

27. Child Protection & Adults at Risk Safeguarding Policy

Version Number	Amendments Made	Date
1	Updated safeguarding leads, reporting links, KCSIE version, document reformatted and internal processes added.	30/09/24
2	Updated safeguarding leads and national/local references; Monitoring Rules Framework added.	29/09/25
3	Updated DSL/Prevent governance, training and monitoring arrangements; additional internal appendices added.	01/06/26
4	Full policy review and simplification. Operational processes, contact details and forms moved to Breathe HR. Updated for Working Together to Safeguard Children 2026, KCSIE 2026 and 2026 information-sharing reforms. Terminology updated to Adults at Risk.	11/09/26

Approved by	Alice Smith, Safeguarding Trustee
Date of Issue	September 2026
Next Review due (date)	September 2027 or earlier following significant statutory/serious incident learning

Within The Lowdown the following roles hold designated safeguarding responsibility:

Designated Safeguarding Trustee	Designated Safeguarding Lead(s)	Deputy / Service Safeguarding Leads	Organisational Prevent Lead(s)
Current role-holder maintained in Breathe HR /Lowdown Website	Current role-holders maintained in My Concern/Lowdown Website	Current role-holders maintained in My Concern/Lowdown Website	Current role-holders maintained in Breathe HR /Lowdown Website

The names, rota arrangements and contact details for safeguarding role-holders are maintained in controlled live organisational records on Breathe HR and on The Lowdown website . They are intentionally not fixed within this policy so staffing changes do not require a policy revision.

Responsibility for allegations about staff/volunteers/students:

Concern about worker	Concern about CEO	Safeguarding governance / confidentiality
CEO / Deputy CEO	Chair of Trustees	Safeguarding Trustee and Caldicott Guardian roles as designated.

The names of all people in the above positions can be found on Breathe HR and the Lowdown website.

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1. Aim and Scope

The Lowdown is committed to safeguarding and promoting the welfare of children, young people and adults at risk who come into contact with our services. Safeguarding is everyone's responsibility and concerns must be recognised, responded to, recorded and escalated without avoidable delay.

- This policy applies to all employees, sessional workers, volunteers, students, trustees and anyone acting on behalf of The Lowdown.
- It applies to all Lowdown services, on or off site, face to face or remote contact.
- It sets the safeguarding principles, responsibilities and decision-making framework. Detailed operational steps, forms, local contact details and system instructions are held in separate readable documents in Breathe HR so they can be updated promptly without rewriting this policy.
- Where a commissioning contract, school/college arrangement or statutory partner procedure imposes a higher or additional safeguarding requirement, that requirement must also be followed.

Policy / procedure separation

This policy states what The Lowdown requires and why. Controlled safeguarding procedures state how staff complete the task. Changes to a form, system field, contact number, referral route or internal workflow do not require this policy to be reapproved unless they alter the safeguarding principle or organisational responsibility.

2. Definitions

For this policy:

- **Child means anyone under 18.** A person's living arrangements, independence, employment, education or care status do not change their entitlement to child safeguarding protection.
- Safeguarding and promoting the welfare of children means protecting children from maltreatment; preventing impairment of physical and mental health or development; ensuring safe and effective care; and taking action to enable the best outcomes.

- **Child protection** is the activity undertaken where a child is suffering, or is likely to suffer, significant harm.
- **An adult at risk** is an adult aged 18 or over who has care and support needs, is experiencing or at risk of abuse or neglect, and because of those needs is unable to protect themselves from the risk or experience of abuse or neglect.
- Safeguarding adults means protecting an adult's right to live safely and free from abuse and neglect while having regard to their views, wishes, feelings and beliefs and using proportionate responses.
- **Abuse** may be physical, sexual, emotional/psychological, financial/material, discriminatory, organisational or domestic; it may include neglect, self-neglect, exploitation, modern slavery, coercive control, online abuse or other forms of harm.
- Where concerns relate to an adult's ability to make a specific decision about their safety, staff must consider mental capacity in accordance with the Mental Capacity Act 2005 and relevant organisational procedures. Capacity must not be assumed or judged solely on the basis of disability, diagnosis, age, appearance or behaviour.

3. Legal and National Framework

This policy is informed by relevant legislation, statutory guidance and charity governance requirements in England. The DSL(s) maintain live safeguarding procedural documents containing the current editions and links in Breathe HR.

- Children Act 1989 and Children Act 2004.
- Working Together to Safeguard Children 2026 and subsequent statutory updates.
- Children's Wellbeing and Schools Act 2026, including information-sharing duties where applicable to The Lowdown or services delivered on behalf of relevant bodies.
- Care Act 2014 and Care and Support Statutory Guidance for adult safeguarding.
- Safeguarding Vulnerable Groups Act 2006, Protection of Freedoms Act 2012 and current DBS/regulated activity requirements.
- Sexual Offences Act 2003; Female Genital Mutilation Act 2003 and mandatory reporting duties where applicable; Modern Slavery Act 2015; Counter-Terrorism and Security Act 2015, The Rehabilitation of Offenders Act 1974 and current Prevent guidance.
- The Childcare (Disqualification) Regulations 2009 (and 2018 amendment) and Childcare Act 2006.
- Data Protection Act 2018 and UK GDPR, including safeguarding and substantial public interest provisions for lawful information sharing.
- Charity Commission safeguarding guidance and serious incident reporting requirements.
- Northamptonshire Safeguarding Children Partnership and Northamptonshire Safeguarding Adults Board multi-agency arrangements and thresholds.

Keeping Children Safe in Education (KCSIE) 2026 is statutory for schools and colleges. It is relevant good-practice guidance for Lowdown staff working in or alongside education settings, and contractual/host-setting requirements must be followed where applicable.

Current guidance

The DSL's will check national and local safeguarding guidance at least annually and after significant legislative or statutory change. A change to a website address, telephone number or operational referral route is updated on Breathe HR in the live safeguarding procedural documents, not by reopening this policy.

4. Equality, Inclusion and Young Person-Centred Practice

The Lowdown uses an inclusive, anti-discriminatory and young person-centred approach. We are committed to anti-discriminatory practice and recognise children and young people's diverse circumstances. Practitioners must consider how identity, disability, communication, culture, racism, discrimination, poverty, care experience, family context and previous experiences of services may affect risk, disclosure, trust and access to help.

- Children and adults may experience multiple, overlapping harms and should not be reduced to a single label or presenting issue.
- Workers must avoid assumptions that signs of abuse or distress are explained by disability, neurodivergence, culture, gender, sexuality or behaviour.
- Reasonable adjustments and communication support should be considered so people can participate meaningfully in safeguarding decisions.
- Racism, misogyny, homophobia, transphobia, ableism and other discrimination can be safeguarding and wellbeing factors and must be challenged appropriately.
- The person's voice should be heard and recorded. Their wishes matter, although they do not override a duty to protect where information must lawfully and proportionately be shared.

5. Roles and Responsibilities

Safeguarding and child protection is everyone's responsibility.

5.1 All staff, volunteers and students

- Recognise indicators of abuse, neglect, exploitation, self-harm, suicide risk, harm to others and other safeguarding concerns.
- Listen, take concerns seriously, act promptly and never assume another person will report or follow up.
- Know how to access the current DSL/clinical support rota and safeguarding procedures.
- Record safeguarding concerns, decisions and rationale on the approved system on the same day or as soon as safely practicable.
- Use the live safeguarding procedural documents and templates on Breathe HR to aid your safeguarding practice.
- Share information on a necessary and proportionate basis and seek DSL/manager advice where uncertain. This may include making referrals to external services.
- Participate in required safeguarding training, supervision and reflective learning.
- Raise concerns about unsafe organisational practice through management, whistleblowing or external routes where necessary.
- Be knowledgeable on local safeguarding priorities such as county lines, modern slavery and trafficking and sexual exploitation.

5.2 Designated Safeguarding Lead(s) and deputies

- Provide accessible safeguarding advice and ensure suitable cover arrangements.
- Coordinate referrals, escalation, information sharing and liaison with statutory agencies where appropriate.
- Ensure safeguarding records and decision-making are appropriately monitored.
- Promote consistent thresholds and professional curiosity across services.
- Maintain current safeguarding procedures, live procedural documents held on Breathe HR and training requirements.
- Ensure relevant learning from incidents, complaints, audits, case reviews and national/local updates is translated into practice.

5.3 Management Team, CEO and Trustees

- Ensure safeguarding is adequately resourced, embedded in governance and supported by safer recruitment and effective supervision.
- Ensure allegations about staff/volunteers/students are handled independently and referred to the appropriate external authority where thresholds are met.
- Review safeguarding themes, quality and organisational learning and make required Charity Commission or commissioner notifications.
- Approve this policy and ensure it is reviewed at least annually.
- Ensure staff are fully trained to organisational standards.

6. Recognising and Responding to Concerns

A safeguarding concern may arise from a direct disclosure, observed behaviour or injury, information from another person/professional, online information, patterns across contacts, a change in presentation or professional intuition supported by facts.

6.1 Early help, family help and emerging concerns

Staff should identify concerns early and consider whether the child/family may benefit from universal, community-based or targeted Family Help. Emerging concerns must be monitored and escalated if the situation is not improving or risk increases.

6.2 Children with additional vulnerability

Additional barriers to recognising or disclosing harm may exist for disabled or neurodivergent children, young carers, children in care or kinship arrangements, care-experienced children, children affected by parental illness/substance misuse/domestic abuse, children experiencing homelessness or poverty, asylum-seeking children and children exposed to discrimination or exploitation.

6.3 Specific and overlapping harms

Workers should remain alert to domestic abuse and teenage relationship abuse, coercive control, child sexual abuse, child sexual and criminal exploitation, group-based exploitation, county lines, modern slavery/trafficking, honour- or faith/belief-based abuse, FGM, forced marriage, online harms, AI-generated or manipulated intimate imagery, harmful sexual behaviour, bullying/harassment, radicalisation and other forms of abuse. Appendix 1 provides concise indicators.

6.4 Child-on-child abuse

Abuse between children is abuse and must not be minimised as banter, experimentation or an inevitable part of growing up. Assessment should consider power imbalance, coercion, repetition, age/development, consent, vulnerability, intent, impact and risk to all children involved.

7. Responding to a Disclosure

When a child, young person or adult at risk discloses harm, the worker should:

- Listen calmly and take the disclosure seriously.
- Allow the person to speak freely and use their own words.
- Ask only necessary, open and non-leading questions to establish immediate safety and understand the concern. Do not interrogate, investigate or seek to establish whether an allegation is true.
- Do not ask the person to repeat their disclosure unnecessarily.

- Do not promise secrecy. Explain what may need to be shared and why.
- Acknowledge the person's experience without making promises about outcomes or criticising the alleged perpetrator.
- Check immediate safety and whether anyone else may be at risk.
- Consult the DSL/clinical support promptly in line with the Safeguarding Procedure.
- Record the concern factually, including significant exact words where relevant, actions taken, decisions and rationale.

Immediate danger

If there is an immediate risk to life or serious harm, emergency action must not be delayed while waiting for a manager, completing paperwork or obtaining consent. Follow the current emergency/safeguarding procedure and inform the DSL as soon as practicable.

8. Self-Harm, Suicide and Other Risk

Self-harm and suicidal thoughts are not automatically the same as suicidal intent. The Lowdown aims to respond proportionately so that risk can be discussed openly without unnecessary barriers to therapy, while recognising escalation and immediate danger.

- Workers must assess current presentation, intent, plan/means where relevant, severity/escalation, ability to stay safe, risk to others, other safeguarding risks, protective factors and the person's own view.
- The approved Risk & Safeguarding Decision Record combines quantitative scoring with qualitative clinical/safeguarding judgement to improve consistency between workers.
- A score is a decision-support aid, not a prediction tool. Automatic escalation factors and professional judgement override a numerical total.
- Low/managed risk may remain within the service with an appropriate safety plan and review. Information sharing is not automatic solely because risk has been identified.
- Increased, significant, unclear or escalating risk must be discussed with the appropriate Shift/Service Manager/DSL and managed in line with the current procedure.

9. Limits of Service

The Lowdown recognises that some young people's complexity and level of need is not best served by the range of services the organisation has to offer. In recognition of this, a Limits of Service Document, as detailed in our risk policy and on Breathe HR, is used to consider the suitability at the assessment stage, at point of access or during service delivery. Should a young person be declined support from Lowdown services efforts would be made to ensure support from more appropriate services.

A decision that a person is outside The Lowdown's service remit does not remove or reduce the organisation's safeguarding responsibilities. Where safeguarding concerns are identified, appropriate safeguarding action must be taken regardless of whether the person is accepted into, remains within or exits a Lowdown service.

10. Recording, Information Sharing and Confidentiality

10.1 Recording

- All safeguarding concerns, relevant discussions, actions, decisions and reasons must be recorded on the approved safeguarding system promptly and normally on the same day.
- Record facts, observations and the person's words where significant; clearly distinguish these from professional judgement.
- Use the current Risk & Safeguarding Decision Record and body map where required by procedure.
- Do not create or retain unofficial safeguarding records outside approved systems.
- Confidential-client arrangements must follow the controlled Confidential Client Safeguarding Procedure.

10.2 Information sharing

The Lowdown will share safeguarding information lawfully, securely, proportionately and on a need-to-know basis. Data protection law is not a barrier to necessary safeguarding information sharing.

- Where safe and appropriate, explain to the person what information may be shared, with whom and why, and record their views.
- Consent should be sought where appropriate, but a lack of consent does not prevent sharing where there is a lawful safeguarding basis or statutory duty.
- For adults, autonomy and Making Safeguarding Personal principles must be respected. Information sharing without consent requires a clear lawful and proportionate rationale, for example risk to the adult or others, a child safeguarding concern, serious crime, vital interests or another legal duty.
- From September 2026, statutory information-sharing duties introduced by the Children's Wellbeing and Schools Act 2026 must be complied with where The Lowdown falls within the statutory scope of those duties, including where applicable through commissioned or partner arrangements. Staff must follow the current information-sharing procedure and seek advice from the DSL or appropriate manager where the scope or application of a statutory duty is unclear. Staff should seek DSL/management advice rather than make technical legal determinations alone.
- Information-sharing decisions and rationale must be recorded.

11. Safeguarding Procedures and Operational Documents

The following controlled documents sit underneath this policy and should be read in conjunction with this policy. They may be updated when operational processes, systems, staffing or contact details change without requiring a formal policy revision, provided the policy principles remain unchanged:

- Safeguarding Procedures & Contacts (including MASH, NCTrust, adult safeguarding, police/emergency, Prevent, Designated Officer/LADO and national/local resources).
- Risk & Safeguarding Decision Record
- All Staff Safeguarding Reporting and Monitoring Instructions.
- Safeguarding Monitoring Rules Framework.
- Confidential Client Safeguarding Procedure.
- Limits of Service
- Client Risk Matrix.
- Body Map template.
- Working Together Across Services, Boundaries & Communication guidance.

Document control

Operational documents must show an owner, version/date and review trigger. The DSL/appropriate service manager may update them promptly following process changes. Material changes to safeguarding thresholds, legal responsibilities or governance must trigger review of this policy.

12. Concerns or Allegations about Staff, Volunteers or Students

Any concern that a person working with or on behalf of The Lowdown may have harmed a child/adult at risk, committed a relevant offence, behaved in a way indicating they may pose a risk of harm, or otherwise breached safer-working expectations must be reported promptly under the whistleblowing policy.

- The recipient must take the concern seriously, keep an open mind and avoid conducting their own investigation.
- Concerns about the CEO must be reported to the Chair of Trustees or the designated alternative trustee.
- The appropriate senior person will seek advice from the Local Authority Designated Officer/Designated Officer or adult safeguarding route where applicable and will follow that advice.
- Referral to the DBS and/or Charity Commission will be made where the legal/regulatory criteria are met.
- Whistleblowing routes must remain available where a worker believes concerns are not being handled appropriately.

13. Safer Working Practice

The Lowdown will reduce safeguarding risk through safer recruitment, role-appropriate DBS checks, references, induction, supervision, training, codes of conduct, professional boundaries, lone-working/remote-working controls, digital safety, appropriate environments and proportionate risk assessment.

- Workers must maintain professional boundaries in person, online and through messaging/social media.
- Any concern about boundary drift, inappropriate communication, gifts, favouritism, sexualised behaviour, discriminatory conduct or misuse of professional position must be raised.
- Staff must follow current organisational guidance for online services, devices, filtering/monitoring where applicable, photography/imagery and digital communications.
- Where The Lowdown operates within another setting, staff must understand both Lowdown and host-setting safeguarding arrangements and know which process takes priority in an emergency.

14. Parents, Carers and Trusted Adults

Parents, carers and trusted adults can be important protective factors, but involvement must be based on the individual's age, capacity, wishes, risk and safeguarding context.

- For children, concerns should usually be discussed with parents/carers where this is safe and appropriate, but this must not delay necessary referral or action.
- Where informing a parent/carer may increase risk, compromise an investigation or place someone else at risk, seek DSL/statutory advice before contact.
- For adults aged 18+, there is no automatic requirement to involve a parent or trusted adult simply because risk exists. The decision must be proportionate and respect autonomy unless there is a lawful basis/duty to share without consent.

- Where a trusted adult is involved, agree with the young person/adult where possible what will be shared and how the conversation will be managed.
- Third-party allegations should not be investigated by The Lowdown or unnecessarily disclosed to alleged parties.

15. Training, Supervision and Safeguarding Culture

- All staff, volunteers and students receive safeguarding induction and role-appropriate refresher training in accordance with the Training Matrix.
- DSLs/deputies receive training and regular updates appropriate to their responsibilities.
- Workers delivering clinical or direct-support work have access to supervision/clinical support and are expected to bring risk, safeguarding uncertainty, bias and professional concerns for discussion.
- The Lowdown promotes professional curiosity, respectful challenge and an open culture where staff can raise concerns without fear of being dismissed.
- Learning from safeguarding incidents, near misses, complaints and case reviews will be shared proportionately with teams and used to improve practice.
- Staff working in school/college settings should be aware of the host setting's KCSIE-based arrangements and local reporting expectations.

16. Governance, Quality Assurance and Learning

- Service Managers oversee safeguarding concerns within their services and ensure cross-service information is shared where necessary.
- DSL/management safeguarding reviews monitor open concerns, escalation, recording quality, repeated themes and follow-up actions.
- Trustee safeguarding oversight includes periodic deep-dive review and assurance to the Board.
- The CEO and Trustees receive appropriate safeguarding data and qualitative information to identify themes, disproportionality, training needs and systemic risks.
- Safeguarding trends involving discrimination, racism, exploitation, domestic abuse, online harms or other emerging risks should inform service improvement.
- Serious incidents and near misses will trigger learning review and, where required, notifications to statutory agencies, commissioners and the Charity Commission.

17. Implementation and Review

This policy will be made available to staff, volunteers, students, trustees and the public as appropriate. Reading/acknowledgement requirements are recorded through the organisation's HR/learning systems.

- The policy is reviewed at least annually by the DSL leadership, CEO and Safeguarding Trustee and approved through organisational governance.
- An earlier review is triggered by significant legislative/statutory guidance change, a serious safeguarding incident, material audit finding or a change to the organisation's safeguarding responsibilities.
- Operational procedure changes do not automatically require a policy review. They are managed through the controlled-document process described in section 11.
- The annual review will check the current edition of Working Together to Safeguard Children, KCSIE where relevant, Care Act guidance, Charity Commission guidance, local safeguarding partnership arrangements and any new legislation affecting information sharing, regulated activity or safeguarding practice.

18. Related Lowdown Policies

- EDI Policy
- Data Protection Policy
- Confidentiality and Information Sharing Policy
- Data Security / Data Quality policies
- Whistleblowing Policy
- Safeguarding Code of Conduct
- Risk Assessment Policy
- Safer Recruitment / DBS Procedure / Training Matrix
- Complaints Policy

Appendix 1: Categories and Indicators of Abuse / Safeguarding Harm

This appendix is intentionally concise. Indicators should be considered in context and may overlap. Detailed issue-specific guidance is maintained in the live Safeguarding Resource Register.

Physical abuse: Assault, hitting, shaking, burning/scalding, poisoning, suffocation, fabricated or induced illness, unexplained/repeated injuries or physical punishment.

Emotional / psychological abuse: Persistent rejection, humiliation, threats, intimidation, isolation, silencing, exposure to domestic abuse, severe bullying, coercive control or developmentally inappropriate expectations.

Sexual abuse / sexual violence: Any sexual activity imposed on a child or non-consenting person, including contact and non-contact abuse, grooming, rape/assault, sexual exploitation, coercion, sexualised imagery or online abuse.

Neglect: Persistent failure to meet basic physical, medical, emotional, educational, supervisory or safety needs.

Domestic abuse / teenage relationship abuse: Physical or sexual abuse, violent or threatening behaviour, controlling or coercive behaviour, economic abuse, psychological/emotional abuse, stalking/harassment or technology-facilitated abuse within intimate/family relationships.

Child sexual or criminal exploitation: A person/group uses power imbalance, coercion, control, manipulation, deception, exchange or violence/threats to exploit a child. Apparent agreement does not make exploitation consensual.

Modern slavery / trafficking: Recruitment, movement, harbouring or control of a person for exploitation, including sexual or criminal exploitation, forced labour or domestic servitude.

Harmful sexual behaviour / child-on-child abuse: Sexual, physical or emotional harm between children, including harassment, violence, coercion, image-based abuse, bullying and exploitation. Consider power, consent, repetition, developmental difference and impact.

Online and technology-facilitated harm: Grooming, sexual exploitation, harassment, coercive control, extremist content, financial exploitation, cyberbullying, intimate image abuse and AI-generated/manipulated sexual imagery.

Honour-/faith-/belief-based abuse, forced marriage and FGM: Harm justified through perceived honour, family/community expectations, faith/belief, forced marriage or FGM. Mandatory reporting duties must be followed where applicable.

Radicalisation: Susceptibility to extremist influence or exploitation that may draw a person towards terrorism; follow Prevent procedure where concern is identified.

Adult safeguarding: May additionally include financial/material abuse, organisational abuse, discriminatory abuse and self-neglect alongside the categories above.

Appendix 2: Quick Response - What Staff Must Do

1. LISTEN

Stay calm. Take the concern seriously. Do not investigate or promise secrecy.

2. CHECK IMMEDIATE SAFETY

Establish whether anyone is in immediate danger and take emergency action if required.

3. CONSULT

Contact the Shift Manager/DSL/clinical lead using the current safeguarding rota. If appropriate support is unavailable, follow the direct referral/emergency route in the live procedure.

4. DECIDE & ACT

Use the Risk & Safeguarding Decision Record where required. Agree proportionate action, information sharing and safety planning.

5. RECORD

Record the concern, actions, decisions and rationale on the approved safeguarding system promptly, normally the same day.

6. FOLLOW UP

Complete agreed referrals/actions, monitor changes and ensure significant new information is added to the safeguarding chronology/record.

Immediate danger

If there is an immediate risk to life or serious harm, emergency action must not be delayed while waiting for a manager, completing paperwork or obtaining consent. Follow the current emergency/safeguarding procedure and inform the DSL as soon as practicable.

Appendix 3: 2026 National Safeguarding Update

The September 2026 review has incorporated the following national developments. This appendix provides the audit trail for this annual review and can be replaced at the next annual review without changing operational procedures.

Working Together to Safeguard Children 2026: Reinforces safeguarding as a shared responsibility; applies to all children including children in kinship, adoptive, foster and residential arrangements; strengthens anti-racist and anti-discriminatory practice; expands emphasis on domestic abuse, coercive control, teenage relationship abuse, child sexual abuse, online harms and group-based exploitation; and develops Family Help and family group decision-making expectations.

Children's Wellbeing and Schools Act 2026: Introduces new safeguarding information-sharing provisions and consistent-identifier reforms. The information-sharing duty is due to apply from September 2026 to specified/relevant persons. The Lowdown will comply where the duty applies directly or through commissioned/partner arrangements and will update operational information-sharing guidance when final statutory guidance is issued.

Keeping Children Safe in Education 2026: Comes into force for schools and colleges on 1 September 2026. Relevant changes include a common Part One expectation for school/college staff, updated content on mental health support, young carers, safer recruitment/regulated activity, online/image harms including AI-generated intimate imagery, misogyny, and child-on-child harassment/violence. Lowdown staff working in education settings must follow applicable host-setting requirements.

Care Act adult safeguarding: The policy now uses the statutory "adult at risk" framework rather than a generic "vulnerable adult" definition and reinforces proportionate, person-led adult safeguarding.

Policy architecture: Operational contact details, forms, referral routes and internal system processes have been removed from the policy and placed in controlled live procedural documents on Breathe HR. This reduces unnecessary policy revisions while preserving annual statutory review and trustee oversight.

National/legal references are accessed through the current GOV.UK publications and local safeguarding partnership resources listed in live procedural documents on Breathe HR