

Safeguarding Adults Policy

Positive Smiles C.I.C.

Document control

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This policy sets out how Positive Smiles C.I.C. (PS) safeguards the adults we support from abuse, neglect and exploitation.

PS is committed to providing an environment free from harassment, abuse, violence, bullying or any other form of anti-social behaviour for everyone who takes part in our activities.

We have a duty of care to everyone who comes into contact with us, including participants and visitors, in all our activities both on and off site. We also have a duty to safeguard and support our staff and volunteers.

PS supports adults through wellbeing and mental health activities, ESOL, employability support, community learning and community groups such as Fab after Fifty and the Haslingden community hub. Some of the adults we support may be at risk, including refugees and asylum seekers, so staff, volunteers and partners must be alert to safeguarding at all times.

For this policy, an adult is anyone aged 18 or over, and an adult at risk is defined as in the Care Act 2014. PS works only with adults.

SAFEGUARDING STATEMENT

We recognise our moral and statutory responsibility to safeguard and promote the welfare of everyone we work with. We aim to provide a safe and welcoming environment where people are respected and valued. We are alert to the signs of abuse, neglect and exploitation, and we follow our procedures so that people receive effective support and protection. Where we believe an adult is at risk, we will follow the Care Act 2014 and the procedures of the local Safeguarding Adults Board.

POLICY PRINCIPLES

- The safety and wellbeing of the adult is paramount.
- Everyone, regardless of age, gender, disability, culture, race, language, religion or sexual orientation, has an equal right to protection.
- All staff have an equal responsibility to act on any suspicion or disclosure that suggests an adult is at risk of harm.
- Participants and staff involved in safeguarding issues will receive appropriate support.

Prevention: PS is committed to early help and to identifying unmet needs and vulnerabilities. We work with other agencies to promote people's welfare and keep them safe.

Protection: All staff are trained to recognise and respond to abuse and neglect. Staff must be vigilant and act quickly when they suspect someone is suffering, or is likely to suffer, harm, in line with local Safeguarding Adults Board procedures.

Support: PS recognises that safeguarding is sensitive and complex, and makes sure that participants, staff and families are supported appropriately.

At PS we recognise that effective safeguarding systems are those which:

- Put the person's needs and wishes first.
- Give people a voice.
- Promote identification of early help.
- Encourage multi-agency working and sharing of information.

POLICY AIMS

- To give all staff the information they need to meet their safeguarding responsibilities.
- To ensure consistent good practice.
- To show PS's commitment to safeguarding adults.
- To contribute to PS's safeguarding procedures.

Statutory Guidance

- Care Act 2014 and the Care and Support Statutory Guidance: the main legal framework for safeguarding adults at risk, including the role of Safeguarding Adults Boards.
- Mental Capacity Act 2005.
- Safeguarding Vulnerable Groups Act 2006.
 - Sexual Offences Act 2003.
 - The Modern Slavery Act 2015.

DEFINITIONS:

An adult is anyone aged 18 or over. An adult at risk is an adult who has needs for care and support, is experiencing or at risk of abuse or neglect, and because of those needs cannot protect themselves (Care Act 2014, section 42). This policy applies to all staff, contractors and volunteers.

Staff refers to all those working for or on behalf of PS, full time or part time, in either a paid or voluntary capacity.

Safeguarding adults means protecting an adult's right to live in safety, free from abuse and neglect (Care and Support Statutory Guidance).

DSL refers to the Designated Safeguarding Lead, who provides support and expertise to PS on safeguarding matters.

Deputy DSL refers to the Deputy Designated Safeguarding Lead, who carries out the DSL's duties in their absence to keep people safe.

LSAB refers to the Local Safeguarding Adults Board.

To make sure all staff understand their safeguarding responsibilities, the Directors of Positive Smiles will:

- Identify responsibility and accountability for safeguarding arrangements clearly and at a senior level.
- Make sure all staff receive training and information on safeguarding adults at risk, so that staff are confident and well equipped to safeguard people in a sensible and proportionate way.
- Where appropriate, include safeguarding in our self-assessment and put measures in place based on risk assessment.
- Keep all staff up to date with changes to legal requirements and revise policies and procedures accordingly.

PS will work with other agencies to identify any participant who may be at risk, and will put in place the procedures and staff training needed to keep them safe.

The risks of using the internet are a priority area, especially as we help participants build digital and AI confidence.

PS will use standard precautions, such as filtering and monitoring software on our devices and networks. Staff will also stay alert to how participants use the internet during sessions.

Any allegation of abuse (against PS staff or other participants) will be acted on immediately by the DSL and the Directors, the appropriate agencies will be contacted, and disciplinary procedures used where needed.

PEOPLE WHO MAY BE PARTICULARLY VULNERABLE

- Many factors can contribute to an increase in risk, including prejudice and discrimination, isolation, social exclusion, communication issues and reluctance on the part of some adults to accept that abuse can occur.
- To make sure all participants receive equal protection, we give special consideration to people who may be more vulnerable to abuse because of their age, health, disability, mental health, race, ethnicity, religion or sexuality, including refugees and asylum seekers, people who are isolated and people who stop attending without explanation.

PS is committed to keeping people safe from specific forms of abuse. We therefore make sure that:

ALL staff understand that there are specific and emerging ways in which people can be abused, such as:

Radicalisation: the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying someone who is likely to be drawn into an extremist ideology.

- ALL staff will have a general understanding of how to identify an adult who may be at risk of radicalisation, use professional judgement and report any concern to the DSL straight away.
- The DSL will report concerns about radicalisation to the police (999 in an emergency, otherwise 101).
- Participant attendance: this is monitored through registers, and any concern about unexplained or repeated absence is discussed with the DSL.

For specific safeguarding issues, such as female genital mutilation (FGM) and forced marriage, the DSL will seek advice from the local safeguarding team and follow national guidance.

- Multi-agency working

The local Safeguarding Adults Board leads multi-agency safeguarding work for adults. PS will take part in these arrangements where relevant.

MODERN SLAVERY:

The Modern Slavery Act 2015 places a statutory duty on specified public authorities to notify the National Crime Agency (NCA) (section 52 of the Act) where they have 'reasonable grounds to believe that a person may be a victim of slavery or human trafficking'.

- Staff must contact the DSL if they suspect, or receive information, that participants (or their families) may be victims of modern slavery. The DSL should then contact the NCA.

UPSKIRTING:

Definition: upskirting is "taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm". It is a criminal offence. We do not expect it to be a significant issue at PS, but staff will be trained on it, incidents will be dealt with appropriately and participants will be made aware that it is a crime.

SERIOUS CRIME:

All PS staff should be aware of signs that a participant may be at risk from, or involved in, serious violent crime or exploitation. These could include increased

absence, new relationships with individuals or groups, a significant change in wellbeing, signs of self-harm, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that someone has been approached by, or is involved with, criminal networks or gangs.

All staff should be aware of these risks and the measures in place to manage them. County lines guidance:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/741194/HOCountyLinesGuidanceSept2018.pdf

ALLEGATIONS AGAINST STAFF:

When an allegation is made against a member of staff or a volunteer, set procedures must be followed. Entirely false or malicious allegations are rare, although misunderstandings do happen.

- We must act on every allegation, because some people who work with adults at risk do pose a serious risk. Staff who are the subject of an allegation have the right to have their case dealt with fairly, quickly and consistently, and to be kept informed of its progress.
- Where an allegation relates to a contractor, partner or volunteer, the DSL must be told immediately.

RECRUITMENT OF STAFF

PS recruits staff with integrity. Where staff may be in direct contact with participants, all required checks are carried out before they start. Where our risk assessment shows a DBS check is needed, everyone in that role must have and keep the right level of check. DBS checks are renewed every 3 years unless otherwise required.

Safer recruitment means that all applicants will:

- Complete an application form.
- Provide two referees, including at least one who can comment on the applicant's suitability to work with adults at risk.
Provide evidence of identity and qualifications.
- Be checked through the Disclosure and Barring Service (DBS) as appropriate to their role
- Be interviewed.
- Be subject to on-going vetting through the DBS.
- All new staff will have an induction that covers Positive Smiles' safeguarding policies and identifies their safeguarding training needs.

STAFF TRAINING:

- It is important that all staff have appropriate training to enable them to recognise the possible signs of abuse and neglect and to know what to do if they have a concern. New staff will receive training during their induction. All staff and the Directors will receive training that is updated annually, and the DSL and Deputy DSL will receive training in inter-agency procedures.
- Every member of staff is given this policy, to support appropriate behaviour and minimise allegations of professional abuse.
- The Directors must be satisfied that every member of staff has received, read and understood this policy.

CONFIDENTIALITY AND INFORMATION SHARING

All staff will understand that safeguarding issues need a high level of confidentiality, out of respect for the people involved and so that evidence is not compromised.

Staff should only discuss concerns with the DSL or a Director (depending on who is the subject of the concern). That person will then decide who else needs the information and will share it on a 'need-to-know' basis.

Safeguarding information will be stored and handled in line with the Data Protection Act 2018 and UK GDPR principles. Information is:

- Processed for limited purposes.
- Adequate, relevant, and not excessive.
- Accurate.
- Kept no longer than necessary.
- Processed in accordance with the data subject's rights.
- Secure.

Safeguarding disclosure forms, Cause for Concern forms and other written information will be stored securely. Electronic information will be password protected and only made available to relevant individuals.

- Every effort will be made to prevent unauthorised access. Sensitive information should not be stored on laptops, which could be lost or stolen. If safeguarding information must be kept on portable media, such as a USB drive, it will be kept in locked storage.
- Safeguarding records may be exempt from some data protection disclosure rights, so participants do not have an automatic right to see them. Any request to

see safeguarding records must be referred to the DSL or a Director.

- Data protection law does not prevent staff from sharing information with relevant agencies where it may help to protect an adult. PS's Data Protection & Confidentiality Policy covers confidentiality and information sharing and is available to participants on request.

INFORMATION SHARING:

It is necessary to show that a fair balance has been struck between the individual rights of the person and the relevant justification when information is shared.

Key questions to consider are:

- Is there a clear and legitimate purpose for sharing information?
- Do you have reasonable cause to suspect an adult is suffering, or is likely to suffer, significant harm?

It is good practice to tell the adult that you intend to make a referral to adult social care, but it is not a prerequisite.

Sharing confidential information without consent will normally be justified in the public interest:

- When there is evidence or reasonable cause to believe that an adult at risk is suffering, or is at risk of suffering, significant harm.
- To prevent serious harm to an adult, including through the prevention, detection and prosecution of serious crime.

Staff must decide whether sharing information is a necessary and proportionate response to protect the person concerned. The decision must weigh up what might happen if the information is shared against what might happen if it is not.

SECURITY OF PREMISES

PS will maintain a safe and secure environment for all participants. Security of our venues is a key part of our health and safety risk assessment and is kept under continual review.

LEGISLATIVE GUIDANCE

Our procedures follow current government guidance, including the Care and Support Statutory Guidance and the Department of Health 'statement of government policy on adult safeguarding'.

For Adults: <https://www.gov.uk/government/publications/adult-safeguarding-statement-of-government-policy>

INFORMING STAFF OF THEIR ROLES AND RESPONSIBILITIES

PS will make sure all staff receive, and are trained in, this Safeguarding Adults Policy.

SAFEGUARDING ADULTS AT RISK – PROCEDURES

AIM

This section sets out the duty and responsibility of staff working on behalf of PS to safeguard adults at risk. All adults have the right to be safe from harm and to live free from fear of abuse, neglect and exploitation.

OBJECTIVES

To explain the responsibilities of PS, its staff, volunteers and directors in protecting adults at risk, give staff an overview of adult safeguarding, and set out a clear procedure to follow when concerns arise.

CONTEXT

For the purpose of this policy 'adult' means a person aged 18 years or over.

WHAT DO WE MEAN BY ABUSE?

Abuse of an adult at risk may be a single act or repeated acts. It may be a failure to act or to provide appropriate care, an act of neglect, or it may occur where a person is persuaded to enter into a financial or sexual transaction

to which they have not, or cannot, consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the individual.

Concerns about abuse may be reported to adult social care after a single incident or repeated incidents. For some people, abuse takes the form of neglect and poor standards of care, which, if ignored, can lead to serious harm to physical and mental health and even death.

Anyone with concerns about poor care standards or neglect in a care setting may raise them within the service, with the regulator and/or with adult social care.

Where concerns relate to an adult at risk living in their own home, with family or with informal carers, they must be reported to adult social care. These reports must be addressed through

the adult protection process and a risk assessment must be undertaken to determine an appropriate response to reduce or remove the risk.

WHO IS AN 'ADULT AT RISK'?

Under the Care Act 2014, an adult at risk is a person aged 18 or over who has needs for care and support (whether or not these are being met), is experiencing or at risk of abuse or neglect, and because of those needs is unable to protect themselves. This replaced the earlier 'vulnerable adult' definition in 'No Secrets' (2000).

This could include people with learning disabilities, mental health problems, older people and people with a physical disability or impairment. It is important to include people whose condition and subsequent vulnerability fluctuates. It may include an individual who may be vulnerable because of their role as a carer in relation to any of the above.

It may also include victims of domestic abuse, hate crime and anti-social behaviour. A person's need for extra support to protect themselves may be increased by other factors, such as physical frailty or chronic illness, sensory impairment, challenging behaviour, drug or alcohol problems, social or emotional problems, poverty or homelessness.

Many adults at risk may not realise that they are being abused. For instance, an older person who depends on their family may feel they must tolerate losing control of their finances or their home. They may be reluctant to speak up for fear of upsetting their carers or making things worse.

It is important to consider the meaning of 'Significant Harm'. The Law Commission, in its consultation document 'Who Decides,' issued in Dec 1997 suggested that; 'harm' must be taken to include not only ill treatment (including sexual abuse and forms of ill treatment which are not physical), but also 'the impairment of, or an avoidable deterioration in, physical or mental health; and the impairment of physical, intellectual, emotional, social or behavioural development'.

LEGAL FRAMEWORK

- Care Act 2014, Human Rights Act 1998, Mental Capacity Act 2005 and Public Interest Disclosure Act 1998.
- Data Protection Act 2018, UK GDPR, Freedom of Information Act 2000, Safeguarding Vulnerable Groups Act 2006, and the Deprivation of Liberty Safeguards Code of Practice 2008.
- The Mental Capacity Act 2005, covering England and Wales, provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to prepare for a time when they may lack capacity in the future. It sets out who can take decisions, in which situations, and how they must go about this.

- The Human Rights Act 1998 gives legal effect in the UK to the fundamental rights and freedoms contained in the European Convention on Human Rights (ECHR)
- The Public Interest Disclosure Act 1998 (PIDA) created a framework for whistle blowing across the private, public, and voluntary sectors. The Act provides almost every individual in the workplace with protection from victimisation where they raise genuine concerns about malpractice in accordance with the Act's provisions.

THE ROLE OF STAFF

All staff working on behalf of PS have a duty to promote the welfare and safety of adults at risk.

Staff may receive disclosures of abuse or notice that an adult is at risk. This policy helps staff and volunteers respond with confidence.

TYPES OF ABUSE

Abuse may be a single act or repeated acts. It may be physical, verbal or psychological, an act of neglect or a failure to act, or it may occur when an adult at risk is persuaded to enter into a financial or sexual transaction to which they have not consented or cannot consent.

Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. The main types of abuse include:

- Physical abuse - including hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions.
- Sexual abuse - including rape and sexual assault or sexual acts to which the adult has not consented or could not consent or was pressured into consenting.
- Psychological abuse - including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.
- Financial or material abuse - including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.
- Neglect, acts of omission and self-neglect - including ignoring medical or physical care needs, failure to provide access to health, social care or educational services, withholding necessities such as medication, adequate nutrition and heating, and a person neglecting their own care, health or surroundings.

- Discriminatory abuse - including race, sex, culture, religion, politics that is based on a person's disability, age or sexuality and other forms of harassment, slurs, or similar treatment, hate crime.
- Organisational abuse - including neglect and poor care practice within a care home, day centre or other service, especially where care standards fall below an acceptable level.
- Multiple forms of abuse - Multiple forms of abuse may occur in an ongoing relationship or an abusive service setting to one person, or to more than one person at a time, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm. Any or all these types of abuse may be perpetrated as the result of deliberate intent and targeting of vulnerable people, negligence, or ignorance.
- Domestic abuse:
 - Home Office Definition 2004:

'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are, or have been intimate partners or family members, regardless of gender or sexuality.'
 - Women's Aid Definition:

'Domestic violence is physical, sexual, psychological or financial violence that takes place within an intimate or family-type relationship and that forms a pattern of coercive and controlling behaviour. This can also include forced marriage and so-called "honour crimes". Domestic violence may include a range of abusive behaviours, not all of which are in themselves inherently "violent."
 - Most research suggests that domestic violence occurs in all sections of society irrespective of race, culture, nationality, religion, sexuality, disability, age, class or educational level.
 - Both definitions would therefore also include incidents where extended family members may condone or share in the pattern of abuse e.g. forced marriage, female genital mutilation and crimes rationalised as punishing women for bringing 'dishonour' to the family.
 - Adults at risk may be victims of domestic abuse themselves, or be affected by it happening in their household. This is likely to have a serious effect on their physical and mental wellbeing.
 - Where adults at risk are victims of domestic abuse, they may need extra support to plan their future. Violence or threats may continue after a victim has left the abuser, so it is important that everyone affected has support to stay safe.

- Local domestic abuse arrangements bring together the police, social care and health. Where an adult at risk may be affected, concerns will also be dealt with through adult safeguarding procedures.

PROCEDURE IN THE EVENT OF A DISCLOSURE

It is important that adults at risk are protected from abuse. All complaints, allegations or suspicions must be taken seriously.

This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion that an adult at risk has been abused.

Promises of confidentiality must not be given as this may conflict with the need to ensure the safety and welfare of the individual.

A full record shall be made as soon as possible of the nature of the allegation and any other relevant information.

This must include information in relation to the date, the time, the place where the alleged abuse happened, your name and the names of others present, the name of the complainant and, where

different, the name of the adult who has allegedly been abused, the nature of the alleged abuse, a description of any injuries observed, the account which has been given of the allegation.

RESPONDING TO AN ALLEGATION

Any suspicion, allegation or incident of abuse must be reported to the DSL (or the Deputy DSL in their absence) as soon as possible and within 24 hours.

The DSL will report the matter to the local adult social care team and record the date and time of the report and the name and role of the person spoken to. A telephone report must be confirmed in writing within 24 hours.

RESPONDING APPROPRIATELY TO AN ALLEGATION OF ABUSE

In the event of an incident or disclosure:

DO

- Make sure the individual is safe.
- Assess whether emergency services are required and if needed call them.
- Listen.
- Offer support and reassurance.
- Ascertain and establish the basic facts.
- Make careful notes and obtain agreement on them.

- Ensure notation of dates, time and persons present are correct and agreed.
- Take all necessary precautions to preserve forensic evidence.
- Follow correct procedure.
- Explain areas of confidentiality; immediately speak to your line manager or the DSL for support and guidance.
- Explain the procedure to the individual making the allegation.
- Remember the need for ongoing support.

DON'T

- Confront the alleged abuser.
- Be judgmental or voice your own opinion.
- Be dismissive of the concern.
- Investigate or interview beyond that which is necessary to establish the basic facts.
- Disturb or destroy possible forensic evidence.
- Consult with persons not directly involved with the situation.
- Ask leading questions.
- Assume information.
- Make promises.
- Ignore the allegation.
- Elaborate in your notes.
- Panic.

The person who first hears of alleged abuse is not responsible for deciding whether abuse has occurred. This is a task for the professional safeguarding agencies, following a referral from the DSL.

Allegations management: allegations of abuse or malpractice against a member of staff or a volunteer.

Any allegation against a person who works with adults at risk, including volunteers, must be dealt with fairly, quickly and consistently, in a way that protects the person at risk and supports the person who is the subject of the allegation. Allegations are managed through local Safeguarding Adults Board procedures.

The framework for managing cases applies to a wider range of allegations than those in which there is reasonable cause to suspect an adult is suffering, or is likely to suffer, significant harm.

It also covers allegations that suggest a person may be unsuitable to work with adults at risk, including concerns about their conduct in their personal or professional life.

The following procedure will be followed:

Reporting procedure for allegations: if the allegation is against a PS member of staff or volunteer, it must be reported immediately, and within 24 hours at the latest, to the DSL. If the allegation is against the DSL, it must be reported to the Deputy DSL. The DSL or Deputy DSL will refer the allegation to adult social care on the same day and, where required, to the Disclosure and Barring Service (DBS).

If the investigation upholds the allegation, PS will refer the person to the Disclosure and Barring Service (DBS) where required.

CONFIDENTIALITY

Safeguarding adults raises issues of confidentiality that everyone must understand. Staff, volunteers and directors have a professional responsibility to share relevant information about the protection of adults at risk with other professionals, particularly investigating agencies and adult social care.

Clear boundaries of confidentiality will be communicated to all.

All personal information about an adult at risk will be kept confidential. Written records will be kept in a secure area for the period set out in data protection guidelines, and will only record the details required in the initial contact form.

If an adult confides in a member of staff and requests that the information is kept secret, it is important that the member of staff tells the adult sensitively that he or she has a responsibility to refer cases of alleged abuse to the appropriate agencies.

Within that context, the adult must, however, be assured that the matter will be disclosed only to people who need to know about it.

Where possible, consent must be obtained from the adult before sharing personal information with third parties. In some circumstances obtaining consent may be neither possible nor desirable, as the safety and welfare of the adult is the priority.

Where a disclosure has been made, staff must let the adult know the position regarding their role and what action they will have to take as a result.

Staff must assure the adult that they will keep them informed of any action to be taken and why. The adult's involvement in the process of sharing information must be fully considered and their wishes and feelings considered.

This policy needs to be read in conjunction with other policies for the organisation including:

- Data Protection & Confidentiality Policy.

THE ROLE OF KEY INDIVIDUAL AGENCIES

Adult Social Services

The Care Act 2014 requires each local authority to lead a multi-agency system for safeguarding adults, working with partners to protect adults at risk from abuse and neglect.

Every local authority must have a Safeguarding Adults Board, which oversees multi-agency work to protect adults at risk. The board is made up of senior people from partner organisations who can influence decisions and resources.

The Police

The Police play a vital role in Safeguarding Adults with cases involving alleged criminal acts. It becomes the responsibility of the police to investigate allegations of crime by preserving and gathering evidence.

Where a crime is identified, the police will be the lead agency and they will direct investigations in line with legal and other procedural protocols.

Role of Line Manager

The role of the line manager is to support the member of staff, director or volunteer involved with the incident and to make sure the correct procedures are followed.

The line manager could, if agreed with the staff member dealing with the incident, contact the DSL in the first instance.

The line manager must make sure all staff in their team are familiar with PS's adult safeguarding procedures and complete training where appropriate.

Training

Training will be provided, as appropriate, so that staff are aware of these procedures. Specialist training will be provided for the DSL and Deputy DSL.

Complaints procedure

The organisation has a complaints procedure available to all staff.

Whistleblowing Policy

The organisation has a Whistleblowing Policy, and staff can raise concerns by following its guidance.

Recruitment procedure

The organisation operates procedures that take account of the need to safeguard and promote the welfare of adults at risk, including appropriate checks on new staff.

INTRODUCTION OF MARTYN'S LAW

On Monday 19 December 2022, the Government announced details for the Protect

Duty, now to be known as 'Martyn's Law' in tribute of Martyn Hett, who was killed alongside 21 others in the Manchester Arena terrorist attack in 2017.

We have had 14 terrorist attacks since then that have caused deaths and casualties for people conducting their everyday lives. The attacks are multifaceted and hard to predict, therefore security needs to be improved to ensure robustness, proportionality and consistency especially at public places

to ensure that we are better prepared for any future incidents.

It will place a requirement on those responsible for certain locations to consider the threat from terrorism and implement appropriate and proportionate mitigation measures.

Proportionality is a fundamental consideration for Martyn's Law. It establishes a tiered model linked to activity that takes place at a location and its capacity. This will prevent undue burden on premises in scope.

A standard tier will apply to locations with a maximum capacity of between 200 and 799. The aim is to increase use of existing resources that help teams take low-cost, simple yet effective steps to improve preparedness. This will include training, information sharing and a preparedness plan (such as locking doors to delay attackers, or knowing lifesaving treatments staff can give while waiting for emergency services).

An enhanced tier will focus on high-capacity locations in recognition of the potential consequences of a successful attack. Locations with a capacity of over 800 people at any time, will additionally be required to undertake a risk assessment to inform the development and implementation of a thorough security plan. Subsequent measures could include developing a vigilance and security culture, implementation of physical measures like CCTV or new systems and processes to enable better consideration of security.

This is now law (the Terrorism (Protection of Premises) Act 2025). PS will comply with it where it applies to our venues once it comes into force.

REPORTING 'SAFEGUARDING' CONCERNS

Initial cause for concern form, which must be discussed with the line manager, the DSL or a Director within 24 hours.

Date:

Time:

Name of individual cause for concern is about:

Age (if known):

Address (if known):

Describe your concern and action taken:

Observations to support cause for concern:

Description and location of any visible marks, bruising, etc.:

Name of alleged abuser and relationship with the person (if known):

Name of person completing form:

Signature:

Date:

Name of Line Manager:

Signature:

Date:

Positive Smiles Designated Safeguarding Lead (DSL):	Shabir Siddiq
Telephone:	07970347899
Email:	shabir@positivesmiles.co.uk
Deputy Designated Safeguarding Lead (Deputy DSL):	Moosa Chohan
Telephone	07738609177
Email	moosa@positivesmiles.co.uk

Signed by the Director



01/08/2026

External Support Organisations

For Help With...	Organisation	Website	Contact Details
Autism	National Autistic Society	www.autism.org.uk	020 7833 2299
Bereavement	Cruse Bereavement Care	www.cruse.org.uk	0808 808 1677*
Blind Support	Royal National Institute of Blind People	www.rnib.org.uk	0303 123 9999
Bullying	Bullying UK (Family Lives)	www.bullying.co.uk	0808 800 2222
Carers	Carers Trust	www.carers.org.uk	0300 772 9600
Deaf Support	British Deaf Association	www.bda.org.uk	020 7697 4140
Domestic Abuse	Refuge	www.refuge.org.uk	0808 2000 247*
Drugs	Talk To Frank	www.talktofrank.com	0300 123 6600
Employment	Positive Smiles (we will signpost you)	www.positivesmiles.co.uk	01254 946444
	ACAS	www.acas.org.uk	0300 123 1100
FGM	Positive Smiles (we will signpost you)	www.positivesmiles.co.uk	01254 946444
Financial Issues	MoneyHelper	www.moneyhelper.org.uk	0800 138 7777*
Forced Marriage	Forced Marriage Unit	www.gov.uk/stop-forced-marriage	020 7008 0151
Housing Issues	Shelter	england.shelter.org.uk	0808 800 4444*
Learning Difficulties	Positive Smiles (we will signpost you)	www.positivesmiles.co.uk	01254 946444
Legal Issues	Citizens Advice	www.citizensadvice.org.uk	0800 144 8848*
Mental Health	Mind	www.mind.org.uk	0300 123 3393
	Campaign Against Living Miserably	www.thecalmzone.net	0800 58 58 58*
	Give us a Shout	www.giveusashout.org	Text Shout to 85258
Personal Safety	The Suzy Lamplugh Trust	www.suzylamplugh.org	0808 802 0300*
Racism	Positive Smiles (we will signpost you)	www.positivesmiles.co.uk	01254 946444
Relationships	Positive Smiles (we will signpost you)	www.positivesmiles.co.uk	01254 946444
Self-Harm	Samaritans	www.samaritans.org	116 123*
Sexual Abuse	The Survivors Trust	www.thesurvivorstrust.org	0808 801 0818*
	Rape Crisis	www.rapecrisis.org.uk	0808 500 2222*
Sexuality	Stonewall	www.stonewall.org.uk	0800 050 2020*
Victim Support	Victim Support UK	www.victimsupport.org.uk	0808 168 9111*

(* Free from landlines)