cases are regularly discussed, and the outcome of these discussions recorded and signed by both supervisor and supervisee. Copies should be held by both the manager and the member of staff. Managers should ensure that they are handling an appropriate number of direct reports to ensure that each supervisee is receiving an adequate level of support.

Training

- 2.13 Organisations are responsible for ensuring that their staff are competent and confident in carrying out their responsibilities for safeguarding and promoting the welfare of children, young people and vulnerable adults.
- 2.14 All organisations have a responsibility to identify adequate resources and support for single and multi-agency training as appropriate, by allocating time and releasing staff to complete training effectively. Training programmes should be tailored to address the identified needs of staff at different levels within the organisation and stages of development. All training in safeguarding should create an ethos which values working collaboratively with others, respects diversity, promotes equality, is client centred and promotes the participation of children, young people, vulnerable adults and families in

the safeguarding processes. Inter and multi-agency work is an essential feature of all training in safeguarding.

Sutton Local Children Safeguarding Board Training Programme

<http://www.suttonlscb.org.uk/training.php>

Sutton Adults Safeguarding Training

Contact: chris.lewis@sutton.gov.uk

Merton Safeguarding Children Board Training Programme

<http://www.merton.gov.uk/health-social-care/children-family-health-social-care/lscb/lscbtraining.htm>

Merton – Vulnerable Adults Strategy Team

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- 2.15 The purpose of multi agency training is to help develop and achieve better outcomes for children, young people and vulnerable adults by:
- A shared understanding of the tasks, processes, principles, and roles and responsibilities outlined in the national guidance and local arrangements for safeguarding;
 - More effective and integrated working between agencies;
 - Improved communications between professionals including a common understanding of key terms, definitions, and thresholds for action;
 - Effective working relationships, including an ability to work in multidisciplinary teams, sound decision making based on information sharing, thorough assessment, and critical analysis.
- 2.16 The Common Core of Skills and Knowledge for the Children’s Workforce sets out six areas of expertise that everyone working with children, young people and families, including those who work as volunteers, should be able to demonstrate. (<http://www.childrensworkforcematters.org.uk/common-core>). For Adults there is the Safeguarding Competency Framework developed in line with the work undertaken by Bournemouth University.
- 2.17 The detailed training should be specified locally. The content should reflect the principles, values and processes set out in the relevant guidance for the sector and should be regularly reviewed.

Whistle Blowing

2.18 Staff should know what the organisational procedures are for Whistle Blowing. Whistle blowing is where there is a concern that an employee has that is in the public interest. Employees are protected by the law if they report matters that are:

- A criminal offence;
- Someone's health and safety is in danger;
- Risk and actual damage to the environment;
- A miscarriage of justice;
- The organisation is breaking the law; and
- There is a belief that someone is covering up a wrong doing.

The national work on the Francis Report into Mid Staffordshire NHS Trust concluded that whilst staff were aware of the poor care they were afraid to raise their concerns. Employee's who raise concerns at work in good faith and in the right way are protected by the law. This outcome can apply to any organisation where there is responsibility for vulnerable children, young people and adults. The report has re-emphasised the need for staff to take responsibility and report their concerns.

Disqualification by Association

2.19 Statutory guidance was issued by the Government in original in October 2014 and updated in February 2015 (see link). This guidance is targeted at local authorities, governing bodies of maintained schools (including maintained nurseries), proprietors of non-maintained schools and independent schools (including academies, free schools and alternative provision academies) and management committees of pupil referral units.

www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006

3.0 Safer Recruitment

Appointment of employees:

3.1 Safer recruitment is a set of principles and practices that should be embedded in the organisation's processes when appointing workers and volunteers who work with children or vulnerable adults.

- 3.2 Key guidance documents setting out the practice relating to the appointment of workers working with children and young people can be found using the links below. These principles can be adapted for those working with vulnerable adults and in different settings.

Recruiting Safely – Safer Recruitment Guidance as outlined in Part 3 of Keeping Children Safe in Education (Department of Health statutory guidance - April 2014):

<https://www.gov.uk/government/publications/keeping-children-safe-in-education>

- 3.3 The principles set out in these documents should be considered as the **MINIMUM** standards that should be followed for workers engaged to work with children, young people, and vulnerable adults and **BEST PRACTICE** for all other appointments.
- 3.4 The guidance applies to everyone engaged in a role (paid or volunteer) within an organisation working with children, young people or vulnerable adults, who is likely to be seen by the children/vulnerable adult as a safe, responsible and trustworthy adult.
- 3.5 There are also people who regularly work in a setting, such as a children’s centre or youth and community project or day centre or residential unit, where children, young people or vulnerable adults are present, whose role is a support function (e.g. administration, catering, caretaking).

12 Steps to Safer Recruitment

- 3.6 The 12 steps below provide an overview of what needs to be covered during the safer recruitment process.

Before you release your post ...	
1	Ensure that you have an up to date recruitment and selection policy that describes the process and roles before you begin.
2	Ensure that your organisation has a safeguarding policy and that a statement about the organisation’s commitment to safeguarding is included in all recruitment and selection materials.
3	Ensure that you have an up to date job description and person specification for the role(s) you wish to recruit to, that have been agreed with the recruiting manager.
4	Ensure that you have an appropriate advertisement prepared that contains all necessary information about the role, timetable for recruitment and your commitment to safeguarding.

5	Ensure that you have compiled a suitable candidate information pack containing all the required information about the organisation, role, recruitment timetable, safeguarding policy/statement and application form. It would be clear that CVs on their own would not normally be accepted.
Before you interview...	
6	Ensure that each application received is scrutinised in a systematic way by the shortlisting panel in order to agree your shortlist before sending invitations to interview
7	Ensure that any appropriate checks have been undertaken on your shortlisted candidates.
8	Ensure that all shortlisted candidates receive the same letter of invitation to interview, supplying them with all necessary information.
Before you select your preferred candidate...	
9	Ensure that a face-to-face interview is conducted for ALL shortlisted candidates based on an objective assessment of the candidate's ability to meet the person specification and job description.
10	Ensure that all specific questions designed to gain required information about each candidate's suitability have been asked, including those needed to address any gaps in information supplied in the application form (e.g. employment history) and ensure that there is a record of discussion, which is retained with the application form.
Before you appoint...	
11	Ensure that you are able to make a confident selection of a preferred candidate based upon their demonstration of suitability for the role
12	Ensure that your preferred candidate is informed that the offer of employment (including volunteer positions) is conditional on receiving satisfactory information from all necessary checks

Note: It is recommended that organisations include safer recruitment practices as part of general recruitment and selection training programmes. This ensures that a future appointing manager is aware of what their responsibilities are. In addition safer recruitment practices should be included as part of induction processes for new managers.

Pre-employment and Vetting and Barring Checks

3.7 There are a number of vetting checks that must be carried out for all staff. Some additional checks are required for staff working with children and vulnerable adults. The table below provides an outline of what should be included within the pre-employment process:

Nature of Check	Applicant	Comment
Identity	All applicants	DBS have issued guidance that following the 31 August 2012 there are certain documents that will not be accepted to confirm identity. Further information can be found: https://www.gov.uk/government/organisations/disclosure-and-barring-service
Date of Birth	All applicants	
NI number	All applicants	
Qualification	All applicants	Qualifications required for the position.
Professional Membership	All applicants	Professional membership required for the position.
Barred List	Workers with children and vulnerable adults	This is the barred list maintained by the Disclosure and Barring Service, previously referred to as list 99, PoCA or PoVA.
Right to work in UK	All applicants	
Health check	All applicants	After provisional offer has been made.
References	All applicants	At least 2 references – one from the current/previous employer. If this is an agency, then it is recommended that in addition a reference is sort from a relevant placement.
DBS	Workers qualifying under one or more DBS exempt category	This relates to all staff working with children, young people and vulnerable adults plus other “exempt” staff such as accountants, parking staff (see DBS website)
DBS for overseas	As above but for overseas applicants	For any applicant as above but for overseas applicants (see DBS website)

Note: w.e.f June 2015 the DVLA are no longer printing the paper copies and therefore ID will be via the picture card only.

3.8 All the checks must be completed and cleared **before** the person is allowed to start work. If it is business critical to commence an individual prior to the receipt of a DBS check then a DBS risk assessment must be undertaken. It should be noted that this will be the **EXCEPTION** and not the **RULE**. Organisational policies and procedures should include guidance on how this is managed locally. A good practice template can be found at **Appendix 1** (which can be adapted to deal with those cases where a positive check is received). It is recommended that this is completed and retained with the employment file should there be an inspection or audit. Equally it is essential the HR and the operational manager ensure that the risk assessment is

reviewed in the light of the DBS being returned and that there is a tracking mechanism in place. Note: if the employee already works for the organisation but changes job roles into a front line post, then safer recruitment checks must be undertaken.

- 3.9 If a positive DBS check is received then a risk assessment should be undertaken. Does the conviction/caution have a bearing on the post that the individual has been appointed to?
- 3.10 In some organisations where there is a requirement to undertake a DBS re-check every 3 years. The same template can be used should a matter arise once the individual is in employment. There may be occasions when the DBS 3 year period “expires” and there is a gap when the employee is not covered by a DBS check. It is recommended to organisations that there is a risk assessment undertaken – the risk assessments referred to in the appendices can be adapted for this purpose.

4.0 Allegations made against staff

- 4.1 It is essential when allegations are made involving employees, that organisationally we safeguard children, young people and vulnerable adults as well as the employment rights of the employee. The guidance that follows can also be applied for non- employee i.e. volunteers, agency workers.

Where are allegations or concerns raised?

- 4.2 Allegations or concerns involving employees who work with children, young people and vulnerable adults can be raised in a number of ways. These can be:
- Through an alert to the Safeguarding Leads from a carer, parent, employee, volunteer, member of the public;
 - Through a complaint via the organisational complaints unit;
 - Through a manager raising their concerns about an employee with Human Resources;
 - Through staff raising an alert;
 - Through a school, team or unit within an organisation.

What is clear is that safeguarding procedures will always take precedence, as the role of organisations is to safeguard children, young people and vulnerable adults.

What is the scope of the procedure?

- 4.3 This procedure applies to a wider range of allegations and concerns than those where there is reasonable cause to believe a child, young person or

vulnerable adult is suffering, or is likely to suffer risk of harm. It also covers cases of concern or allegation which might indicate an employee is unsuitable to continue to work with children, young people and vulnerable adults in their present position, or any capacity. It should be used in respect of all cases in which a concern or allegation is raised that a person who works with children, young people and vulnerable adults has:

- behaved in a way that has harmed a child, young person or vulnerable adult , or may have harmed a child, young person or vulnerable adult ;
- possibly committed a criminal offence against, or related to, child, young person or vulnerable adult; or
- behaved towards a child, young person or vulnerable adult in a way that indicates s/he is unsuitable to work with children, young people and vulnerable adults.

4.4 There may be up to 6 strands in the consideration of an allegation or concern:

- involvement of/co-ordination by the Local Authority Designated Officer (LADO)/Adult Safeguarding Lead
- a police investigation of a possible criminal offence;
- enquiries and assessment by inspecting authorities e.g. Care Quality Commission (covering both health and social care), Ofsted (education, children and families and social care), about whether a child, young person or vulnerable adult is in need of protection or in need of services;
- consideration by the organisation of disciplinary action in respect of the employee;
- an interim referral to a professional registering body e.g. Health and Care Professionals Council (HCPC), Nursing and Midwifery Council (NMC) etc;
- an interim referral to the Disclosure and Barring Service (DBS).

Note: See Signposting for links on page 38

What are the general principles?

4.5 Any child, young person or vulnerable adult should receive appropriate support. They and their families and/or carers should be helped to understand the process, told the result (within the limit of confidentiality) of any enquiry or disciplinary process, and where necessary helped to understand the outcomes reached. The provision of information and advice must take place in a manner that does not impede the proper exercise of enquiry, disciplinary and investigative processes.

4.6 Employees about whom there are concerns should be treated fairly and honestly, and provided with support throughout the investigation process. They should be helped to understand the concerns expressed, and the processes being operated, and be clearly informed of the outcome of any investigation and the implications for disciplinary or related processes.

However, the police, and other relevant agencies, should always be consulted before informing a person who is the subject of allegations which may possibly require a criminal investigation. Line management has a specific role to perform in linking with the employee, as they do continue to be an employee whilst an investigation is being undertaken.

- 4.7 Those undertaking investigations should be alert to any sign or pattern which suggests the alleged concern or abuse is more widespread or organised than appears at first sight, or may involve other perpetrators or institutions. It is important not to assume initial signs will necessarily be related directly to abuse, and to consider occasions where boundaries have been blurred, inappropriate behaviour has taken place, and matters such as fraud or deception may have been involved.
- 4.8 Every effort should be made to maintain confidentiality and guard against publicity while an allegation is being investigated or considered. Regarding the latter it is recommended that the organisation's communication team are notified.

What is the procedure and the timescales?

- 4.9 The organisation's procedure will outline the timescales within which action should be taken. In addition to the Pan London Child Protection Procedures¹ and the Pan London Protecting Adults at Risk Procedures², there may be local variants.
- 4.10 Broadly the stages are:
- Safeguarding Alert;
 - Making a Safeguarding referral;
 - Strategy Meeting

It is here that the HR practitioner should be engaged when it involves an employee and their role is to:

¹ Pan London Child Protection Procedures - <http://www.londonscb.gov.uk/procedures/>

² Pan London Adults at Risk Procedures - <http://www.scie.org.uk/publications/reports/report39.asp>

1. Contact the Safeguarding Lead (Local Area Designated Officer – LADO/Adult Safeguarding Lead) – maintaining contact with the leads during the course of the case;
2. Attend the strategy meeting;
3. Review the Personnel File (helpful to have a briefing note on the file to review in particular recruitment processes, any issues that have previously been raised as concerns);
4. Raise relevant points;
5. Advise on HR procedures/employment law;
6. Be clear about action points and action.

NB: The nature of the issue may require the involvement of the relevant organisation's communication team, in order to discuss a communications strategy and agreed statement.

- 4.11 It is here that the case is discussed, with the safeguarding of the child, young person or vulnerable adult being paramount. Where the allegation is against an employee there needs to be an agreed way forward for how the safeguarding investigation and/or police investigation interplay with the employment disciplinary procedure. Outcomes from the meeting are recorded with action points, where there are action points for the HR practitioner these must be followed.
- 4.12 Case conferences review the progressing of the investigation and allow for all parties to meet again to review actions and consider next steps. Again, the HR practitioner needs to be in attendance to provide advice on the interface with the employment relationship.

Disciplinary Process

- 4.13 The relevant organisational disciplinary procedure is followed which provides a clear framework so that an employee can:
 - Know what is alleged ;
 - Have an opportunity to respond to the allegations;
 - Be represented by a trade union representative/employee side or workplace colleague if requested;
 - Attend a hearing (if there is sufficient evidence to prove the allegation on the balance of probabilities); and
 - Exercise their right of appeal.

Note: The principles of confidentiality apply in these cases.

- 4.14 The HR practitioner involved in the strategy meeting will be able to provide advice in accordance with the organisation’s disciplinary procedure and assist in discussions which relate to interim referrals and referrals to professional registering bodies and the Disclosure and Barring Service (DBS). Note: the decision to suspend the employee from work may have already been taken due to the allegations being made, and the need for an immediate response.
- 4.15 If there is clear cause for concern that a child, young person or vulnerable adult might be at risk of harm from an employee, or an allegation warrants investigation by the police, or is so serious there might be grounds for dismissal (i.e. potentially gross misconduct), or there is concern that the employee may interfere with the investigation, careful consideration would need to be given as to whether to suspend the employee. Suspension from the workplace is a neutral act.
- 4.16 The disciplinary procedure will run alongside any safeguarding investigation, and where the police are investigating from a potential criminal prosecution stand point, there must be agreement from the police whether (from the point of view of timing), and at what point, an internal investigation can be undertaken and the timing of when specific information about the allegations or other information can be released. This will be undertaken at the Strategy Meeting (as previously outlined under 3). As part of the disciplinary procedure it may be relevant for the safeguarding lead to be an expert witness in the proceedings.

Complaints Process

- 4.17 Safeguarding cases may come out of complaints that are raised. There may be an overlap with the disciplinary procedure. Discussions via the strategy meeting or with key individuals will determine next steps and the appropriate response to be given to the complainant.

What are the roles?

- 4.18 The table below outlines the roles of individuals when allegations are made against staff:

Role	Responsibilities
<p>Safeguarding leads (Children’s Local Area Designated Officer (LADO), Adults –Safeguarding lead or co -ordinator)</p>	<p>Helps co-ordinate information sharing with the right people and will also monitor and track any investigation, with the aim to resolve it as quickly as possible.</p> <p>Provide guidance or guidance where a safeguarding concern exists to employers or voluntary organisations or where the local authority is the employer, to operational managers.</p> <p>They act as an expert advisor who is able to offer clarity to employers/organisations/managers in</p>

	<p>respect of safeguarding concerns, processes and timelines.</p> <p>Liaise with the police and other agencies, such as OFSTED or professional bodies such as the GMC or GTC.</p> <p>Seek to resolve any interagency issues.</p> <p>Collect strategic data and maintain a confidential database in relation to allegations.</p>
<p>Complaints Unit.</p>	<p>The Complaints Unit will seek advice from HR/Safeguarding Unit should a complaint contain details that could have staff or safeguarding implications. The Complaints Manager will provide advice in relation to the complaint and the complaints procedure. They will attend the Strategy Meeting and subsequent case conferences to provide advice to the chair of the panel, and follow through any actions following decisions made.</p>
<p>HR Practitioner</p>	<p>The HR Practitioner will provide advice in relation to the employee and their employment. They will attend the Strategy Meetings (where it involves an employee and/or is relevant to do so) and subsequent case conferences, to provide advice to the chair of the panel, and follow through any actions following decisions made.</p>
<p>The Manager</p>	<p>The manager should keep the employee who is the subject of the concern or allegation informed of progress of the case, and arrange to provide appropriate support to the individual in line with organisational arrangements for employee support i.e. employee assistance programmes. If the employee is suspended the manager should make arrangements to keep the individual informed about developments in the workplace.</p>

	<p>If the employee is a member of a union or professional association they should be advised to contact that body at the outset for confidential advice and support. The manager or designated officer should notify any appropriate registering body of the investigation.</p> <p>Managers may also have an Investigation role and they will be expected to undertake a thorough investigation and will be supported by a HR Adviser during this process, in accordance with the appropriate procedure'</p> <p>The manager (if the investigating officer) can seek advice from their line manager providing this line manager is not going to be hearing the outcome of the case – this ensures impartiality.</p>
<p>The Employee</p>	<p>The employee is expected to co-operate with the investigation process and must be available for interviews. The employee must also comply with the conditions placed on them during the investigation which may be in relation to their temporary removal from the workplace to another location (temporarily transferred to other duties) or suspension from work (depending on organisational disciplinary procedures).</p> <p>If the employee is registered with a professional registering body it may be part of their code of conduct for employers and employees to notify them of alleged misconduct.</p>

What happens if the employee resigns or there is a compromise agreement?

4.19 The fact that an employee tenders their resignation must not prevent a concern or allegation being followed up in accordance with these procedures. Every effort must be made to reach a conclusion in all cases of concern bearing on the safety or welfare of the child, young person or vulnerable adult, including where the subject of the concern refuses to cooperate with the process. Wherever possible the employee should be given a full opportunity to answer the allegation and make representations in line with the organisation's disciplinary procedure.

- 4.20 However, the process of recording the concern or allegation and any supporting evidence, and reaching a judgement about whether it can be regarded as substantiated on the basis of all the information available should continue even if the employee does not cooperate. It may be difficult to reach a conclusion in these circumstances, and it may not be possible to apply any disciplinary sanctions if a person's period of notice expires before the process is complete (as there is no valid contract in place), but it is important to reach and record a conclusion wherever possible i.e. an outcome will be reached whether the individual participates or not.
- 4.21 By the same token, so called "compromise agreements" must not be used in these cases (this is where a person agrees to resign, the employer does not pursue disciplinary action and both parties agree on wording for any future reference). In any event, such an agreement will not prevent a thorough police investigation where appropriate. Nor a factually accurate reference, that would need to include that safeguarding allegations were under investigation when the employee resigned. Nor can it override an employer's statutory duty to make a referral to the appropriate barring body i.e. the person's professional body e.g.HCPC, NMC etc and the Disclosure and Barring Service (DBS).

Managing sensitive and confidential information

- 4.22 The manager will need to discuss with the employee (and their representative) what, if any information is given to other employees. It is in the nature of this type of matter that other employees will be curious, and whilst they have no right to confidential information about an employee who may have been the subject of a concern or allegation, it may be conducive to the welfare of that employee and for the future functioning of the service, for there to be an agreed account (between the manager and the employee) covering events without breaching confidentiality of the employee or any child, young person or vulnerable adult who may have been involved. This may also include the reason given to other employee and service users about the employee's absence from work whilst suspended from duty.
- 4.23 Similarly the family/carer of any child, young person or vulnerable adult should be given appropriate information in accordance with the outcome agreed at the strategy meeting/case conference without breaching an employee's right to confidentiality. This also includes how a complaint is responded to should the matter have been raised in this way.

Action at the conclusion of the case

- 4.24 If an employee has been suspended and it is decided they can return to work (i.e. there is no case to answer and the suspension is lifted), the manager should consider how best to facilitate that. The manager should also consider how the person's contact with the child, young person or vulnerable adult who made the allegation can best be managed if they are still receiving the service.

- 4.25 If an allegation is determined to be unfounded, the manager should refer the matter to the relevant social work team to determine whether the child, young person or vulnerable adult concerned is in need of services, or may have been abused by someone else. In the rare event that an allegation is shown to have been deliberately invented or malicious, the police should be asked to consider whether any action might be appropriate against the person responsible. If the person making the allegation in these circumstances is a child, young person or vulnerable adult, the social work team will need to consider what help and support the child, young person or vulnerable adult, carer and family may need in the light of the false allegation.
- 4.26 Where safeguarding concerns have been raised, the details of the investigation should be confidential kept, even if there is no case to answer.

Referrals to Professional Registering Bodies and to Disclosure and Barring Service (DBS)³

- 4.27 If the allegation is substantiated on the balance of probabilities, and on conclusion of the case the employer dismisses the person or ceases to use the person's services, or the person ceases to provide his/her services, the employer should consult the local authority designated officers for safeguarding as referred under 4.18, to establish if a referral to the professional registering body or DBS should be made. As per ***Working together to Safeguard Children – March 2013***, it is recommended that any referral should be made within one month. A referral must always be made if the employer thinks that the individual has harmed a vulnerable adult/child or young person or poses a risk of harm to these vulnerable groups.
- 4.28 Each professional registering body may well have its own arrangements regarding when referrals should be made e.g. HCPC require employers and employees to notify them immediately if there is a case of misconduct.
- 4.29 It should be noted that conduct hearings undertaken by professional registering bodies and/or cases that are taken to criminal court, may be open to the public, and therefore it is essential that the tracking of the progress of the case is monitored and that the relevant organisation's communications team are notified to prepare a response should there be a press enquiry. Proactive tracking will allow for the development of a proactive organisational statement.

³The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).

Additional Information - DBS

4.30 The Safeguarding Vulnerable Groups Act (SVGA) 2006 and Safeguarding Vulnerable Groups (Northern Ireland) Order (SGVO) 2007, place a duty on employers of people working with children, young people or vulnerable adults to make a referral to the DBS in certain circumstances. This is when an employer has dismissed or removed a person from working with children, young people or vulnerable adults (or would or may have if the person had not left or resigned etc.) because the person has:

1. Been cautioned or convicted for a relevant offence; or
2. Engaged in relevant conduct in relation to children, young people or vulnerable adults [i.e. an action or inaction (neglect) that has harmed a child, young people or vulnerable adult or put them at risk of harm]; or
3. Satisfied the Harm Test in relation to children, young people or vulnerable adults. [i.e. there has been no relevant conduct (i.e. no action or inaction) but a risk of harm to a child, young person or vulnerable adult still exists].

1. Caution or conviction for a relevant offence

If an employee who works with children, young people or vulnerable adults in regulated activity has been cautioned or convicted for a relevant offence the employer must make a referral to the DBS. This should be done as soon as the employer is aware of the caution or conviction.

A relevant offence is a serious offence that will, subject to consideration of representations where permitted, automatically bar a person from working with children or vulnerable adults. Relevant offences are defined in secondary legislation. The DBS has a plain English version of relevant offences in DBS Factsheet: relevant offences on its website.

2 or 3. Relevant conduct or harm test is satisfied

An employer or volunteer manager must make a referral to the DBS if the following criteria have been met:

- They have dismissed or removed the person from working with children, young people or vulnerable adults (or would or may have done so if they had not left or resigned etc.); because
- The person has engaged in relevant conduct; or the Harm Test is satisfied.

A referral should not be made when an allegation is first made. The employer must first undertake an investigation and evidence gathering in order to establish if the allegation has foundation. Without evidence or information for the DBS to consider, many allegations will be quickly closed down as there will be no basis on which the DBS can proceed.

A referral should be made when the employer has gathered information and evidence to support the allegation and decided that the criteria for making a referral to the DBS has been met.

Points to note

- If you suspect that a crime has been committed you should contact the Police.
- The DBS has no investigatory powers and relies upon the evidence provided with referrals and any other evidence that it may gather.
- It is crucial that employers do not make a referral to the DBS without providing supporting evidence. The DBS Referral Form details the information you should provide if you have it.
- Employers should, as far as possible, complete their investigations (even if the person has left their employment). This will ensure that the DBS has all available information and evidence on which to base its decision.
- If additional relevant information becomes available to an employer after making a referral, this should also be provided to the DBS.
- In all cases, the referral should be made on the DBS Referral Form and posted to the DBS enclosing all relevant information that the employer holds.

DBS contacts

Helpline: 01325 953 795

Website: www.gov.uk/dbs

Email: dbsdispatch@dbs.gsi.gov.uk

Post: Disclosure and Barring Service
Post Office Box 181
Darlington
DL1 9FA

“The referral should be made to the DBS when the regulated activity provider had gathered sufficient evidence as part of their investigations to support their reasons for withdrawing permission to engage in regulated or controlled activity and in following good practice, consulted with their Local Authority Designated Officer (LADO) or Health and Social Care Trust Designated Officer if appropriate.”

4.31 Whilst the Guidance document and referral form are available from the DBS website both provide comprehensive guidance to any employer considering a referral, the following key issues will need to be decided by each employer:

- Who will be designated as responsible for making the decision to refer in your organisation?
- Who will be responsible for making referrals?
- Who will be responsible for monitoring progress of referrals?
- Who will report to and update your local Safeguarding Board?
- Who else in your organisation should be aware of the referral? (Chief Executive, HR Director, Organisational Communications).
- Have you checked about sharing information with your partner organisations e.g. the Police, Professional Body or the Strategy Meeting members?
- Who will be responsible for a referral of an agency worker?
- How will you deal with referrals for volunteers?
- How does the referral comply with your obligations under Data Protection?
- What issues of confidentiality are there regarding the client/student or complainant?
- What documentary evidence is available to support the referral?
- Get the referral double checked before sending.

4.32 It is recommended that the employer nominates key people in the organisation as responsible for making referrals, and that the decision is a joint one made up of at least two authorised officers one of whom should be from Human Resources.

- 4.33 All referrals should be signed off by a designated officer and double checked for accuracy, confidentiality and permission to share information from partnership organisations. Information provided could be shared with the referred party as part of this process, as they do have a right to appeal. As the employer you must ensure that the appropriate officers are aware of their responsibility to make referrals and that training and support is available within your organisation.

5.0 Learning Organisation

- 5.1 It is important for staff and managers to review and learn from the work they are involved in to improve their approach to safeguarding. As learning organisations, member agencies should ensure that records are made of lessons learnt, and feedback collated and cascaded into organisational learning, including training and case discussions at appropriate levels. To complete this 'continuous improvement' and reflective practice cycle, this learning should inform future training and learning plans via reviewing training needs and targeting appropriate training support and interventions.
- 5.2 A key source of embedding learning into processes and practice is lessons from reviews such as Serious Case Reviews, which should be incorporated in multi-agency procedures. Often failures in organisations' systems and procedures, such as management supervision, staffing resources and quality controls, are as significant as issues identified in individual staff.
- 5.3 At the conclusion of cases where allegations are substantiated – and even where they are not substantiated but serious individual and/or 'systemic' failings are identified – the employer should review the circumstances of the case to determine whether there are improvements to be made to help prevent similar occurrences in the future. The following extract from 'No Secrets' is relevant to learning and development in partner agencies:

Extract from “No Secrets”: Training for staff and volunteers

‘Agencies should provide training for staff and volunteers on the policy, procedures and professional practices that are in place locally, commensurate with their responsibilities in the adult protection process. This should include:

- Basic induction training with respect to awareness that abuse can take place and duty to report;
- More detailed awareness training, including training on recognition of abuse and responsibilities with respect to the procedures in their particular agency;
- Specialist training for investigators; and
- Specialist training for managers.

Training should take place at all levels in an organisation and within specified timescales. To ensure that procedures are carried out consistently no staff group should be excluded. Training should include issues relating to staff safety. Training is a continuing responsibility and should be provided as a rolling programme.’

Sharing Learning

5.4 In line with the above guidance, multi-agency safeguarding training will:

- Co-ordinate consistent, effective training to staff in all agencies;
- Develop links and networks between staff in different agencies, promote best practice, good communication and closer joint working;
- Facilitate sharing of learning and training resources and expertise

Standards

5.5 All staff require an appropriate level of training in safeguarding children and vulnerable adults and promoting their welfare. The training must reflect individual training needs, dependent on the degree of contact with children and/or vulnerable adults, parents and/or carers. Where job roles require competencies (such as the ‘Bournemouth’ competencies for safeguarding adults), these will be covered on different levels of single and multi-agency training.

5.6 The following standards are designed to support and ensure good quality single and multi-agency safeguarding training. They draw upon current best practice and promote the role of learning development in the delivery of quality services.

5.7 The following underpinning principles will apply:

- Safeguarding Boards will co-ordinate multi-agency training programs through their constituent agencies;
- Each agency will be guided to identify numbers and roles of staff, and the level of training they require; guidelines such as ‘Working Together to Safeguard Children’ (HM Government 2010) should be followed in this;

- Safeguarding training will be clearly linked to need, identified at national, local and team/individual levels;
- Each agency will nominate a lead officer to co-ordinate a training program;
- Each agency will develop a training plan on an annual basis to ensure that colleagues have the necessary competencies to carry out their safeguarding roles; this plan will be widely available on relevant websites and intranet sites;
- Partner organisations will be guided by relevant competency frameworks in assessing the skills and training needs of their staff and volunteers;
- The content of safeguarding training will be reviewed at regular intervals and updated at least annually to take account of relevant research, best practice and policy development;
- Training plans will identify regular refresher training at appropriate intervals;
- E-learning programs should be promoted and shared to facilitate ease of access to learning;
- Links will be established with relevant accreditation bodies;
- Networks will be established with training providers and representative bodies;
- Information and resources should be shared in a form that ensures equality of access and takes account of different agency structures;
- Safeguarding training will be delivered by trainers who are working to an agreed level of competence, appropriate to their role and contribution;
- The effectiveness of safeguarding training will be evaluated;
- Records and summaries of evaluation for both single and multi-agency training will be provided on an annual basis to the relevant Boards and agencies and used to inform the ongoing review of the training process.

6.0 Information Sharing

Introduction

- 6.1 Joint working amongst partner agencies is a cornerstone of the Every Child Matters Agenda, as laid out under Section 10 of The Children's Act (2004). This guidance aims to help HR practitioners support this duty through effective information sharing while adhering to the legal framework provided by legislation, such as the Data Protection Act (1998) and The Human Rights Act (1998), amongst others.
- 6.2 The guidance is designed to provide an overview of information sharing for HR practitioners whose organisations employ staff working directly with children, young people and adults. The aim of the document is to give clear guidelines on how information relating to staff, can be shared 'legally and professionally' to support successful outcomes.
- 6.3 The guidance recognises the importance of effective information sharing between partner organisations, coordinated around a staff member's

individual needs, but balanced against keeping information safe and secure and maintaining the privacy of the staff member.

- 6.4 To achieve lawful information sharing, proper consideration must be given, on a case-by-case basis as to:
- Why HR may need to share information;
 - Who HR need to share information with;
 - What information HR need to share;
 - How HR need to share information;
 - When HR need to share information.
- 6.5 Decisions about when to share information will need to be reviewed frequently as circumstances progress. The balance of risk if information is and is not shared may change over time.

Why HR may need to share information

- 6.7 A decision about whether information should be shared may arise when:
- HR receive a request for information (e.g. from the Police when investigating a possible crime);
 - HR departments from differing organisations are working in partnership with each other (e.g. when a local authority is leading action to protect people at risk).
- 6.8 Some statutory bodies have legal rights to obtain information. When doing so, they should quote the legislative basis for their request. HR must always comply with properly made statutory demands and therefore any information making decision will not arise. If the body making the request is unable to quote the legislative basis for their demand, it may be refused.
- 6.9 In some cases, HR may not be satisfied that the requesting body had adequately quoted the legislative basis for its request or, alternatively that it has no such legislative basis for requesting the information sought. Before refusing such requests, the HR Safeguarding Sub Group Partnership will, in the interests of openness and co-operation, consider whether some or all of the information requested can be provided under the provisions of any other legislation, such as the Freedom of Information Act.
- 6.10 Decisions about sharing information may be complex and it is particularly important that the decision making process is rigorous and well documented. It is important to record the reasons why we believe it is appropriate to share information. We need to be clear what our aim is, why we think it is reasonable and consider the implications of both sharing and non sharing.

6.11 There are key questions for HR practitioners to consider:

- is there a clear and legitimate purpose to share information?
- does the information enable a living person to be identified?
- is the information confidential?
- if the information is confidential, is there consent to share?
- if consent is refused, or there is a good reason not to seek consent, is it sufficient public interest to share?
- if sharing information, is it being shared appropriately and securely?
- has the information sharing decision been properly recorded?

Is there a clear and legitimate purpose for sharing information?

6.12 All sharing must comply with the law relating to confidentiality, data protection and human rights. Establishing a legitimate purpose for sharing information is an important part of meeting these requirements. Information sharing should be in line with specific guidelines and processes provided by the HR practitioner's organisation. Where there is a statutory duty to share information, this must be adhered to. Consent does not need to be requested, but where possible the individual should be informed that the information is being shared, the purpose of sharing the information, and with whom the information is being shared. In the event of a court order being issued, the information must be shared, other than in the event of an organisation deciding to challenge a court order.

Does the information enable a living person to be identified?

6.13 If information is anonymous, it can be shared. If the information is about an identifiable individual, or could enable a living person to be identified when considered with other information, it is then subject to data protection and other laws. Where possible HR practitioners should be open with the person whose information is being shared, where informing the individual could affect prevention or investigation of a serious crime, put a child or adult at risk of significant harm then it may not be appropriate to do so.

Is the information confidential?

6.14 Confidential information is:

- personal information of a private or sensitive nature
- information not already lawfully in the public domain or available from another public source
- information shared in circumstances where the person sharing could reasonably expect it not to be shared with others.

Consent

6.15 The consent given should be informed, the person giving consent needs to:

- understand why information needs to be shared;
- what information will be shared;
- the purpose to which the information will be put;
- the implications of sharing the information.

6.16 What constitutes consent?

- consent may be either explicit or implicit; written consent is preferable
- consent should be sought at the start of the involvement if possible
- consent may not be secured through coercion or inferred from a lack of response to a request for consent
- where there is a significant change in how the information will be used, consent should be secured again.
- individuals can withdraw consent at any time.

6.17 Consent should not be sought where it will:

- lead to placing a person at increased risk of significant harm if a child, or serious harm if an adult
- prejudice prevention, detection or prosecution of a serious crime
- lead to unjustified delay in investigating allegations of significant harm to a child, or serious harm to an adult.

Sharing information in the public interest

6.18 Even where consent is refused, it may be in the public interest to share information. The key factors are necessity and proportionality – the question to be asked is - will the sharing make an effective contribution to reducing the risk, balanced against the need to maintain confidentiality. Where confidential information is shared without consent, it should be explained to the person that the information is being shared and the purpose of doing so, unless it is inappropriate or unsafe to do so.

Sharing information appropriately and securely

6.19 The sharing of information should be done in a proper and timely manner, and in accordance with both the Data Protection Act 1998 and any organisational policies and procedures. The following should be ensured when sharing information:

- only information necessary for the purpose should be shared;
- limits of the consent should be understood;
- fact and opinion should be clearly distinguished;
- information should be shared only with the person or people who need to know;
- information should be accurate and up-to-date;

- information should be shared securely;
- ensure the recipient is aware of the limits of any consent given;
- the person to whom the information relates should be informed and if different, any other person who provided the information.

Recording the decision to share information

6.20 Any decision to share, or not share, confidential information should be recorded. Where the decision is to share, the information shared and who has received it should be recorded. All arrangements should be in line with organisational information sharing procedures, and the Data Protection Act 1998.

Who HR may need to share information with?

6.21 In addition to our partners in the HR Safeguarding sub group, we will also work with other stakeholders such as:

- The Police;
- Registered organisations;
- Government bodies.

6.22 Decisions need to be taken on which of these stakeholders we need to share information with. Decisions will be based on whether they need the information to carry out an investigation for example and without the information an individual may be exposed to unnecessary risk.

What information HR may need to share

6.23 It is important to be clear about the nature of the information to be shared. We should distinguish between factual information we know to be true and unproven information. We must be careful not to include unfounded inferences.

6.24 Where information is shared, it will be made available for a specific purpose and the receiver will be asked not to pass that information on or use it for another purpose without first consulting and gaining agreement from the organisation giving the information.

How HR need to share information

6.25 Information maybe shared, for example, through:

- Partnership working e.g. multi agency arrangements where a partner organisation may need to share concerns about services provided by the lead or other partner organisation;
- Directly in response to requests e.g. from specific organisations or individuals;

- Pro-actively e.g. discussions in the context of improving best practice within the HR safeguarding sub group (although only cases should be identified for the purpose of lessons learnt and not individuals).
- 6.26 Proper consideration should be given to the security of information shared. For example, secure methods of transmission should be used i.e. land line, recorded post, hand delivery.
- 6.27 Information should never be shared from a telephone request until the identity of the caller is confirmed. This should be achieved by calling the organisation back having sourced the phone number through your own resources.
- 6.28 The information shared within the HR Safeguarding Sub Group should only relate to staff employed (permanent, temporary and agency) and not to service users

When HR need to share information

- 6.29 Information should be shared as soon as a need to do so arises. This will be as part of action to improve services, so that the people who use the services are safeguarded to do so.
- 6.30 In some cases, sharing information with some stakeholders may need to be delayed where disclosure might prejudice the gathering of evidence e.g. information shared with a service provider may prompt a member of their staff to destroy important evidence. Where this is the case, a multi-agency approach will need to be agreed to ensure people are safeguarded whilst evidence gathering takes place as quickly as possible.
- 6.31 Each member of the HR Multi Agency Safeguarding Sub-Group should identify and appoint a designated officer who will make the final decision on whether the information should be shared. A list of the HR designated officers should be shared within the HR Multi Agency Safeguarding sub group, so requests and decisions to share information are not unduly prolonged through attempts to identify the appropriate designated officer.

Recording a decision to share/not to share information

- 6.32 **Appendix 3** provides a flow chart of the key questions that need to be asked before making the decision to share information. Once this process has been followed a 'record of the decision to share/not share' information should be made (**Appendix 4**).

Source of further guidance

- 6.33 The information sharing section of this policy follows the best practice principals of the ***Information Sharing: Guidance for practitioners and managers (HMG 2008)***.

6.34 For more information please go to the following link
www.ecm.gov.uk/informationsharing

7.0 Records Management

7.1 Records should be securely and responsibly managed. Most organisations will have separate policies on information governance which incorporate the statutory regulations for your organisation and good practice, so these summary key points below, should be read in conjunction with these. Particularly note the eight principles of the Data Protection Act 1998 (DPA), which require that personal data must be:

- Obtained and used fairly and lawfully;
- Used for limited specific purposes;
- Adequate, relevant and not excessive;
- Accurate and up-to-date (if necessary);
- Not held longer than necessary;
- Handled in accordance with the individual's right;
- Secure;
- Not transferred to countries without adequate protection for data.

Information Security of Records

7.2 Security of records is essential, particularly when dealing with sensitive safeguarding information. Records may include emails, diary invites, information on memory sticks or hard drives, paper records or files, electronic files, faxes, telephone or other conversations. So key points on keeping information secure:

7.3 Make sure electronic documents are password protected or encrypted, especially if you are sending emails outside your organisation or have information on a memory stick, or use equipment that others have access to or that maybe stolen (for example blackberry, CD's, removable media and portable devises). WinZip is one option, for example (See **appendix 6** about using Winzip). If you are using a password, don't include this in the same email, preferably telephone this information, making sure you know who is receiving the information. (See **appendix 5** on password protecting documents. How to use encrypted memory sticks is attached as **appendix 7**).

7.4 Are emails sent within your organisation secure? Check that internal emails are within a network's firewall security system that will protect them. Sending emails with confidential or sensitive data in between organisations is not normally secure, useless they are part of the Criminal Justice Secure Mail (CJSM) secure system or another encrypted email system to which you have access. Email addresses will have cjsm in them if they are part of the scheme, for example @nhs.net.cjsm.net or @gsi.gov.uk.cjsm.net

- 7.5 Don't put anything confidential in the header of an email and double check who you are sending it to. Mark the message as confidential;
- 7.6 If you send an electronic invitation to a safeguarding meeting about a person, beware that other people can often see the recipient's diary – so don't put anything confidential in the invite;
- 7.7 If you are discussing a safeguarding issue, make sure you know who you are talking to on the phone. This may mean phoning people back via a switchboard and asking for that person;
- 7.8 Be aware of conversations being overheard or records being over looked. So make sure papers aren't left on your desk or that you screen lock your PC when you are not at your desk;
- 7.9 If you have to fax records check the fax number, double check the number dialled before sending, use an appropriate fax cover sheet, phone the recipient before you send the fax to let them know it's on the way (so they can stand by the fax at their end if their fax isn't secure) and ask them to confirm receipt;
- 7.10 If you need to send information by post (for example if you are making a referral to DBS or HCPC), it is recommended that if possible, you put the information on an encrypted CD and send it registered post. Mark for the addressee only and ask the recipient to confirm receipt.

Access to Records

- 7.11 Safeguarding records are often particularly sensitive, so it is important to make sure only those that need to know about this have access to the information.
- 7.12 Keep confidential information in a secure, locked container, for example a lockable file or briefcase;
- 7.13 For electronic files, beware of who has access to the area where you store things. You should set up a specialist storage area for particularly sensitive data with very limited access.

Destruction of Records

- 7.14 Make sure any records no longer needed and which are past their retention period are confidentially destroyed by shredding. Do not destroy any records without checking your organisation's retention schedule first – some records must be retained for set periods of time.
- 7.15 If you destroy paper files that are past their retention period you must also delete all electronic documents at the same time (refer to your organisation's arrangements).

Retention Schedules

- 7.15 All record management systems should have a retention schedule refer to your organisation's retention schedule.
- 7.16 The Information and Records Management Society recommend that for personal files for staff working with vulnerable groups and with children should be kept for 25 years after leaving the organisation Note: This is recommended good practice. Refer to the relevant organisational policy/procedure on information and records management particular in relation to safeguarding.

Quality Checking

- 7.18 It is important that information held is accurate and up to date. In addition to good practice, this complies with the DPA. So for example, it's a good idea to build in audits and/or spot checks to ensure the quality of the data you hold is accurate. For example:
- 7.19 Audit DBS data yearly, to ensure that no one has slipped through the net. Does everyone requiring a DBS have one? For areas requiring re-checks, is the DBS up-to-date?
- 7.20 Spot check references. Is the reference on headed paper or have an official stamp on it? Has the manager verified the authenticity of the reference? Do the dates on the reference match with the dates on the applicants/ employee's application form/CV?
- 7.21 Audit files. Do you have a file for every employee? Have you got the key documents for safer recruitment and statutory requirements (i.e. legal right to work)?

8.0 Inspections and Audits

- 8.1 Some organisations are regulated by Ofsted or the Care Quality Commission (CQC) and periodically inspections will be undertaken. It is recommended that there is a planned approach and even with unannounced inspections there can still be an element of planning and preparation. An inspection checklist should cover the following and include who will take responsibility and the date the action is to be completed. Any evidence has to be outcome focussed, i.e. what is the impact/what is the difference that it has made to safeguarding vulnerable adults, children and young people? You may want to include examples that demonstrate innovative work around safeguarding and again the evidence must be outcome focused. HR Practitioners **must** take individual ownership and responsibility for the work to be done:

- Workforce strategy or plan, workforce data;
- File audit to ensure compliance with safer recruitment processes;
- Undertake a risk assessment of files and actions in place where there are gaps, risk assessment and follow up action to be placed on file and tracking of gaps;
- DBS process – check all staff current DBS, exception reporting;
- Example case at the recruitment stage where a DBS has been returned positive what was the action taken and outcome i.e. job withdrawal or recruitment into post continued;
- A case where evidence of how the organisation deals with allegations against staff, including referrals to professional bodies and DBS;
- Make available key policies e.g. recruitment, safer recruitment, how allegations against staff are managed;
- Training that is undertaken e.g. safer recruitment training for managers.

8.2 The London Safeguarding Children’s Board undertake a biennial assessment of all LSCB agencies and organisations in relation to their duties under Section 11 of the Children’s Act 2004. The assessment takes the form of a self-assessment tool with the aim of assessing the effectiveness of the arrangements that are in place for the safeguarding of children. This assessment can apply as equally to vulnerable adults. The key standards that relate to the workforce are:

Standard 5 – Training on safeguarding and promoting the welfare of children for all staff working with or, depending on the agency’s primary functions, in contact with children and families.

This includes an assessment of induction practice, learning and development plans which include safeguarding training arrangements, recording of training, diversity and that the organisation can demonstrate the impact of the training undertaken.

Standard 6 – Safer recruitment procedures including vetting procedures and those managing allegations are in place.

This includes safer recruitment procedures are in place, training is in place for safer recruitment, there is a procedure in place for managing allegations and that there are audit and monitoring arrangements in place.

9.0 Signposting

Pan London Procedures for Safeguarding

Pan London Child Protection Procedures

<http://www.londonscb.gov.uk/procedures/>

Pan London Adults at Risk Procedures -

<http://www.scie.org.uk/publications/reports/report39.asp>

Statute and Statutory Guidance

The legislation listed below is the most relevant for the employment of staff. Organisational policies, procedures and practice must be consistent with:

Asylum Act 1999 and 2002

The Immigration Restriction on Employment Order 2007

Human Rights Act 1998

Data Protection Act 1998

Rehabilitation of Offenders Act 1974

Employment Rights Act 1996 and Employment Act 2002

Protection of Vulnerable Adults Act 1999/Criminal Justice and Court Act 2000

Protection of Children Act 1999/Criminal Justice and Court Act 2000

Vulnerable Group's Act 2006 (Vetting and Barring – Independent Safeguarding Authority)

http://www.legislation.gov.uk/ukpga/2006/47/pdfs/ukpga_20060047_en.pdf

Working Together to Safeguard Children – A guide to inter-agency working to safeguard and promote the welfare of children

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/281368/Working_together_to_safeguard_children.pdf

Safeguarding Children and Safer Recruitment in Education

<https://www.gov.uk/government/publications/keeping-children-safe-in-education>

The Equality Act 2010

The Protection of Freedoms Act 2012

http://www.legislation.gov.uk/ukpga/2012/9/pdfs/ukpga_20120009_en.pdf

Professional registering Bodies as at 2014

Health and Care Professions Council (HCPC)	http://www.hpc-uk.org/
Nursing and Midwifery Council (NMC)	http://www.nmc-uk.org/

General Medical Council (GMC)	http://www.gmc-uk.org/
General Dental Council (GDC)	http://www.gmc-uk.org/
General Teaching Council (GTC)	http://www.gtce.org.uk/

Please note that this is not an exhaustive list. A number of the professional registering bodies are undergoing periods of change please ensure that you refer to relevant professional registering body website for the latest information.

Key links for the NHS

NHS London www.london.nhs.uk

Key Links for Colleges

Institute for learning www.ifl.ac.uk

Association of Colleges www.aoc.co.uk

Sutton Local Children's Safeguarding Board

<http://www.sutton.gov.uk/index.aspx?articleid=4704>

Merton Local Children's Safeguarding Board

<http://www.merton.gov.uk/health-social-care/children-family-health-social-care/lscb.htm>

Sutton Safeguarding Adults Board

<http://www.sutton.gov.uk/index.aspx?articleid=10632>

Merton Vulnerable Adults Strategy Team

<http://www.merton.gov.uk/health-social-care/adult-social-care/safeguarding-adults.htm>

This is a template which can be adapted for use in line with the relevant organisation's policies and procedures.

DBS Risk Assessment

Date of Assessment:	Employee assessed:
Post assessed:	Place and location of work:
Activity Assessed:	Appointment of individual with a criminal conviction, caution or for whom other relevant or additional information has been disclosed or to commence employee in advance of receipt of the DBS.

When completing this section please refer to the guidance notes

Section A, B C and D to be completed by the Recruiting Manager

Section A

Please confirm the checks that have been completed (circle Y or N as appropriate):

- | | | |
|----|---|--------|
| 1. | Face to face interview | Yes/No |
| 2. | Satisfactory list 99 check | Yes/No |
| 3. | Identity check | Yes/No |
| 4. | Satisfactory references covering 5 years full time Employment | Yes/No |
| 5. | Are there any unexplained gaps in employment? | Yes/No |
| 6. | Do we have evidence of eligibility to work in the UK | Yes/No |

Section B – Details of the convictions, cautions and other information including dates

(continue overleaf)

.....

.....

.....

.....

Has the conviction, caution or other information been declared by the individual? Yes/No

Section C – Justification for appointment (continue overleaf)

.....
.....
.....
.....

Section D – Control measures (continue overleaf)

Is it necessary to put in place any control measures to mitigate the risk of this employee being appointed? Yes/No

If yes please describe those control measures

.....
.....
.....
.....

Are all recommended control measures in place? Yes/No/N/A

Is the new employee able to adhere to the control measures above? Yes / No

Manager's Name (please print):

Signed:.....Date.....

Section E – To be completed by HR for HR advice/recommendation

.....
.....
.....

HR Practitioners Name (please print):

Signed: Date:

Risk assessment continuation sheet

**Section F – To be completed by senior manager as per organisational procedures
(please delete as appropriate)**

Comments (if any)

.....
.....

I agree to the appointment being confirmed/I do not agree to the appointment being confirmed (please delete).

Print Name: Signed: Date:

This is a template which can be adapted for use in line with the relevant organisation's policies and procedures.

Good Practice Guidance on the Completion of the Risk Assessment

What should I do if the DBS check for the individual reveals a conviction?

Assessing the risk of employing a person with a criminal record means comparing an applicant's skills, experience and conviction circumstances against risk criteria you have identified for the job. For example sexual or child pornography offences would almost certainly disqualify any person from working with children. In contrast a driving offence may not be relevant for a similar post unless driving was a requirement. But it is also important to remember that no two offences are exactly alike.

You should carefully analyse all the factual information available against the job and person specification. It is important to balance the employer's duty of care and protection of adults, children and young people whilst ensuring that you do not unfairly discriminate against a person because of a criminal offence.

In addition, the [enter organisation](#) has an information sharing agreement with the Metropolitan Police. Depending on the offence, you may wish to seek further information about the offence or concern revealed by the DBS check from the Police (if the offence took place in the area covered by the Metropolitan police area). This will be useful when weighing up the offence and will also allow you to assess what the individual says against the facts provided by the Police. You should be aware that for offences that may date back some years, the Police may not have any record but this should not deter you from asking. Advice and assistance is available from your HR representative or [enter here safeguarding lead contacts](#).

You should ensure that all the following checks have been completed and are satisfactory:

- ❖ Face to face interview
- ❖ Identity check
- ❖ Academic/vocational qualification check
- ❖ Eligibility to work in the UK
- ❖ Professional references for a minimum of 5 years, ensuring there are no gaps
- ❖ Character references for a minimum of 5 years, ensuring there are no gaps
- ❖ Previous employment history, ensuring there are no gaps
- ❖ Health check
- ❖ Mandatory check of List 99, POCA, POV
- ❖ DBS check

Assessing the offence(s)

Addressing issues related to criminal convictions needs an objective common sense approach which takes account of:

- ❖ the employer's duties in law
- ❖ the nature of the offence
- ❖ when it happened
- ❖ the circumstances involved
- ❖ the persons age at the time
- ❖ the sentence
- ❖ whether it was an isolated offence or part of a pattern of offending
- ❖ efforts to avoid re-offending
- ❖ what is known about the person's conduct and character before or since
- ❖ the job requirements
- ❖ the person's account set against any available objective information about the offence/matter of concern

You should also consider:

- ❖ Was the information about the offence (s) disclosed by the individual at interview?
- ❖ Is it considered that a meeting should be held with the individual to gain all the relevant information before a decision is made?

Assessing the job for risk

In assessing the potential risks of the job you should consider:

- ❖ Does the post involve unsupervised contact with adults, children or young people?
- ❖ Does the post involve direct contact with the public?
- ❖ Am I prevented by law from appointing an individual convicted of this type of offence? E.g. a candidate for a driver post who had been banned from driving for a period of time.
- ❖ Does the post involve any direct responsibility for cash, cheques or other items of value?
- ❖ Will the nature of the job present any opportunity for the post holder to re-offend in the workplace?
- ❖ What would be the possible result/impact on service users/delivery the post holder should re-offend in the workplace?

What else should I consider?

The essential thing for managers is to remember is to keep an open mind. In some cases, the relationship between the offence and the post will be clear enough to assess the risks. In other cases, the decision may not be so clear-cut.

The following factors may help in making a decision:

- ❖ The availability of assessments and reports from those agencies involved in the applicant's process of rehabilitation. For example, the Probation Service, specialists working in prison, etc.
- ❖ The seriousness of the offence and its relevance to the safety of other employees, customers, clients and property. Generally speaking, the longer the sentence the more seriously the Courts viewed the offence at the time. Custodial sentences are usually for more serious crimes than non-custodial sentences.
- ❖ The length of time since the offence occurred. (How effective has rehabilitation been?).
- ❖ Was the offence a one-off, or part of a history of offending.
- ❖ Whether the applicant's circumstances have changed since the offence was committed, making re-offending less likely (e.g. improved personal circumstances, drug addiction therapy).
- ❖ The country in which the offence was committed. For example, some activities are offences in Scotland and not in England or Wales, and vice versa.
- ❖ Whether the offence has since been decriminalised by Parliament.
- ❖ Any relevant information disclosed by the individual about the circumstances which led to the offence being committed (and whether their account matches the available facts).
- ❖ The degree of remorse, or otherwise, expressed by the applicant.

What control measures or safeguards should I consider?

You should consider:

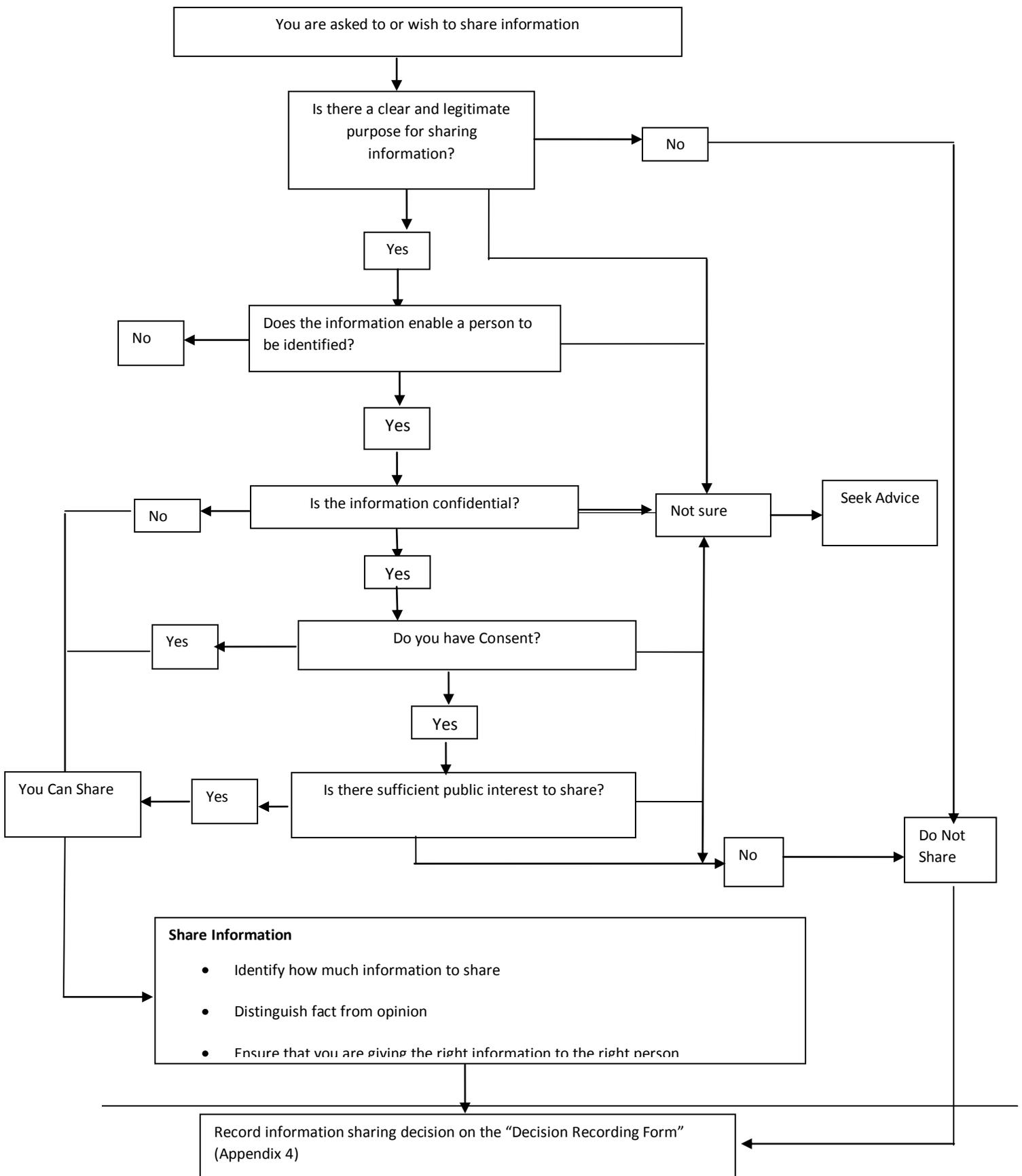
- ❖ The level and closeness of supervision that might be needed early on in the employment.
- ❖ The extent to which procedures, such as audits or the involvement of others in the work process, would be a form of indirect supervision.
- ❖ Whether any training or briefing would be useful to enable the supervisor to manage the post-holder in the work context.
- ❖ What precautions already exist in the work place or could be put in place?

Managing sensitive information

Managers should ensure that:

- ❖ Information regarding offences is kept confidential. Applicants need to feel confident that information about their convictions will not be disclosed to anyone unless there is a specific reason for doing so.
- ❖ only the people directly responsible for recruitment including the manager and Human Resources are informed of an employee's criminal record.
- ❖ the successful applicant is informed who in the organisation knows of the conviction and the reasons why the information has been disclosed.
- ❖ offence information is kept securely in lockable filing cabinets. Access to keys should be restricted to individuals responsible for recruitment and those in Human Resources who need access.

KEY QUESTIONS – INFORMATION SHARING



RECORD OF DECISION TO SHARE/NOT SHARE INFORMATION

1. DETAILS OF HR SAFEGUARDING PARTNER INVOLVED

Does the employee role impact on other Safeguarding partners?	YES (continue with form completion)
	NO (no further action required)

Name of Safeguarding Partner	
Type of Service	

2. TYPE OF INFORMATION SHARING DECISION (tick)

Response to external request for information	
Consider pro-active approach to sharing information	

3. WHY DOES THE INFORMATION NEED TO BE SHARED (tick)

In response to a statutory demand	
To work in partnership with other regulators	
As part of our role in the systems that aim to protect people who are at risk	

4. IF STATUTORY DEMAND, WHAT IS THE LEGISLATIVE BASIS

--

5. WHO DOES THE INFORMATION NEED TO BE SHARED WITH TO ACHIEVE THE AIMS (S) IDENTIFIED IN QUESTIONS 3 ABOVE

Name	Organisation/Status



6. WHAT INFORMATION NEEDS TO BE SHARED TO ACHIEVE THE AIM(S) IDENTIFIED IN QUESTION 3 ABOVE

Published information	
Unpublished information	
Private, Personal information	

7. HAS CONSENT BEEN OBTAINED TO SHARE PRIVATE PERSONAL INFORMATION? IF NO, STATE REASON

YES / NO (delete as appropriate)
Reason :

8. WHAT ARE THE RISKS ASSOCIATED WITH SHARING AND NOT SHARING THIS INFORMATION

Risks of sharing:	Risks of not sharing:
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9. HOW AND WHEN IS INFORMATION TO BE SHARED

HOW:	WHEN:
------	-------

10. DECISION MAKER (S)

NAME (S)	ROLE (e.g. HR Safeguarding Partner)
SIGNATURE (S)	DATE

Password protecting a Word or Excel document

Only use this for documents you are sending out, in the way described above. Do not use it for protecting files internally, where it relies on you remembering the password.

- Open the document.
- Click the **File** menu and choose **Save As**.
- Enter a new name for your document (so that you don't password protect the original).
- On the **Tools** menu in the **Save As** dialogue box choose **General Options**.
- In the **Password to Open** field type a password and click **OK**.
- In the **Re-enter Password to Open** box retype the password and click **OK**.
- Click **Save**.

When choosing a password you should use both numbers and letters, i.e. create a strong password.

Use a different password to anything you may use for other tasks because you will have to share the password when you disclose the document.

A password alone is not sufficient protection for confidential information.

Using WinZip to encrypt information

Use WinZip to encrypt copies of files that you are sending or taking out of the council, not for files which remain on the network. WinZip version 9 or above allows use to use 256-bit AES encryption which is recommended. The recipient will also need WinZip 9 or later. Earlier versions will handle the older "zip 2.0" encryption, as will Windows XP.

The encryption can be done from within or outside the Office application.

(1) To encrypt the information from outside the Office application:

- Open WinZip (version 9 or later)
- Create a new archive (File menu) and give it a name.
- In the "Add" window, locate the file you want to encrypt and highlight it. Tick the box "Encrypt added files", and click "Add".
- If WinZip warns you about the implications of encrypting files, click on "OK".
- Enter a password that has a least 7 characters and preferably a mixture of numbers and letters. Re-enter the password to confirm it.
- Ensure "Mask Password" is checked, and choose the option "256-bit AES encryption". Click on "OK"
- In the archive, the filename is followed by an asterisk to show it has been encrypted. Close WinZip.

(2) To encrypt the information from within the Office application:

- Open the application that contains the information to be emailed. (Word, Excel, PowerPoint etc)
- Click "File" then "Open".
- Locate, then right click the document to be sent.
- Click "WinZip" then click the option "Add to (*name of the document*).zip".
- It may now be necessary to change the "File of type" at the bottom of the box to "All files" to see the new Zip file.
- Right click the zip file.
- Click "Encrypt" (Cancel the box offering information about the different encryption methods if it appears)
- Enter a password that has a least 7 characters and preferably a mixture of numbers and letters.
- Re-enter the password as requested.
- Ensure "Mask Password" is checked.
- Check the option "256-bit AES encryption (stronger)" then click "Ok"

Whichever method you use for encryption, you now have an archive file to send or transport. When sending, let the partner who is to receive the information know the password. This can either be achieved by telephone to a known and authorised person or by email that is acknowledged before the first set of information is sent. For regular transmissions, we recommended that you change the password at least every three months.

The recipient will be able to open the encrypted zip file from their group email box, using the password already agreed with them at the start of the initiative. They will need to have WinZip software at version 9 or later if you have used 256-bit AES encryption.

Using encrypted memory sticks

Using the encrypted memory stick for the first time – setting up the password:

- Insert memory stick into the USB port.
- On screen, select English and click on tick.
- Skip personal information screen.
- Choose and repeat a password. (Use upper and lower case. Don't add a password hint)

Subsequent use:

- Insert memory stick into the USB port.
- On main screen, click on the password login symbol and enter the password.
- Getting the password wrong 6 times will reformat the drive and lose the data.

To put documents onto the memory stick:

- Insert memory stick into the USB port.
- Stick should appear in Explorer as drive U:/
- After copying files to stick, lock it by clicking on the lockout symbol on the main screen. This encrypts the data and logs you out of the drive.