



Policy Safeguarding – Children, Young People and 'Adults at Risk'

Policy Statement:

The Practice recognises that it has social, moral and legal responsibilities to protect and safeguard the welfare of children, young people and adults in vulnerable situations with whom its work brings it into contact.

All employees are expected to have a working knowledge of the following legislation and guidance associated with Safeguarding:

- Children's Act 1989
- Children's Act 2004 as amended by the Children and Social Work Act 2017
- Care Act 2014
- Safeguarding children and young people: roles and competences for health care staff Intercollegiate Document (2014)
- Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children (July 2018)

All employees are expected actively to safeguard and promote the welfare of individuals, their families and carers and other employees by being alert to the possibility that some may have suffered or be at risk of suffering significant harm and by reporting any concerns promptly.

The Practice will take all concerns, suspicions and allegations of abuse or harm seriously and will respond to them promptly and professionally.

Through the Disclosure and Barring Service (DBS), the Practice will ensure that any employees, who have substantial unsupervised contact with children and adults in vulnerable situations, will be checked for relevant criminal convictions whenever appropriate and possible within the constraints of legislation. An enhanced disclosure will normally be required. A satisfactory check will need to be received by the Practice before a potential employee or associate may start work or engage in relevant activities on an unsupervised basis. For non-UK nationals or people who have lived overseas, a check may also be required from that country.

Aim of the Policy:

This Policy and its associated procedure sets out how the Practice will deal with safeguarding and other issues which give cause for concern and the type of action that the Practice may take to manage issues and provide support.

This Policy is intended to provide clear guidelines and procedures for identifying risks, reporting concerns and ensuring that appropriate action is taken where there are concerns that children, young people or adults in vulnerable situations are or are in danger of becoming vulnerable to:

- Abuse (abuse can be physical, emotional, psychological, sexual, domestic, financial, exploitative or neglect/abandonment)
- Behaviours which cause harm to themselves or to others
- Forced (as opposed to arranged) marriage
- Radicalisation
- Suicidal thoughts (other than on a fleeting/passing basis)

Policy:

We are committed to safeguarding children and ‘Adults at risk’. Our employees accept and recognise our responsibilities to develop an awareness of the issues which may cause children and ‘Adults at risk’ harm.

We endeavour to safeguard children and ‘Adults at risk’ by:

- An awareness of and adopting safeguarding guidelines through our Practice Policies and Procedures
- A code of conduct for employees
- Making employees, patients and their families and carers aware that we take child and ‘Adults at risk’ protection seriously and respond to all concerns
- Sharing information about concerns with agencies who need to know and involving patients, families and carers appropriately
- Following carefully the Practice Procedures for employee recruitment and selection and where appropriate requesting enhanced criminal records checks
- Providing effective management for employees by ensuring access to supervision, support and training

Definitions

The term “safeguarding” relates to the action taken to promote the welfare of children and adults in vulnerable situations and to protect them from harm

Children and young people:

A child is anyone who has not yet reached their 18th birthday (Children Acts, 1989 and 2004 as amended by the Children and Social Work Act 2017). ‘Children’ therefore means ‘children and young people’ throughout. The fact that a child has reached 16 years of

age, is living independently or is in further education, is a member of the armed forces, is in hospital, in prison or in a Young Offenders' Institution, does not change his or her status as a child or entitlement to services or protection under the Children Act 1989.

Safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment;
- Preventing impairment of children's health or development;
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care;

Child protection is part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are at risk of suffering, significant harm.

Treating children and young people:

- We will gain consent from a parent or guardian
- Ensure that another member of the practice team, or the parent or guardian is present at all times. We will never be left alone with a child, young person on the Practice premises
- Respect the wishes of a child as you would an adult
- Identify if the child, young person, parent or guardian has any identified communication need and support that individual with information in the appropriate format
- Take all reasonable steps to ensure their health, safety and welfare

For adults

Abuse – Abuse is about the misuse of the power and control that one person has over another.

Safeguarding means protecting a person's rights to live in safely free from abuse and neglect whilst recognising that adults have complex interpersonal relationships. (Care Act 2014)

The Care Act 2014 - Clarifies Adult Safeguarding responsibilities in statute for the first time from April 2015. There is a change of language:

- No longer a 'Vulnerable Adult' but an 'Adult at Risk'
- No longer make an 'Alert' but raise a 'Concern'
- No longer a 'Perpetrator' but look at the 'Source of harm'

This Policy is underpinned by the following principles:

- Patients have access to appropriate information (Accessible Information Standard 2016) and knowledge to ensure that they can make an informed choice

- Patients are given the opportunity to consider the various treatment options available to them. They are encouraged to participate fully in their care at the Practice
- Patients are supported to make their own decisions and to give or withhold consent to treatment. Unless provided for otherwise by law, no-one can give or withhold consent on behalf of another adult
- Information about patients held by the Practice is managed appropriately and all employees understand the need for confidentiality
- The individual needs of each patient are respected
- Orthodontists and their Practice team in working with parents or carers who are experiencing personal problems (including substance misuse, mental health issues, domestic abuse and learning disabilities) must give consideration of the impact these risk factors may have on the ability to care for those dependent on these individuals and where necessary ensure that safeguarding assessments are conducted and appropriate referrals are made
- The background and culture of all patients is respected
- Practice procedures ensure the safety of patients at all time
- Recruitment and selection procedures at the Practice are followed routinely and ensure that all required checks are carried out.

Designated Safeguarding Officer

The Sarah Tollady is the designated safeguarding officer for the Practice. Her responsibilities include:

- Implementing and promoting this Policy and associated procedures
- Ensuring that the Policy is monitored and reviewed in accordance with changes in legislation, guidance and best practice
- Undertaking relevant training in safeguarding procedures and ensuring that her knowledge is kept up to date (*Wirral Safeguarding Children Board – Multi-Agency Safeguarding Competency Frameworks*)
- Acting as a point of contact for those who have safeguarding concerns, receiving information and recording those concerns
- Acting upon concerns as appropriate in the circumstances, e.g. by making external referrals to Social Services or Police
- Monitoring the implementation of this Policy and associated procedures
- Co-ordinating safeguarding arrangements
- Providing information, advice and organising appropriate training for employees (*Wirral Safeguarding Children Board – Multi-Agency Safeguarding Competency Frameworks*)
- Maintaining confidential records of relevant cases and action taken

Signs of abuse

Employees may observe signs of abuse or neglect or hear something that causes them concern about a children or Adults at Risk. They are not responsible for making a diagnosis of child abuse or neglect, just for sharing concerns appropriately. Each team member should be aware of the local procedures for child protection.

Abuse or neglect may present to employees in a number of different ways:

- Through a direct allegation (sometimes termed a ‘disclosure’) made by the child, adult at risk, a parent or some other person
- Through signs and symptoms which are suggestive of physical abuse or neglect or
- Through observations of child behaviour or parent-child interaction; or observation of the adult at risk and the relationship they have with their carer.
- Failure to attend for agreed appointments if more than 3 appointments are failed then the practice will contact the patient’s dentist and or the safeguarding team for advice. The reasons for failing the appointment should be ascertained and employees should be aware of the action to take where there is concern a child has been deliberately harmed through fabricating or inducing illness.

Allegations against employees

Despite all efforts to recruit safely there will be occasions when allegations of abuse against children and adults are reported to have been committed by employees who work in some capacity with patients. The Practice has arrangements in place for monitoring and evaluating the effectiveness of their policies and procedures regularly. The Practice supports employee the use the Whistle Blowing Policy to raise their concerns relating to something that affects patient safety or they have concerns of professional conduct.

In the event of an allegation been made against an employee:

The accused employee should:

- Be treated fairly and honestly and helped to understand the concerns expressed and processes involved;
- Be kept informed of the progress and outcome of any investigation and the implications for any disciplinary or related process;
- If suspended, be kept up to date about events in the workplace

Dealing with safeguarding concerns

All employees must actively seek to safeguard and promote the welfare of employees, patients and their family or carers and be alert to the possibility that some employees, patients and their family or carers may have suffered or be at risk of suffering significant harm.

The Practice particularly looks at the reasons why patients miss appointments and concerns are always taken seriously and dealt with as follows:

- Discuss your concerns with Sarah Tollady or the Principal Orthodontist Richard Gibson
- Contact the individual in the agreed manner i.e. telephone, email, text message or post to ascertain why the appointment has been missed and rearrange appointment at a convenient time and date.

- Email responsible person (when appropriate) to raise concern
- Email Dentist to inform regarding missed appointment and subsequent impact on patient treatment
- If you remain concerned, seek informal advice from the local social services department (0151 606 2006 or 0151 677 6557 for emergencies after 5pm) without disclosing the individual's name to help you decide whether a formal referral is needed.
- Seek permission from the individual to refer – unless doing so would put the individual at greater risk, the parents or carers are being abusive or violent and discussion would put others at risk, or sexual abuse by a family member is suspected
- If consent is not obtained, contact the duty social worker at the local Social Services Department or the Police, so that action can be taken to safeguard the welfare of the individual - contact details on page 7

Records

Records of the concern should be maintained and be restricted to:

- Record concern in Safeguarding Log – this log is a register of all concerns raised (**Safeguarding Log Sept 18 – Sept 19**)
- Record the nature of the concern or injury (**Confidential Safeguarding Record**) including the facts to support the possibility that the concerns/injuries are suspicious
- Maintain records of contact with the individual including text messages, emails, telephone calls and letters within the individual's notes. (**Record of actions and contacts**)
- Maintain updated record of all meetings (**Confidential Record of Meetings form**)
- Record number of appointments arranged and missed.
- If more than 3 consecutive appointments are missed, contact the individual's dentist and see if they know why they haven't attended.
- Contact the safeguarding team for advice if you cannot determine why the individual has not turned up for the appointments.
- Complete **Record of actions and decisions**

Follow up:

The Safeguarding Officer should always follow up any referral to ensure that the concern has been fully investigated and measures put into place to support the individual involved.

Other Practice Policies and Procedures relevant to this Safeguarding Policy include:

- Confidentiality Policy
- Consent Policy
- Complaints
- Whistleblowing
- Equal Opportunities Policy

- Equality and Diversity Policy
- Patient Safety Policy
- Recruitment and Selection Policy

Training:

Safeguarding on-line training – (<http://www.e-lfh.org.uk/>) is included in the induction for all new employees. Updating and knowledge testing is conducted at least annually through <http://www.e-lfh.org.uk/>. **Safeguarding is a set Agenda Item for all Practice Meetings**

Care Quality Commission – Training Requirements:

We expect providers to follow the guidance in the [Intercollegiate Document for Healthcare Staff; Safeguarding Children and Young people: roles and competences for health care staff \(March 2014\)](#). This sets out the minimum training requirements required:

- Level 1: for all non-clinical staff (e.g. receptionists and Practice Managers)
- Level 2: for all dentists and dental care professionals
- Level 3: for Paediatric Dentists and Paediatric Orthodontists (i.e. those who could potentially contribute to assessing, planning, intervening and evaluating the needs of a child or young person and parenting capacity where there is safeguarding / child protection concerns).

Approval

This policy has been approved by the undersigned and will be reviewed on an annual basis.

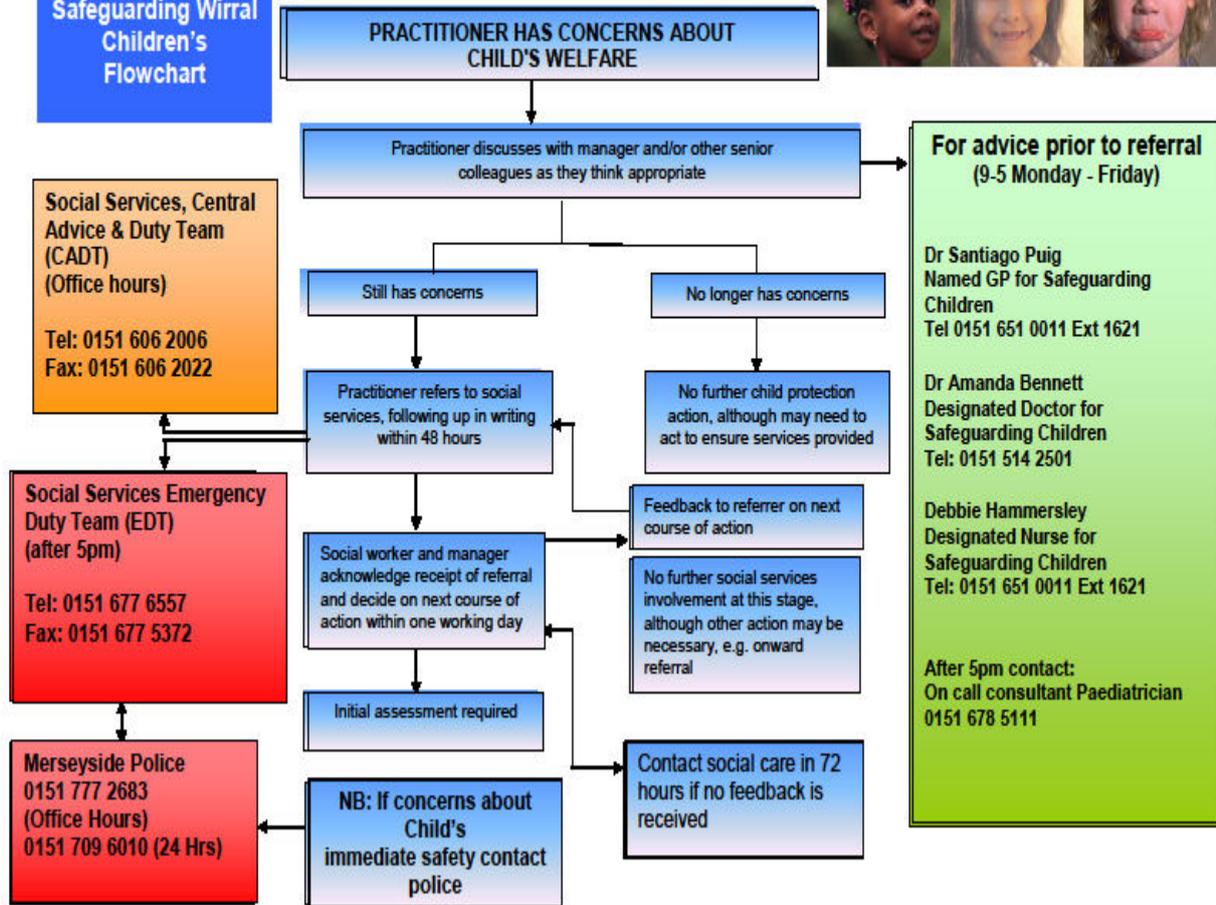
Name	Richard Gibson
Date approved	Sept 2018
Review date	Sept 2019



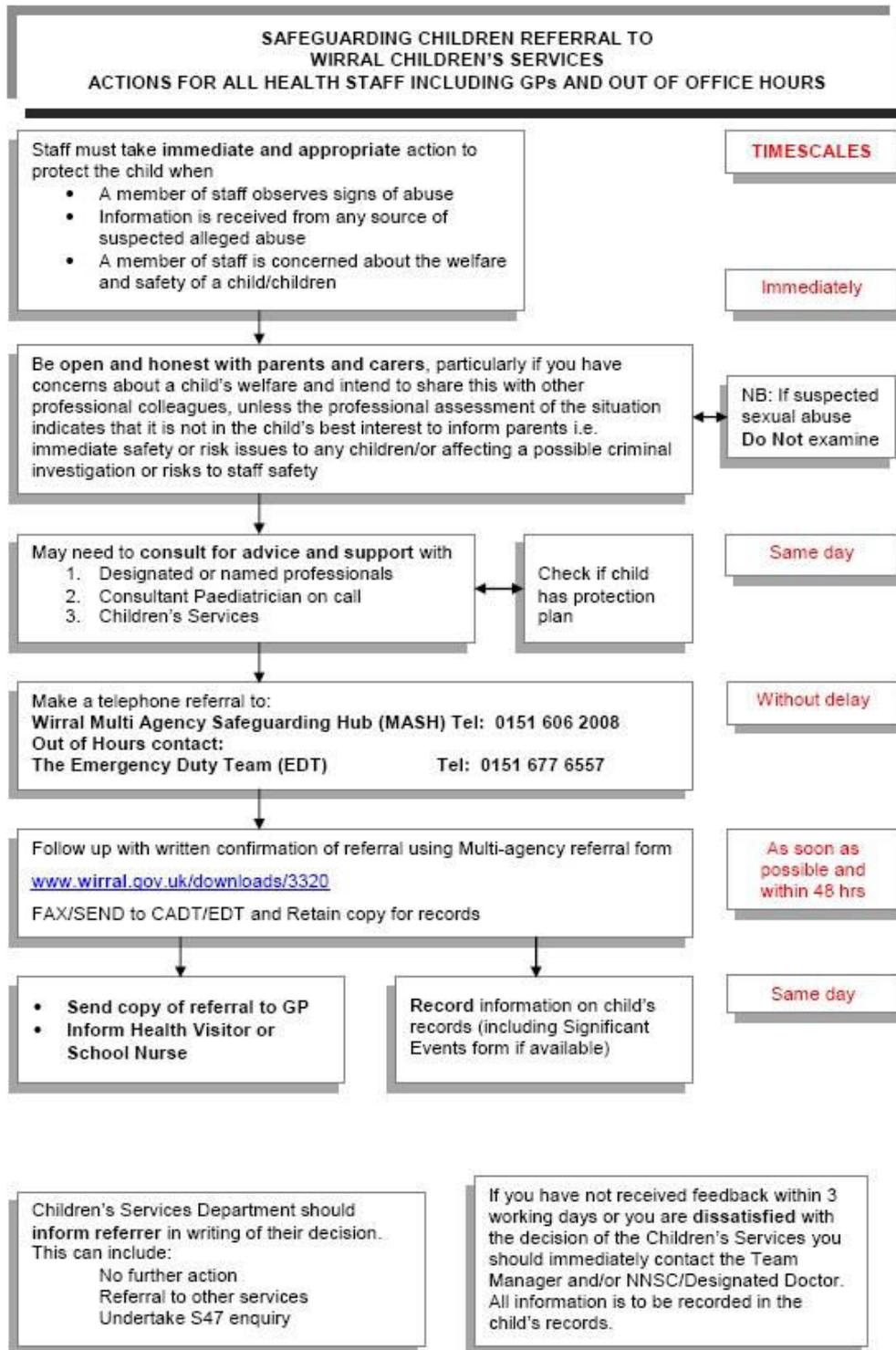
Wirral Clinical Commissioning Group

What To Do if you have concerns about a Child

Safeguarding Wirral Children's Flowchart

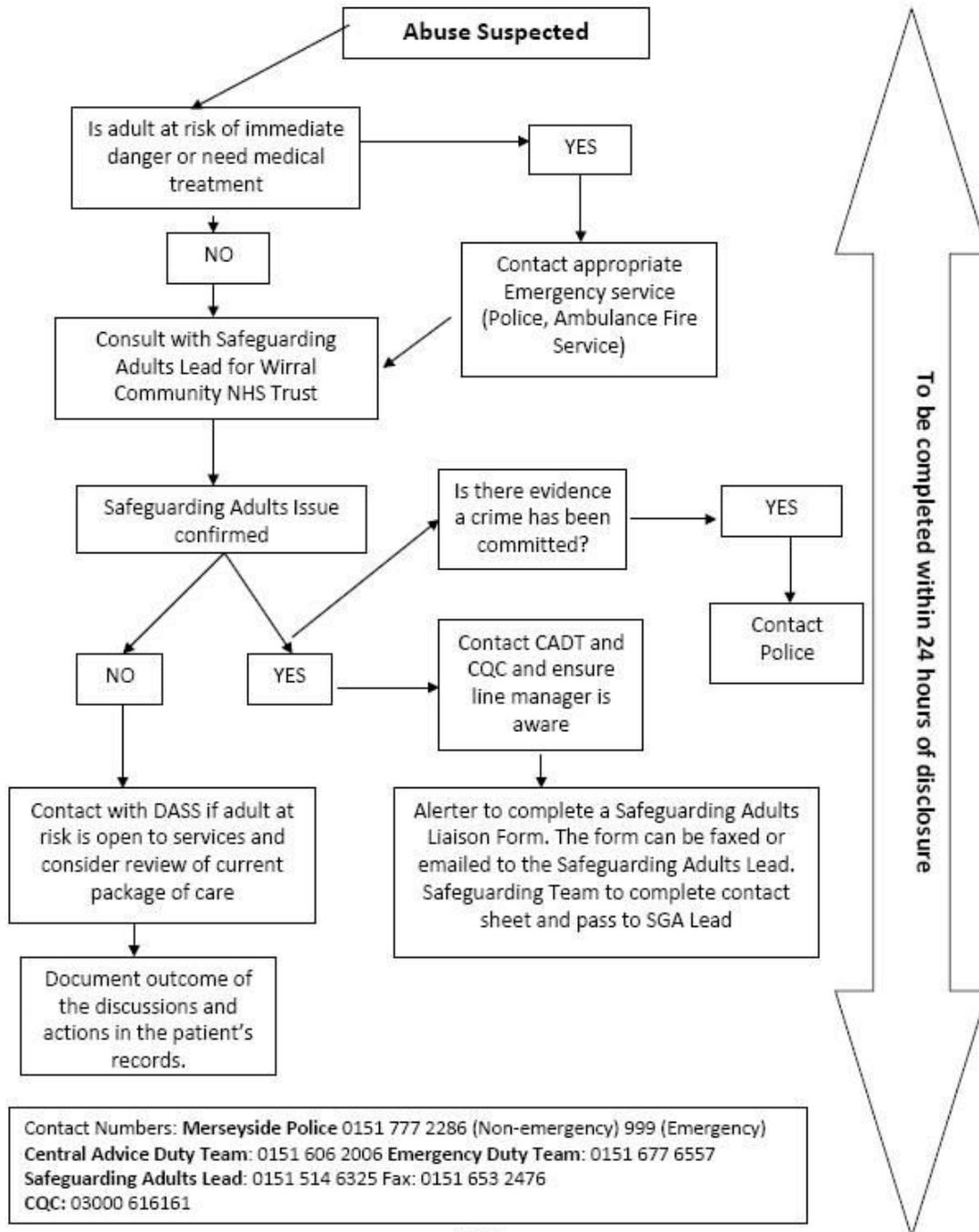


Revised Oct 2016 GM



Appendix 1

Staff member has concerns regarding a Vulnerable Adult



Contact Numbers: **Merseyside Police** 0151 777 2286 (Non-emergency) 999 (Emergency)
Central Advice Duty Team: 0151 606 2006 **Emergency Duty Team:** 0151 677 6557
Safeguarding Adults Lead: 0151 514 6325 Fax: 0151 653 2476
CQC: 03000 616161

What To Do if you have concerns about an adult (For Health Care staff)

**Safeguarding Adult
Flowchart For
Referral in Wirral**



**Social Services,
Central Advice &
Duty Team (CADT)
(Office hours)**
Tel: 0151 606 2006
Fax: 0151 606 2022

**Social Services
Emergency Duty
Team (EDT)
(after 5pm)**
Tel: 0151 677 6557
Fax: 0151 677 5372

**Merseyside Police
0151 777 2683
(Office Hours)
0151 709 6010 (24 Hrs)**

**PRACTITIONER HAS CONCERNS ABOUT
ADULT'S WELFARE**

Practitioner discusses with manager and/or other senior colleagues as they think appropriate

Still has concerns

No longer has concerns

Practitioner refers to social services, following up in writing within 48 hours

No further adult protection action, although may need to act to ensure services provided

Social worker and manager acknowledge receipt of referral and decide on next course of action within one working day

Feedback to referrer on next course of action

No further social services involvement at this stage, although other action may be necessary, e.g. onward referral

Initial assessment required

Contact social care in 72 hours if no feedback is received

NB: If concerns about adult's immediate safety contact police

**For advice prior to referral
(9-5 Monday - Friday)**

Named GP for Safeguarding Adults
Dr Mark Fraser
Tel Mobile 07771790605
Markfraser2@nhs.net

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Designated Nurse for Safeguarding Adults
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