

CASE TRAINING SERVICES

Safeguarding Policy

Adults at risk, children and young people

Document owner	Chief Executive Officer / Designated Safeguarding Lead
Policy version	2026 update - for Board approval
Approved by	Board of Trustees
Approval date	To be recorded at approval
Review cycle	At least annually, or sooner following legal, regulatory or operational change or a safeguarding incident
Next review due	September 2027

Safeguarding is everyone’s responsibility.

IMMEDIATE ACTION

If anyone is in immediate danger, call 999. Otherwise, report the concern without delay to the DSL or a Deputy and make a factual written record.

1. Policy statement

CASE Training Services is committed to a safe, supportive, inclusive and person-centred environment for trainees, staff, volunteers, trustees, contractors and visitors. We will take all reasonable steps to prevent harm, recognise concerns early, respond promptly and work with statutory agencies where required.

We recognise our duty of care to protect adults at risk, children and young people from abuse, neglect and exploitation. The welfare, dignity, rights, wishes and safety of the person are central to our response. No concern is too small to report, and no person will be treated less favourably for raising a concern in good faith.

2. Purpose and objectives

This policy provides a consistent framework to:

- prevent abuse, neglect, exploitation and avoidable harm;
- help people recognise indicators of abuse and safeguarding risk;
- set out clear reporting, recording, referral and escalation arrangements;
- support proportionate, person-led decision-making while acting to protect others where necessary;
- define accountability for the Board, DSL, managers, staff, volunteers, contractors and partners;
- support safer recruitment, training, supervision, information sharing and organisational learning.

3. Scope

This policy applies to all employees, volunteers, trustees, agency staff, students, contractors and anyone acting on behalf of CASE Training Services. It covers all CASE activities on and off site, including training, work placements, transport, community projects, trips, events, online activity, digital communications, photography and partnership delivery.

Safeguarding concerns may relate to a trainee, member of staff, volunteer, visitor, family member or any other person encountered through CASE activity. Concerns arising outside CASE must still be reported where they may affect a person's welfare or safety.

4. Legal and regulatory framework

This policy is informed by applicable safeguarding, charity, employment, equality, information governance and health and safety requirements, including:

- Care Act 2014 and Care and Support Statutory Guidance;
- Children Acts 1989 and 2004 and Working Together to Safeguard Children;
- Safeguarding Vulnerable Groups Act 2006 and Protection of Freedoms Act 2012;
- Mental Capacity Act 2005 and its Code of Practice;
- Domestic Abuse Act 2021, Modern Slavery Act 2015 and Counter-Terrorism and Security Act 2015;
- Equality Act 2010, Human Rights Act 1998, Data Protection Act 2018 and UK GDPR;
- Charity Commission safeguarding guidance and serious incident reporting requirements;
- local multi-agency safeguarding procedures for Hull and the East Riding of Yorkshire.

Where legislation, statutory guidance or local procedures change, CASE will follow the current requirement and update this policy at the earliest opportunity.

5. Definitions and safeguarding principles

5.1 Adult at risk

For this policy, an adult at risk is a person aged 18 or over who has needs for care and support, is experiencing or is at risk of abuse or neglect, and because of those needs is unable to protect themselves from the abuse or neglect or the risk of it.

5.2 Child

A child is anyone under the age of 18. Young people transitioning to adult services may require coordinated safeguarding support across children's and adults' services.

5.3 Core principles

- Empowerment: support informed choice, voice, control and consent wherever possible.
- Prevention: act before harm occurs and reduce foreseeable risk.
- Proportionality: use the least intrusive response appropriate to the risk.
- Protection: provide support and representation for those in greatest need.
- Partnership: work with the person and relevant agencies to achieve safer outcomes.
- Accountability: maintain clear responsibility, defensible decisions and accurate records.

6. Forms and indicators of abuse

Abuse may be a single act, repeated acts, deliberate or unintentional, and may occur in any relationship, setting or online. It may include:

- physical abuse;
- domestic abuse, coercive or controlling behaviour;
- sexual abuse or sexual exploitation;
- psychological or emotional abuse;
- financial or material abuse, including scams and misuse of benefits or property;
- modern slavery, trafficking, forced labour or criminal exploitation;
- discriminatory abuse, including harassment and hate incidents;
- organisational or institutional abuse;
- neglect and acts of omission;
- self-neglect, including hoarding where risk is significant;
- online abuse, grooming, cyberbullying, image-based harm or exploitation;
- radicalisation or exploitation into extremist activity.

Possible indicators include unexplained injuries, fear, withdrawal, changes in behaviour or presentation, repeated absence, hunger, poor hygiene, unsafe living conditions, missing money, unusual financial activity, controlling relationships, sexualised behaviour, distress around a particular person, unexplained gifts, online secrecy or a disclosure. Indicators do not prove abuse, but must be reported and considered.

7. Roles and responsibilities

7.1 Board of Trustees

- Retains ultimate oversight of safeguarding governance and culture.
- Approves and reviews this policy at least annually.
- Seeks assurance on risks, training, safer recruitment, incidents, referrals and learning.

- Ensures serious incidents are considered for reporting to the Charity Commission.
- Provides an alternative reporting route where a concern involves the CEO/DSL.

7.2 Designated Safeguarding Lead

Designated Safeguarding Leads	Mark Cooke, Chief Executive Officer Suzanne Nicholls, Operations Manager
Telephone	01482 320200
Email	markc@casetraininghull.co.uk
Safeguarding reporting route	Concerns may be reported to either Designated Safeguarding Lead. Where a concern involves a Designated Safeguarding Lead, report it to the other DSL or to the Chair of Trustees.

The Designated Safeguarding Leads coordinate the response to concerns, decide on external referral and escalation, support staff, maintain secure records, monitor patterns, liaise with safeguarding partners and report assurance information to trustees without unnecessary personal data.

7.3 Managers, staff, volunteers and contractors

- Create a safe environment and follow this policy and related procedures.
- Recognise and report concerns immediately, even where information is incomplete.
- Listen, reassure and take the person seriously without investigating.
- Preserve evidence, make an accurate record and share information only with those who need it.
- Complete required training and raise any conflict, boundary or suitability concern.

8. Responding to a concern or disclosure

1. Make the situation safe. If there is immediate danger, serious injury or a crime in progress, call 999. Seek urgent medical help where needed.
2. Listen calmly. Allow the person to speak in their own words. Do not press for detail or ask leading questions.
3. Reassure appropriately. Explain that they have done the right thing by telling you and that the information will be shared only with people who need to help keep them or others safe.
4. Do not promise secrecy, confront the person alleged to have caused harm, mediate, investigate, or delay in order to obtain proof.
5. Report immediately to either Designated Safeguarding Lead. If the concern involves the DSL, report to the Chair of Trustees. If internal reporting is unsafe or unavailable, contact the relevant local authority safeguarding service or police directly.
6. Record as soon as possible using the Safeguarding Concern Form. Use the person's own words where possible and distinguish fact, observation, allegation and opinion.
7. Preserve relevant evidence, including messages, emails, photographs, CCTV or documents. Do not examine devices or circulate material unnecessarily.
8. Follow the instructions of a Designated Safeguarding Lead and maintain appropriate confidentiality.

9. Recording requirements

The written record should include, where known:

- name of the person at risk and relevant contact details;
- date, time and place of the incident, disclosure or observation;
- exact words used and a clear factual description of what was seen or heard;
- names of witnesses and the person alleged to have caused harm;
- immediate action taken, injuries, medical help and police involvement;
- who was informed, when, decisions made, reasons, referrals and outcomes;
- the recorder's name, role, signature and date.

Records must be created promptly, stored securely, retained in line with CASE retention arrangements and kept separate from general operational notes where appropriate. Original records must not be altered. Corrections must remain transparent and dated.

10. Consent, capacity and information sharing

People should be involved in decisions and asked what outcome they want. Consent should normally be sought before a referral. However, information may be shared without consent where there is an immediate or serious risk, a child may be at risk, other people may be at risk, a serious crime may have occurred, a person lacks capacity for the relevant decision, coercion may be affecting the decision, or there is another lawful basis or statutory duty.

Mental capacity is decision-specific and time-specific. Staff must not assume incapacity because a person has a learning disability, communicates differently or makes a decision others consider unwise. Where capacity is in doubt, the DSL will ensure appropriate assessment and best-interest decision-making, involving relevant professionals and advocacy where required.

Information sharing must be necessary, proportionate, relevant, accurate, timely and secure. The reason for sharing or not sharing must be recorded.

11. Referral, escalation and external reporting

A Designated Safeguarding Lead will assess the information promptly, consider the person's wishes and immediate safety, consult local procedures and make referrals to adult or children's social care, police, health services, the LADO, DBS, funders, commissioners or regulators where required. CASE will not delay a safeguarding referral while completing an internal process.

If a referral is not accepted and CASE remains concerned, a Designated Safeguarding Lead will seek clarification, record the rationale and use the relevant escalation or professional challenge process. The Board will consider whether the matter meets the threshold for a serious incident report to the Charity Commission.

12. Allegations or concerns about staff, volunteers or trustees

9. Report immediately to either Designated Safeguarding Lead. If the concern involves one DSL, report to the other DSL or to the Chair of Trustees. If it involves the Chair, report to another trustee and the relevant statutory authority.
10. Do not begin an internal fact-finding exercise before safeguarding advice is obtained where this may compromise a police, LADO or local authority process.
11. Take proportionate steps to protect people and evidence. A neutral suspension or temporary change of duties may be considered under the relevant HR procedure and does not imply guilt.
12. Liaise with the LADO for concerns involving a person who works with children, and with adult safeguarding, police and other bodies as appropriate.
13. At the conclusion of the case, consider disciplinary action, support, learning, DBS referral duties, regulatory reporting and improvements to practice.

13. Safer recruitment and suitability

- Use clear role descriptions and safeguarding expectations.
- Check identity, employment history, references, qualifications and the right to work.
- Undertake the correct level of DBS and barred-list check where the role is eligible, and repeat or update checks in line with CASE arrangements.
- Use safeguarding-focused interviews and address unexplained gaps or inconsistencies.
- Provide induction, a code of conduct, boundaries guidance, supervision and probation review.
- Require staff and volunteers to disclose relevant changes that may affect suitability.

14. Safe working practice

14.1 Professional boundaries and one-to-one work

Staff and volunteers must maintain professional boundaries, avoid favouritism, gifts or private arrangements that create risk, and use approved communication channels. One-to-one work must be planned, proportionate and visible where possible, with location and expected return arrangements known to an appropriate colleague.

14.2 Trips, transport, community and placements

Safeguarding risks must be considered in activity and individual risk assessments, including staffing, accessibility, communication, medication arrangements, travel, personal care, accommodation, emergency contacts and missing-person procedures. Concerns at partner or placement sites remain reportable to CASE.

14.3 Online safety, images and communications

CASE systems and approved accounts must be used for work communications. Personal social media contact with trainees must not be initiated or accepted unless expressly authorised for a legitimate purpose and risk managed. Images, video and personal stories require appropriate consent and secure handling. Concerns about online grooming, exploitation, threats or harmful content must be reported immediately.

14.4 Visitors and contractors

Visitors and contractors must sign in, follow site instructions, be appropriately supervised and not have unsupervised access to trainees unless authorised and suitability checks are in place.

15. Whistleblowing, complaints and protection from retaliation

Anyone may raise a safeguarding concern outside their management line. Concerns raised in good faith will be taken seriously and the person raising them will not be disadvantaged. Malicious allegations may be addressed under relevant procedures, but an unsubstantiated concern is not the same as a malicious concern. Where internal routes are inappropriate, concerns may be raised with the local authority, police, regulator or another prescribed body.

16. Training, supervision and support

- All staff and volunteers receive safeguarding information at induction and role-appropriate refresher training.
- DSLs and deputies receive enhanced training suitable to their responsibilities.
- Trustees receive safeguarding governance training and regular assurance information.
- Managers use supervision to discuss boundaries, concerns, wellbeing and learning.
- Support will be offered to a person affected by abuse and to staff involved in a safeguarding response, while preserving confidentiality.

17. Confidentiality, data protection and retention

Safeguarding information is confidential but not secret. Access is limited to authorised people with a legitimate need to know. Information must be stored, transferred and disposed of securely, with particular care for special category and criminal offence data. Data protection law does not prevent necessary and proportionate information sharing to protect a person from harm.

18. Monitoring, assurance and learning

The Designated Safeguarding Leads will maintain oversight of safeguarding records and provide anonymised or minimised assurance information to trustees. CASE will review themes, response times, training completion, safer recruitment controls, referrals, outcomes and lessons from incidents, complaints, audits and partnership feedback. Actions will be assigned, tracked and reviewed.

19. Breaches of this policy

Failure to follow this policy may place people at risk and may result in disciplinary action, termination of a volunteer or contractor arrangement, referral to the DBS, notification to a regulator or other action as appropriate. A breach will be considered fairly and in context, including whether the person acted to protect someone in an emergency.

20. Related CASE documents

- Safeguarding Concern Form
- Code of Conduct and professional boundaries guidance
- Safer Recruitment / Recruitment and Selection Policy
- Whistleblowing Policy
- Complaints Policy
- Data Protection and Records Retention Policies
- Health and Safety, Lone Working, Trips and Visits, Online Safety and Social Media procedures
- Managing allegations, disciplinary and grievance procedures

Appendix A. Local safeguarding and emergency contacts

Contact details should be checked before each annual approval and whenever a service notifies CASE of a change.

Area / service	Contact	Details
Emergency	Immediate danger or crime in progress	999 (police, ambulance or fire)
Police	Non-emergency	101
Hull children	EHASH / Children's Social Care	01482 448879 (option 4); out of hours 01482 300304
Hull adults	Multi-Agency Safeguarding Hub	01482 616092; adultsafeguarding@hullcc.gov.uk; out of hours 01482 300304

Area / service	Contact	Details
East Riding children	Safeguarding and Partnership Hub (SaPH)	01482 395500; out of hours 01482 393939
East Riding adults	Safeguarding Adults Team	01482 396940; safeguardingadultsteam@eastriding.gov.uk; out of hours 01377 241273; amhp.outofhoursteam@eastriding.gov.uk
Allegations about adults working with children	Local Authority Designated Officer (LADO)	Use the current Hull or East Riding LADO route for the area concerned; a Designated Safeguarding Lead must verify current contact details before referral.

Appendix B. Safeguarding concern recording checklist

- Ensure immediate safety and call emergency services if required.
- Record the date, time, location and people present.
- Use the person's own words and record questions asked.
- Describe observations factually, including injuries or environmental risks.
- Record action taken, advice received and people notified.
- Sign, date and submit securely to a Designated Safeguarding Lead without delay.
- Do not retain informal copies or share through unapproved channels.

Appendix C. Approval record

Approved by	Board of Trustees
Approval date	
Signed on behalf of the Board	
Signature / date	