Safeguarding and Prevent Policy

September 2026

This policy will be updated as our business changes in line with new legislation. It will be reviewed and updated as necessary, a minimum of once a year.

Rob Colbourne
CEO
Reviewed September 2026

Summary of Changes

Date	Summary of amendment	Page number/s
Nov 2023	Policy updated for Revised Prevent Duty Guidance	4, 5, 6, 8, 11
Nov 2023	Merged domestic abuse policy	5,13,29
Sept 2024	Safeguarding definition amended to include exploitation and headings changed throughout	4
Sept 2024	Updated definition for absences – signs & symptoms	24 & 25
Sept 2024	Link added to 'Working together to safeguard Children 2026' guidance	16
Sept 2024	Note made relating to instances where early help may be more appropriate	5
Feb 2025	Policy statement amended to include mental health	5
Feb 2025	Updated roles & responsibilities to include Mental Health First Aid/Aiders	6-8
Feb 2025	Section on Mental Health first aid added	12-13
Feb 2025	Added MH First Aid process (annex 6)	32
Feb 2025	Links to safeguarding and prevent induction course updated	12
Feb 2025	Policy amended due to Worker Protection (Amendment of Equality Act 2023)	5, 8
Sept 2025	Amendments made for KCSIE 2025: Definition of radicalisation changed Updated links for support & advise with child sexual abuse & abusive behaviours Wording changed to EOP education	 19 21/22 21
March 2026	Amendments made for update to *Working Together to Safeguard Children 2026*	6 20
Sept 2026	Amendments made for KCSIE Sept 2026 Terminology 'vulnerable adult' changed to 'adult at risk' Annex 1 – regulated activity updated Staying safe online, content, conduct, contact, commence updated Staff training – links updated Child sexual/criminal exploitation changed for AI	8,10,15,16,18 24 12 14 28

Contents

Safeguarding Definition

Safeguarding means protecting people's health, wellbeing, and human rights, and enabling them to live free from harm, abuse, neglect, harassment, and exploitation, and describes the broader preventative and precautionary approach to planning and procedures necessary to protect children, young people, and adults.

Child Protection focuses on recognising abuse and neglect and acting on it, whereas Safeguarding looks at keeping young people and vulnerable people safe from a much wider range of potential harmful influences and looks at preventative action, not just a reaction.

Prevent

PTP acknowledges the importance of shared responsibility for the implementation of the Government's Prevent Agenda, and for the wellbeing of all our learners and staff. PTP's policies and procedures relating to safeguarding include and reflect the need to protect vulnerable individuals from the growing threat of radicalisation and being drawn into ideologies which support terrorism.

Note

It is important to note that employees of PTP are not responsible for deciding whether learners have been abused or are being groomed/radicalised. Employees are responsible for reporting any concerns to a **Designated Safeguarding Officer** (as specified within this policy) promptly to ensure we are working together to safeguard learners under arrangements in place within this Policy and set down by the Local Safeguarding Children Board (LSCB); and in consideration of the Government's Counter-Terrorism Strategy (CONTEST 2023), in particular the multi-agency intervention process referred to as '**Channel'**.

In the absence of a **Designated Safeguarding Officer**, concerns should be raised with a **PTP Director (as listed in section 2)**.

1.0 General Statement of Policy

1.1 Policy Statement

PTP believes that it is always unacceptable for a learner to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all learners by commitment to practices that protect them. PTP also recognises that it has a responsibility to learners and staff who suffer from mental health conditions.

PTP recognises it's responsibility regarding the risks associated with vulnerable learners (16-18 year olds and adults at risk):

- Vulnerable learners are those that are aged 16-18 years and adults who are identified as vulnerable due to their personal circumstances or behaviours.
- Processes will minimise risks across the whole learner journey from initial engagement, onboarding to delivery and progression.
- Assessments of risk associated with our Safety, Health and Welfare Policy, document mitigation for each learner.

PTP recognises that:

- The welfare of learners and staff is paramount.
- All learners have a right to feel safe and should be protected whilst using PTP's services, and PTP has an obligation to ensure this safety and protection.
- All learners, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation, or identity, have the right to equal protection from all types of harm, abuse or bullying.
- Safeguarding is everyone's responsibility.
- All staff have a right to feel supported in their health and wellbeing within the workplace.
- Working in partnership with learners and with other agencies is essential in promoting a safe learning environment and engaging the learner in 'targeted family help' wherever possible. Staff are alert to where early help may be required earlier in certain cases.

PTP will seek to safeguard learners and staff by:

- Providing a supportive, safe and caring environment for individuals to learn in, and for staff to work in.
- Appointing Designated Safeguarding Officers (one who acts as Safeguarding Lead). These are:
    - DSL – Julie Heathcote (see contact details Section 2)
    - DSO – Amy Johnson (see contact details Section 2)
- Ensuring there is an appropriate Safeguarding Policy and procedure in place.
- Providing training to support staff to recognise signs of neglect, abuse, exploitation and poor mental health (including risk of radicalisation); and understand how to raise concerns or respond to disclosures.
- Adopting safeguarding guidelines through procedures and a code of conduct for staff and volunteers, as well as learners.
- Providing support to employees and learners who are victims of domestic abuse and protecting them against further abuse.
- Adopting safe staff recruiting practices.
- Sharing information about safeguarding and Prevent concerns with agencies who need it, and involving the individual and their parents/carers appropriately.
- Valuing individuals, listening to them, and respecting them.
- Acting in the best interests of the individual.

1.2 Policy Purpose

This policy sets out PTP's commitment to safeguard our learners (and staff) and provides a clear framework to fulfil that commitment in an environment where we promote the safety and welfare of all**.** It details how to record and report potential abuse. It sets out our approach to ensuring safe staff recruitment practices, staff training, and how to deal with allegations of abuse or bullying. The Policy applies to all learners and staff, including senior managers and the board of directors, volunteers, agency staff, or anyone working on behalf of PTP.

1.3 Policy Development.

PTP's Designated Safeguarding Lead, supported by a Board Safeguarding Lead, the Directors and Senior Leadership Team (SLT), have been charged with developing and updating the Safeguarding Policy (and associated procedures) and to positively promote the arrangements contained within them throughout the organisation.

PTP has adopted a learner-centred and co-ordinated approach to Safeguarding and is committed to fulfilling its responsibilities and promoting the welfare of all staff and learners and ensuring that we have a culture of vigilance that minimises any risk of harm. We aim to maintain an attitude of 'it could happen here' when shaping Policy and agreeing procedures.

The term 'learners' is used throughout this Policy to cover all ages of individuals as PTP works with post-16 learners who have left full-time education. The policy pays due regard to the following:

Working Together to Safeguard Children 2026, which sets out the statutory functions of the local authority under the 1989 and 2004 Children's Acts (recognising that we are an important part of the local authorities' wider safeguarding systems).

Keeping Children Safe in Education 2026, statutory guidance from the Department of Education, including, *What to Do if You are Worried a Child is being Abused*.

Safeguarding Vulnerable Groups Act 2006 and the Protection of Freedoms Act 2012, which aims to help avoid harm, or risk of harm, by preventing people who are deemed unsuitable to work with children and adults at risk from gaining access to them through their work.

Counterterrorism and Security Act 2015, which under section 26 requires PTP, as a Training Provider, to have due regard to the need to prevent people from being drawn into terrorism, along with *Revised Prevent Duty Guidance (March 2024): for England and Wales* and *Prevent Duty Guidance: for further education institutions in England and Wales.(Dec 2023)*

Ofsted's *Education Inspection Framework 2026.*

The Human Rights Act 1998, which sets out individuals' rights as follows:

- The right to freedom from inhuman and degrading treatment.
- The right to respect for private and family life including a duty to protect individuals' physical and psychological integrity.
- All rights and freedoms set out must be protected and applied without discrimination.
- Protects the right to education.

1.4 Policy Review

The Policy will be reviewed on an on-going basis in accordance with changes to legislation. The formal review and on-going development of the policy will be led by the Designated Safeguarding Lead and approved by the CEO at least on an annual basis.

2.0 Roles and Responsibilities

2.1 PTP Board

The Board recognises and supports PTP's Safeguarding responsibilities and mental Health responsibilities and will engage with external partners as appropriate to support PTP to meet its safeguarding obligations and aims. Members will receive updates on PTP's arrangements from the CEO and through a quarterly report. The Board will appoint a 'Board Safeguarding Lead' to support the CEO and Designated Safeguarding Lead in exercising their responsibilities and will undertake training on Safeguarding as appropriate.

2.2 CEO

Has overall and final responsibility for Safeguarding and mental health first aid in the company (supported by the Board) and will deal with issues or concerns in the absence of a Designated Safeguarding Officer.

2.3 Managing Director

Authorised to deal with safeguarding or mental health issues or concerns, along with the CEO, in the absence of a Designated Safeguarding Officer.

2.4 Designated Safeguarding Lead (DSL)

- Leads on Safeguarding and mental health for PTP, managing on a day-to-day basis and keeping up to date with safeguarding and mental health developments.
- Ensures working arrangements are in place to safeguard and promote the welfare of all learners and staff.
- Is the first point of contact within PTP for referrals and reports of unwanted behaviour such as bullying and harassment, and for information on safeguarding.
- Responsible for making appropriate decisions in respect of reported concerns and liaising with the local authority and other external agencies as required in line with local authorities' policy.
- Ensures procedures as dictated by this policy are adhered to and that policy development and review takes place.
- Maintains records of safeguarding referrals and allegations of abuse, and records of mental health meetings
- Oversees the referral process and follows up any referrals made, internally and with external agencies.
- Plans, develops, and manages staff training in conjunction with SLT.
- Keeps the CEO up to date with Safeguarding and mental health arrangements and any policy changes required.

The Designated Safeguarding Lead is:
Julie Heathcote
julie.heathcote@ptp-training.co.uk
07870871008
Essex Terrace, Intown, Walsall, West Midlands, WS1 1SQ

2.5 Deputy Designated Safeguarding Officer/s (DSO)

- Supports the DSL in day-to-day management.
- Helps review and develop processes.
- Helps shape and promote policy.

The Deputy Designated Safeguarding Officer is:
Amy Johnson
amy.johnson@ptp-training.co.uk
07734814928
Essex Terrace, Intown, Walsall, West Midlands, WS1 1SQ

The DSL is part of the senior management team, together with the DSO, they receive and manage all of the safeguarding incidents, including low level behaviour changes. They are responsible for training all staff, volunteers, subcontractors, and any contractors on-site who qualify. They will monitor that induction training has been completed by new staff members for Safeguarding and Prevent Duty. They will access additional resources through their established networks to provide training and additional resources to staff. They will organise external annual training on local risks. They will monitor the dedicated email address through QR code and respond to incidents within 24 hours and engage with external agencies such as Family Help, Social Services, Homeless agencies as appropriate.
FFP Programme guide: delivery expectations for statutory safeguarding partners in England: year 2 (2026 to 2027)

2.6 SLT

- Develop, review and monitor Safety, Health, Equality & Diversity Policies and procedures.
- Support the DSL in keeping staff and learners informed of Safeguarding and mental health updates.
- Review the learning and working environment in training centres.
- Help review and develop processes.
- Help shape and promote policy.

2.7 HR

- Manages safer recruitment processes.
- Helps review and develop processes.
- Helps shape and promote policy.

2.8 Mental Health First Aiders

- Maintain their Mental Health First Aider accreditation
- Can be called away from their normal duties at short notice if required
- Maintain confidentiality as appropriate
- Provide mental health first aid within their worksite as needed, at their level of competence and training
- Where there is a risk of harm to another individual, they must escalate the matter to the Senior Designated Safeguarding Officer or a Director.
- Complete refresher training as directed/required
- Contact emergency services if an urgent risk is identified
- Record Mental Health First Aid meetings on a Record of Mental Health First Aid Meeting form (electronic)

The Mental Health First Aiders are:

Julie Heathcote	julie.heathcote@ptp-training.co.uk
Richard Kendrick	richard.kendrick@ptp-training.co.uk
Ian Bailey	ian.bailey@ptp-training.co.uk
Helen Dickson	helen.dickson@ptp-training.co.uk
Amy Johnson	amy.johnson@ptp-training.co.uk
Michelle McColl	michelle.mccoll@ptp-training.co.uk
Harjit Sidhu	harjit.sidhu@ptp-training.co.uk

All Education staff are well placed to observe PTP's learners day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. If someone is struggling with their mental health, self-harming, has an eating disorder or is experiencing suicidal ideation and making plans to end their life, there are likely to be potential warning signs which staff are well placed to recognise. These could include significant changes in behaviour, ongoing difficulty sleeping, withdrawing from social situations, not wanting to do things they usually like, and physical signs of self-harm or neglecting themselves.

Where a staff member discloses details about their mental health or concerns about another staff member's mental health, then the Mental Health First Aider should follow the mental health meeting procedure. See Annex 6

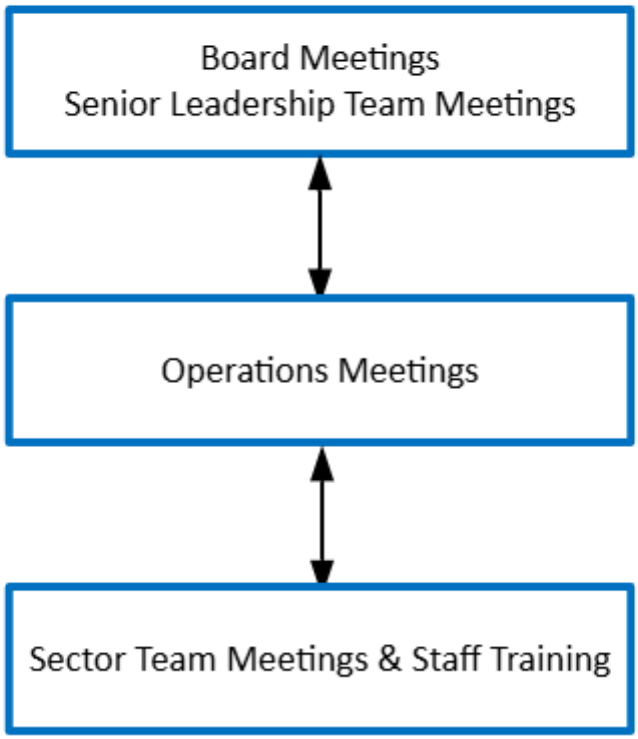
2.9 All employees

Have a responsibility to promote safeguarding to learners and employers; and to co-operate with management to ensure PTP offers a safe working environment for learners. All staff must abide by PTP's "Code of Professional Conduct" at all times, attend Safeguarding and Prevent training as requested, and follow PTP's Safeguarding Policy, particularly in terms of reporting safeguarding incidents and concerns and confronting bullying or harassment in any form. PTP has a zero tolerance to harassment of any kind in the workplace.

- Expected to take reasonable care for their own health, safety and wellbeing whilst at work and take reasonable care to ensure their acts or omissions do not adversely impact and affect the health, safety and wellbeing of other workers.
- Expected to speak to a Mental Health First Aider at any time should they feel they or another employee may be developing a mental health problem, experiencing a worsening of an existing mental health illness, or experiencing a mental health crisis.
- Required to attend mental health training as required.

2.10 Safeguarding Communication Diagram Flowchart

Safeguarding Communication Flow Diagram



Safeguarding is a permanent agenda item at management and staff meetings where everyone can discuss Safeguarding.

3.0 Management of Safeguarding (Preventative)

3.1 Assessment of Risk and Adjustments

Vulnerable learners are identified as those who are aged 16-18, as detailed in Keeping Children Safe in Education (KCSIE) 2026, adults who have particular personal circumstances or behaviours, for example, being subject to domestic violence, self-harm, or having a mental health condition (this list is not exhaustive).

At the initial IAG stage of the learner journey, PTP staff will identify any special circumstances and record them in the learner record. At the onboarding stage, the assigned Tutor will carry out an assessment of risk and create a bespoke plan within the individual learning plan.

Staff should be particularly alert to the potential need for additional support for a young person who:
Is disabled or has certain health conditions and has specific additional needs, has special educational needs (whether or not they have a statutory Education, Health and Care plan), has a mental health need, is a young carer, is pregnant and/or is a parent themselves, has exhibited early signs of abusive, violent and/or harmful behaviours, is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines, is frequently missing/goes missing from education, home or care, is at risk of exploitation, modern slavery, trafficking, including criminal or sexual exploitation, is at risk of being radicalised into terrorism, has a parent or carer in custody, or is affected by parental offending, is in a family circumstance presenting challenges such as drug and alcohol misuse, adult mental health issues and domestic abuse, is misusing alcohol and other drugs themselves, is at risk of honour or faith-based abuse such as Female Genital Mutilation or Forced Marriage, and is a privately fostered child.

3.2 Learners in our Training Centres

All PTP staff have a collective responsibility for the Safeguarding of our learners when they are in our training centres. Learners are informed about Safeguarding during induction. Safeguarding is then embedded throughout the “learner journey”, continually raising awareness as part of PTP’s approach to safeguarding, Prevent, Equality and Diversity and British Values. Learners expected into the centre are contacted if they do not attend, and PTP have not been notified of the absence. The DSL/DSO is informed if contact cannot be made. Consideration will be given to known triggers, risks associated with travel to learn/work patterns, implications of using equipment such as sharp instruments (engineering tools and equipment), start and finish times for applicants that may be subject to external pressures such as domestic violence. Tutors will consider the following:

- Environment including:
    - Location
    - Access
    - Equipment
    - Presence of peer interruption
- Activities:
    - Curriculum content and context
    - Assignment of deadlines
- Staffing
- Activity duration
    - Timings for start and end of activities

3.3 Learners in the Workplace

Safeguarding forms part of PTP’s Workplace Health and Safety Assessment procedure, raising awareness of the importance of Safeguarding with the learner, supervisors, and company representatives.

Safeguarding forms part of the learner induction and is embedded throughout delivery in the workplace.

Employed learners follow their employer absence procedures and employers are encouraged to notify either the Learning and Development Tutor (or DSL/DSO directly) if contact cannot be made. If hosting work experience learners, placement employers are contacted by PTP to check attendance; and employers contact PTP if the learner fails to return from a planned break or planned appointment.

We also recognise our responsibility in ensuring that any of our learners who may encounter vulnerable groups during work placements may also require appropriate checks or restrictions in placement (e.g., learner working with young children in a nursery).

Further guidance on work placement vetting can be found in our **Safety**, **Health and Welfare Policy and procedures.**

Where learners are transferring from another provider, PTP will request any existing safeguarding records relating to the transferring learners.

3.4 All learners

Delivery staff have access to learning resources for use with learners in our centres, and with learners who are based in the workplace. PTP's aim is to raise awareness and help learners stay safe and to build resilience to threats (including on-line threats). Learners are made aware of the support available and who they can contact if they have a concern or issue about their own, or others' safety. Details of PTP's Designated Safeguarding Officers are also displayed in our Centres and we have a designated safeguarding email address. PTP also acknowledges that learners can abuse their peers. PTP makes clear to learners that 'abuse is abuse' and should never be tolerated. Learners are reminded regularly of who to report safeguarding issues and general concerns to. Learners are provided with general advice and guidance as required, and PTP will signpost learners to other organisations for support when relevant. All curriculum plans include wider curriculum topics which differ according to age of learner and level of programme. This aims to create a culture of zero tolerance for sexism, racism, misogyny/misandry, homophobia, biphobia, sexual violence/harassment, derogatory behaviour or other forms of physical violence and conflict. Topics covered will also include local risks such as knife crime and county lines.

3.5 Safeguarding and Online Learning

Whilst teaching and meeting with learners online, PTP Tutors should ensure the following:

- Learners and Tutors wear appropriate clothing.
- Lessons/meetings take place in appropriate areas, for example not in bedrooms unless the background is blurred or changed.
- Language is kept appropriate and professional during sessions and in chat functions.
- Lessons are kept to a reasonable length of time and regular breaks from screens should be planned.
- PTP's normal policy of not contacting learners via social media should be adhered to.

3.6 Monitoring IT Usage

PTP's in-centre computers and training laptops are set so any unsuitable websites are automatically blocked as 'at risk' websites. Tutors monitor learners' activity whilst using IT equipment, and PTP has achieved the Cyber Essentials Certificate, which is renewed annually. A review of the effectiveness of filtering and monitoring systems will be carried out yearly.

Learners are taught about keeping safe online as part of our wider curriculum content. This will include

content: being exposed to illegal, inappropriate, or harmful content, for example: pornography, racism, misogyny, self-harm, suicide, antisemitism, radicalisation, extremism, extreme sexual or physical violence, misinformation, disinformation (including fake news) and conspiracy theories,
contact: being subjected to harmful online interaction with other users or generative AI applications that simulate this; for example: peer-to-peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes
conduct: online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images, including those generated using AI, and online bullying, and
commerce: risks such as online gambling, inappropriate advertising, phishing and/or financial scams. If you feel your pupils, students or staff are at risk, please report it to the Anti-Phishing Working Group.

3.7 Learners on programme through our Delivery Subcontractors

Subcontractors are required to have arrangements in place which at least meet PTP's own standards. As a minimum, we expect:

- A satisfactory quality systems audit, carried out by PTP's Designated Officer before delivery of provision commences.
- Safeguarding matters are well managed.

3.8 Photographing Learners

All persons wishing to record any images of learners e.g., Equality and Diversity events, must complete the necessary consent form. Staff should challenge any persons acting suspiciously and recording images of learners without consent.

With advances in technology, staff must be extra vigilant. Whilst a ban on the use of mobile phones is not practical and would be difficult to police, staff should certainly challenge any person using recording equipment without consent.

Images of non-employed Children/Young People (16–17year olds) will not be used to promote PTP Training without the express permission of the parent or carer.

3.9 Administering First Aid to Learners

If employees are required to administer first aid to any learners, either as the result of abuse or a result of an accident, employees will observe the following guidelines:

- Where possible two employees should be present.
- The employees should, where possible, be a gender mix of male/female.
- Wherever possible, an employee of the same gender as the injured learner should administer any first aid required; however, this should not prevent administering first aid if the same gender is not available in any emergency.

In certain circumstances, the provision of first aid must be immediate, and it may not be possible to comply with all the above guidelines. In these circumstances, employees must remain vigilant and protect themselves from any allegations of inappropriate behaviour.

3.10 Use of PTP Training Centre Rooms

As part of PTP's aim to safeguard learners, staff, and visitors, uphold British values and prevent individuals being drawn into terrorism, whilst acknowledging the fundamental right to freedom of speech, PTP has in place a Room Booking Protocol. Though relatively few, external use of rooms within PTP centres must also be controlled and assessed. Staff involved in booking rooms on PTP premises must follow the **Room Booking Procedure** and complete an assessment.

3.11 Staff Recruitment, Selection and Pre-employment Checks

PTP strives to create a culture of safe recruitment and, as part of this, ensure that we have in place procedures that help deter, reject, or identify people who pose a risk of harm to our service users. Processes comply with *Keeping Children Safe in Education 2026.*

The Disclosure and Barring Service (DBS) was introduced in 2012, through the *Safeguarding Vulnerable Groups Act 2006* and *Protection of Freedom Act 2012*, its purpose to reduce the risk of harm to children and adults at risk.

PTP has DBS and Vetting Procedures in place as part of its recruitment processes to enable PTP to determine regulated or unregulated activity and carry out DBS checks as appropriate (see **Annex 1** for more information about regulated activity). The full legal definition of regulated activity is set out in *Schedule 4 of the Safeguarding Vulnerable Groups Act 2006* as amended by the *Protection of Freedoms Act 2012*.

PTP will make a referral to the Disclosure and Barring Service (DBS) if a person in regulated activity has been dismissed or removed due to safeguarding concerns or would have been if they had not resigned.

Where a DBS has not yet been received for a new member of staff, a ***DBS Risk Assessment Form for Staff/Associates/Volunteers*** will be completed on their first day of employment.

When a member of staff changes their job role within PTP, a risk assessment will be completed to ascertain if a new DBS is required.

Further guidance can be found in *Keeping Children Safe in Education 2026,* and further staff guidance on PTP's Safer Recruitment processes can be found in the HR Policies and Procedures.

Information about the Independent Safeguarding Authority can be found on the following website www.gov.uk/disclosure-barring-service-check/overview

3.12 Staff Code of Professional Conduct

All staff must clearly understand the need to maintain appropriate boundaries in their dealings with learners. All staff must adhere to PTP's Staff Code of Professional Conduct, which outlines PTP's behavioural expectations, including acceptable use of technologies, staff/learner relationships, and communications (including social media).

PTP recognises that staff may sometimes be victims of false or malicious allegations of learner abuse and PTP's expectations also aim to minimise this risk. The Staff Code of Professional Conduct can be found in PTP's Staff Handbook.

3.13 Staff Training

All staff and volunteers will be trained in Safeguarding as part of their induction programme and will have awareness and understanding of PTP's Safeguarding Policy and procedures. Safeguarding training will be updated regularly.

Staff will receive regular safeguarding updates through PTP's communication meetings and the 'monthly whoosh'. It is the responsibility of the Designated Safeguarding Officers to raise awareness amongst staff on a regular basis.

PTP will ensure Designated Safeguarding Officers are trained to provide them with the skills and knowledge required to carry out their role. Formal training will be updated annually. Knowledge and skills will be updated regularly, and they agree to keep up to date with developments in Safeguarding and Prevent.

The rationale behind PTP's training model is to develop a competent, vigilant management framework. In doing so, the protection of learners will not rely solely on the screening of employees through recruitment and the DBS disclosure process, but through a systematic approach to safeguarding and Prevent.

Training will be revised and developed in line with Government and local priorities.

Subcontractors will need to evidence a programme of safeguarding and Prevent training, and this will be managed by PTP's Designated Person and Sub-Contract Manager.

Records of formal (internal and external) training will be recorded on PTP's 'People HR' system and will show who has been trained and when.

Training Schedule for new Staff

New staff, as part of their induction programme, will complete the following training within the following timescales:

Within 2 weeks of joining PTP:

Introduction to Safeguarding part 1– internal e-learning course via the staff intranet.

Within 2 months of joining PTP:

Formal **Prevent** training accredited by The Education and Training Foundation (ETF) is accessed via etfoundation.co.uk. Complete the ***'Prevent for Further Education & Training'*** course. Link Prevent for the Further Education and Skills Sector 2026/27

Within 2 months of joining PTP:

Formal **Safeguarding** on-line training, accredited by the Education and Training Foundation (ETF) via etffoundation.co.uk. will be completed by staff. Link Safeguarding in the Further Education and Skills Sector 2026/27

Following the course, staff will complete an on-line assessment.

	Initial Training	Further Training
All Staff & Board Members	Safeguarding in the Further Education(FE) and Training Sector Safeguarding in the Further Education and Skills Sector 2026/27	Safeguarding and Prevent training at least bi-yearly
Recruiting Managers	Safeguarding and Safer Recruitment in FE Safer Recruitment in the Further Education and Skills Sector 2026/27	Training completed during the first 2 months of employment, and updated every 3 years
Designated Persons	Also, to complete additional training for DSLs	Safeguarding and Prevent training at least yearly

3.14 Risk Assessments

Safeguarding and Prevent are embedded as part of our risk assessment processes as detailed in the **Safety, Health and Welfare Policy and Procedures.** Queries or concerns for a learner's (or staff member's) safety must be referred to the DSL/DSO.

3.15 Mental Health First Aid

PTP will seek to support staff members' mental health by:

- Providing a supportive environment for staff members to work in.
- Appointing Mental Health First Aiders within the business

- Providing training to support staff to recognise signs of mental health conditions
- Valuing individuals, listening to them, and respecting them.
- Acting in the best interests of the individual

Mental health first aid is the help offered to someone developing a mental health problem, experiencing a worsening of an existing mental illness, or a mental health crisis. The first aid is given until appropriate professional help is received, or the crisis resolves.

A mental health first aider is a person who has been formally accredited to administer mental health first aid in their workplace, by attending and passing an assessment in a Mental Health First Aid Course that has been delivered by an Accredited Mental Health First Aid Instructor and appointed by PTP.

4.0 Safeguarding Issues

4.1 Types of Abuse, Neglect & Exploitation

PTP recognises that abuse, neglect, exploitation and safeguarding issues are rarely standalone events that can be covered by one definition. In most cases, multiple issues will overlap with one another. The following information is taken primarily from the *Keeping Children Safe in Education* guidance 2024, but can be applied to all individuals in the context of this Policy (although the Designated Safeguarding Officer will follow age-related requirements when a referral from staff is received). Therefore, the word child' has been replaced with 'individual' to include children, young people and adults at risk of harm.

Abuse:

Abuse is a form of maltreatment of an individual. Somebody may abuse or neglect an individual by inflicting harm or by failing to act to prevent harm.
They may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g., via the internet). They may be abused by an adult or adults or by another child or children. Children may also cause harm to other family members, often referred to as child-to-parent or caregiver abuse.

4.1.1 Physical Abuse

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning; or scalding, drowning, suffocating; or otherwise causing physical harm to an individual. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in an individual.

4.1.2 Emotional Abuse

The persistent emotional maltreatment of an individual such as to cause severe and adverse effects on their emotional development, which may include verbal abuse, such as persistent criticism, belittling, or name-calling. It may involve conveying to them that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the individual opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on an individual. These may include interactions that are beyond the individual's developmental capability as well as overprotection and limitation of exploration and learning or preventing them from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing individuals frequently to feel frightened or in danger, or the exploitation or

corruption of individuals. Some level of emotional abuse is involved in all types of maltreatment of an individual, although it may occur alone.

4.1.3 Sexual Abuse

Involves forcing or enticing someone to take part in sexual activities, not necessarily involving violence, whether or not the person is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or penetration with an object) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education, and all staff should be aware of it.

4.1.4 Neglect

Neglect is the persistent failure to meet an individual's basic physical and/or psychological needs, likely to result in the serious impairment of their health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, the individual's basic emotional needs.

4.1.5 Child Sexual Exploitation (CSE) And Child Criminal Exploitation (CCE)

This is a form of sexual abuse where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity. It can involve violent, humiliating, and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection, or status. The abuse can be a one-off occurrence or a series of incidents over time. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation does not always involve physical contact and can happen online. A considerable number of children who are victims of sexual exploitation go missing from home, care, and education at some point. This can be committed by an individual or an organised network. Most sexual abuse is committed by someone known to the victim.

4.2 Specific Safeguarding Issues

PTP's Safeguarding approach aims to ensure staff, employers and learners are aware of potential safeguarding issues and be aware that issues can manifest themselves via peer-on-peer abuse, such as bullying/cyberbullying, gender-based violence/sexual assaults and sexual exploitation and harassment. The following gives an overview of some of the specific safeguarding issues that may affect our learners.

4.2.1 Child on Child Abuse (peer on peer)

Peer-on-peer abuse is most likely to include, but may not be limited to, bullying (including cyberbullying), physical abuse, serious physical assault or harm or the threat of harm with a weapon, sexual violence & sexual harassment, causing someone to engage in sexual activity without consent, consensual and non-consensual making or sharing of nudes and semi nudes, upskirting, initiating/hazing type violence rituals. PTP aims to minimise this by ensuring all learners are aware of our Learner Code of Conduct and Acceptable Usage Agreement (with clear

procedures where our expectations are not met), underpinned by PTP's approach to Equality and Diversity and upholding British Values. Any victims of child-on-child abuse will be fully supported. PTP understands that although there may not be any reported cases, abuse may still be taking place.

4.2.2 Forced Marriage

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical, emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example).

4.2.3 People who are missing

Every year an estimated 200,000 people go missing in the UK. In some cases, missing adults may have made a choice to leave and 'start their lives over again', but the vast majority of missing people, children and adults, are vulnerable and need protection and support. PTP has an Attendance Policy for learners attending the centre and monitoring procedures for learners on work experience placements, so that staff can quickly identify potential safeguarding issues.

4.2.4 Domestic Abuse

Domestic abuse can encompass a wide range of behaviours and may be a single incident or pattern of incidents. The abuse can be, but is not limited to, psychological, physical, sexual, financial, threatening behaviour or emotional abuse between adults, aged 16 and over, who are or have been intimate partners or are family members, regardless of gender and sexuality. This includes honour-based violence, forced marriage and female genital mutilation (FGM). PTP recognises that the responsibility for abuse lies with the perpetrator.

Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse at home and/or in their own intimate relationships. All of which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn. We recognise that some victims experience additional barriers in accessing support services due to cultural and social perceptions regarding gender, sexuality and ethnicity. We acknowledge that domestic abuse is also experienced by men.

4.2.5 Female Genital Mutilation (FGM)

This comprises of all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. There are specific and timely personal reporting requirements for staff members receiving disclosure of, or having evidence of, FGM in under 18's. There is a legal duty for FGM concerns to be reported to the police.

4.2.6 Radicalisation

Protecting individuals from the risk of radicalisation is seen as one of PTP's safeguarding duties and is similar in nature to protecting individuals from other forms of harm and abuse. During the process of radicalisation, it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation is the process of a person legitimising support for, or use of, terrorist violence

There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many ways and settings.

Staff use the existing Safeguarding referral procedure if they have any concerns. A 'Prevent' related referral received by the DSL/DSO may require the DSL informing the Counter-Terrorism Unit and our FE Prevent Co-ordinator, to ensure the most appropriate agency supports the individual.

Channel is a programme which focuses on providing support at an early stage for people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for organisations to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages.

4.2.7 So-called Honour Based Violence

So-called "honour-based abuse" encompasses crimes which have been committed to protect or defend the honour of the family and/or the community. This includes FGM, forced marriages & practices such as breast ironing. It often involves a wider network of family or community pressure. Abuse could be violent or non-violent abuse.

4.2.8 Bullying and Harassment

Bullying is behaviour by an individual or group, repeated over time, that intentionally hurts another individual or group either physically, verbally or psychologically. It is where the relationship involves an imbalance of power. Bullying can be face to face or online (for instance, cyber-bullying via text messages, social media, or gaming, which can include the use of images and video) and is often motivated by prejudice against particular groups, for example on grounds of race, religion, gender, sexual orientation, special educational needs or disabilities, or because a person is adopted, in care or has caring responsibilities. It might be motivated by actual differences between individuals, or perceived differences.

The rapid development of, and widespread access to, technology has provided a new medium for 'virtual' bullying, which can occur in or outside the organisation. Cyber-bullying is a different form of bullying and can happen at all times of the day, with a potentially bigger audience, and more accessories as people forward on content at a click.

- Physical – pushing, poking, kicking, hitting, biting, pinching etc.
- Verbal - name calling, sarcasm, spreading rumours, threats, teasing, belittling.
- Emotional – isolating others, tormenting, hiding books, threatening gestures, ridicule, humiliation, intimidating, excluding, manipulation and coercion.
- Sexual – unwanted physical contact, inappropriate touching, abusive comments, homophobic abuse, exposure to inappropriate films etc.
- Online /cyber – posting on social media, sharing photos, sending nasty text messages, social exclusion.
- Indirect - Can include the exploitation of individuals

Any incidences of bullying or child on child (peer on peer) abuse will be taken seriously and staff will reassure learners that they will be taken seriously, - and they will be supported and kept safe. It is understood that just because we have not seen it happen, we realise that it does not mean that it is not happening.

Harassment is behaviour towards a person that causes mental or emotional suffering, which includes unwanted contact without a reasonable purpose, such as insults, threats, touching or language which someone finds offensive, intimidating or humiliating. Harassment could be verbal, non-verbal or physical. Harassment is unlawful if it is connected to one of the nine protected characteristics.

4.2.9 Homelessness

Being homeless or being at risk of becoming homeless is a threat to someone's welfare. Concerns should be raised at the earliest opportunity so that relevant referrals can be made by the Designated Safeguarding Officer.

4.2.10 Child Criminal Exploitation: County Lines

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of “deal line”. They are likely to exploit children and adults at risk to move and store the drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons. Gangs will enlist young or vulnerable people to transport goods from inner cities to rural or coastal areas. Victims may identify as part of this gang. This may constitute modern slavery.

County lines activity and the associated violence, drug dealing and exploitation have a devastating impact on young people, adults at risk and local communities.

4.2.11 Modern Slavery and Trafficking

Modern slavery includes the crimes of human trafficking, slavery, and slavery like practices such as servitude, forced labour, forced or servile marriage, the sale and exploitation of children, and debt bondage.

4.2.12 Upskirting

The Voyeurism (Offences) Act, which is commonly known as the Upskirting Act, came into force on 12 April 2019. ‘Upskirting’ is where someone takes a picture under a person’s clothing (not necessarily a skirt) without their permission and/or knowledge, with the intention of viewing their genitals or buttocks (with or without underwear) to obtain sexual gratification, or cause the victim humiliation, distress, or alarm. It is a criminal offence. Anyone of any gender can be a victim.

Links to Government sites giving more information on some of the main Safeguarding Issues can be found in **Section 8**.

For the main safeguarding issues and possible signs to look out for see **Annex 3**.

5.0 Dealing with Concerns of Abuse, Neglect or Exploitation

5.1 Key Principles to Work By

PTP aim to ensure there is a culture of safeguarding. Staff need to understand how to deal with a concern/disclosure/allegation and know how to manage the requirement to maintain an appropriate level of confidentiality whilst liaising with the DSL/DSO, and other agencies as directed by the DSL. Staff are encouraged to follow these 4 steps:

Be alert to signs – alert to the signs of abuse, neglect, and exploitation and to understand PTP procedures and referral process.

Question behaviour - the signs of child abuse might not always be obvious, and a learner might not tell anyone what is happening to them. You should therefore question behaviours if something seems unusual.

Ask for help - if you are at all unsure about a learner’s welfare, ask for help from the Designated Safeguarding Officer.

Refer – refer to the Designated Safeguarding Officer (DSO) or Senior Designated Lead (DSL) or authorised Director in a DSL/DSO’s absence, unless the learner is in immediate danger, where direct referral may be required.

5.2 The 5 R’s

All staff have a responsibility to follow the 5 R’s (Recognise, Respond, Report, Record & Refer) whilst engaged on PTP’s business, and must immediately report any concerns about an

individual's welfare to a DSL or DSO or to an authorised Director in their absence. Further guidance on the 5 R's can be found in **Annex 2**.

5.3 Information Sharing and Confidentiality

It is important to remember that throughout all stages of our processes, sharing information is an intrinsic part of our role. The decisions about how much information to share, with whom and when, can have a profound impact on people's lives. Staff should weigh up what might happen if the information is shared against the consequences of not sharing the information. Early sharing of information is key to providing effective early help where there are emerging problems. Sharing information can be essential to put in place effective protection services.

Whilst legislation places duties on organisations and individuals to process personal information fairly and lawfully, it is not a barrier to sharing information where the failure to do so would result in an individual being placed at risk of harm. Fears about sharing information cannot be allowed to stand in the way of the need to promote the welfare and protect the safety of staff and learners. Although inter-agency working and information sharing are vital in identifying and tackling all forms of abuse, it is clear they are especially important to identify and prevent child sexual exploitation.

If a learner discloses information, staff must not promise that they will not tell anyone – this is ultimately against the best interests of the learner.

However, records and information must be retained confidentially as all reports will contain sensitive data. The DSL/DSO is responsible for retaining reports and information securely.

It is considered good practice that DSL/DSOs inform any person that they intend to refer their conduct or actions to Social/Care Services. However, the following exceptions apply:

- If sexual abuse is suspected within the family
- If there is evidence of fabricated or induced illness
- If to do so would place the child/person in more danger
- If to do so would place the staff member in danger

Further government advice on information sharing can be found at

Information sharing advice for safeguarding practitioners - GOV.UK (www.gov.uk)

https://assets.publishing.service.gov.uk/media/69bb9be99c6ac6540dfd61f1/Working_together_to_safeguard_children_2026.pdf

5.4 If a staff member has a concern about an individual

If a staff member has a concern about an individual (as opposed to the individual being in immediate danger) the staff member must report the concerns to the DSL or DSO (or authorised Director if unavailable) following the 5R's. This includes concerns in addition to actual safeguarding incidents.

All staff should be aware that individuals may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. For example, they may feel embarrassed, humiliated, or threatened. This could be due to their vulnerability, disability and/or sexual orientation or language barriers. This should not prevent staff from having a professional curiosity and speaking to the designated safeguarding lead (DSL) if they have concerns.

The Safeguarding Report Form will then be completed by the DSL/DSO who has received training in its completion. Any referral to an external agency by a director will be reported to the DSL. The DSL will follow up on any referral where a response from the Agency/appropriate support is not forthcoming. The DSL is responsible for overseeing the referral process to external agencies.

5.5 If a third party reports a concern about an individual

If a staff member is informed of a concern about an individual, by another individual (learner, employee, or colleague), the staff member must report the concerns to the DSL/DSO (or authorised Director if unavailable) following the 5R's.

The Safeguarding Report Form will then be completed by the DSO who has received training in its completion. If necessary, the DSO will contact the Police, Local Authority or Child Protection Helpline for advice.

5.6 If the individual is in immediate danger or risk of harm

In an emergency, the staff member should contact the local authority's Social/Care Services and/or Police immediately and the DSL is informed. The DSL will follow this up when it is safe to do so by completing the Safeguarding Report Form and complying with the reporting procedure.

5.7 If a staff member observes abuse taking place

If a staff member observes abuse taking place, intervention may be required to protect and safeguard the individual.

Intervention is defined as being any direct action which is taken to safeguard individuals which is over and above observing the suspect or merely completing the Safeguarding Reporting Form.

Any intervening action should be taken with extreme caution.

If intervention is required, it will be in response to an obvious incident e.g., a physical assault on a learner. The nature of the incident will dictate the response and action.

Where possible the Police should be called. However, if a delay would place the individual in further danger, staff members should take appropriate action. Anyone intervening must not place themselves at risk and must only use "reasonable force" as a last resort.

Once appropriate action has been taken, the incident must be immediately reported to the CEO, the Police, Social/Care Services or the Child Protection Helpline and the Safeguarding Report Form completed by the Designated Safeguarding Officer.

In appropriate cases, where it is safe to do so, the individual concerned should be made aware that their conduct or actions are unacceptable and are giving cause for concern.

Do not attempt to detain the individual or get involved in any physical contact.

PTP does not have insurance cover for any employee who fails to comply with this requirement.

5.8 If an individual discloses abuse to a staff member

All disclosures made must be treated seriously, and whilst the sensitivity and confidentiality of the situation should be respected, such disclosures should be reported immediately using the established reporting procedure to the DSL/DSO) (or authorised Director if unavailable). The DSL/DSO will complete the Safeguarding Report Form.

If staff have a safeguarding concern that does not meet the harm threshold, then this should be reported as a concern to the DSL/DSO who will record on the Behaviour log.

If necessary, the DSL will contact the Police (or local Prevent Officer), Local Authority or Child Protection Helpline for advice.

For further guidance on dealing with safeguarding issues, see **Annex 4**.

6.0 Dealing with Allegations of Abuse Against Members of Staff

6.1 If a staff member has a concern about a colleague's conduct

Where a staff member has a concern about another staff member, they should report this to the CEO (which can be through a Designated Safeguarding Officer if preferred). They should not disclose the fact that they are making a report to the individual concerned or any other colleagues.

If the concern is about the CEO, the Board's Safeguarding Lead should be informed, via the DSL if preferred.

If the concern is about a DSL/DSO, then the CEO should be informed, (via another DSO if preferred).

The DSL, the CEO and the Board's Safeguarding Lead (as appropriate to the allegation) will evaluate the need to notify the Local Authority Designated Officer (LADO), Children's Services and the Police.

The DSL (where appropriate) will oversee the procedure for dealing with the allegation and any liaison with the Local Safeguarding Children Board as required.

Further guidance on reporting a Colleague can be found in the Whistle Blowing Policy within the staff handbook.

6.2 If a staff member has a concern about safeguarding practices within PTP or its subcontractors

All staff should feel able to raise concerns about safeguarding practice or potential failures in PTP's (or its subcontractor's) regimes and know that such concerns will be taken seriously. For reporting procedure, refer to paragraph 6.1 above.

7.0 Other Related PTP Policies

- Code of Professional Conduct
- Safety, Health & Welfare Policy
- Equality & Diversity Policy
- Disciplinary Procedure
- Staff handbook

8.0 Useful Websites

Disclosure and Barring Service	Disclosure and Barring Service - GOV.UK
Child Exploitation & CEOP Education	www.ceop.gov.uk
NSPCC	NSPCC Helpline | NSPCC
Social Care Institute for Excellence	http://www.scie.org.uk
Dignity in Care	Website www.dignityincare.org.uk
Care Quality Commission (CQC) **national body that inspects and rate care providers**	CQC national Customer Service Centre Citygate Gallowgate Newcastle upon Tyne NE1 4PA Telephone: 03000 616161 https://www.cqc.org.uk/
Online Safety	https://beinternetlegends.withgoogle.com/en_uk Disrespect NoBody campaign - GOV.UK Our Helplines - UK Safer Internet Centre
Concerns of Child Sexual abuse & abusive behaviours	Child abuse concerns: guide for practitioners - GOV.UK Domestic abuse: how to get help - GOV.UK Child abuse linked to faith or belief: national action plan - GOV.UK Forced marriage resource pack - GOV.UK

	Tackling Child Sexual Abuse Strategy - GOV.UK Preventing Child Sexual Exploitation | The Children's Society

1 – Information on Regulated Activity

Annex 1

Regulated Activity Relating to Children

Regulated activity includes:

a) teaching, training, instructing, caring for (see (c) below) or supervising children if the person is unsupervised, or providing advice or guidance on physical, emotional, or educational well-being, or driving a vehicle only for children,

b) work for a limited range of establishments (known as 'specified places', which include schools and colleges), with the opportunity for contact with children.

Work under (a) or (b) is regulated activity only if carried out frequently, or if it meets the period condition; this means:

- On more than 3 days in a 30 - day period
- Overnight

Some activities are always regulated activities, regardless of their frequency or whether they are supervised or not. This includes:

c) relevant personal care, or health care provided by or provided under the supervision of a health care professional:

- personal care includes helping a child with eating and drinking, for reasons of age, illness or disability, or in connection with toileting, washing, bathing and dressing.
- health care means care for children provided by, or under the direction or supervision of, a regulated health care professional.

Regulated Activity Relating to Adults

There are six categories of people who will fall within the definition of regulated activity (and so will anyone who provides day to day management or supervision of those people). A broad outline of these categories is set out below:

(i) Providing health care

Any health care professional providing health care to an adult, or anyone who provides health care to an adult under the direction or supervision of a health care professional. Please see the Safeguarding Vulnerable Groups Act 2006, as amended by the Protection of Freedoms Act 2012, for further details about what is meant by health care and health care professionals.

(ii) Providing personal care

Anyone who:

- provides physical assistance with eating or drinking, going to the toilet, washing or bathing, dressing, oral care or care of the skin, hair or nails because of an adult's age, illness or disability.
- prompts and then supervises an adult who, because of their age, illness or disability, cannot make the decision to eat or drink, go to the toilet, wash or bathe, get dressed or care for their mouth, skin, hair or nails without that prompting or supervision; or
- trains, instructs or offers advice or guidance which relates to eating or drinking, going to the toilet, washing or bathing, dressing, oral care or care of the skin, hair or nails to adults who need it because of their age, illness or disability.

(iii) Providing social work

The activities of regulated social workers in relation to adults who are clients or potential clients. These activities include assessing or reviewing the need for health or social care services and providing ongoing support to clients.

(iv) Assistance with general household matters

The provision of assistance to an adult because of their age, illness or disability, if that includes managing the person's cash, paying their bills or shopping on their behalf.

(v) Assistance in the conduct of a person's own affairs

Anyone who provides various forms of assistance in the conduct of an adult's own affairs, for example by virtue of an enduring power of attorney. Please see the Safeguarding Vulnerable Groups Act 2006, as amended by the Protection of Freedoms Act 2012, for the further categories which are covered here.

(vi) Conveying

A person who transports an adult because of their age, illness or disability either to or from their place of residence and a place where they have received, or will be receiving, health care, personal care or social care; or between places where they have received or will be receiving health care, personal care or social care. This will not include family and friends or taxi drivers.

Annex 2 – THE 5 R'S

Annex 2

Safeguarding, if it is to impact on all aspects of our organisation, must be the informed responsibility of all. All staff, senior managers, subcontractors, and work placement employers have a responsibility to make the learning environment safe and secure for all.

To do so you should consider and act on the **5 R's**

- Recognition
- Response
- Reporting
- Recording
- Referral

Recognition – All Staff

The ability to recognise behaviour that may indicate abuse is of fundamental importance. Whether the abuse may occur on our premises or in the home or in any other setting in which the learner may find themselves, all those playing a role in meeting the learners' needs should be aware and informed so that possible abuse can be recognised, investigated, and acted on seamlessly and effectively.

Signs and symptoms of abuse of learners may include direct disclosure. Other people in a position to identify concerns include Learning and Development Tutors, employers, Quality Leads, other learners and those offering additional services, such as the Connexions Service. All of these should be trained to understand signs of possible abuse and know how, where and to whom to report concerns.

Response - All Staff

Appropriate response is vital. No report of or concern about possible abuse should ever be ignored. In order to determine the most appropriate response, find out whether you are dealing with an allegation from a learner against a member of staff or a fellow learner, or another. Is this a disclosure from an individual alleging abuse to themselves or to another? Is it the reporting of a concern or suspicion? What, precisely, is alleged to have happened? Clearly understood detail is vital when reporting your concerns to a Designated Officer.

Do not lead or probe with questions. Remain calm and demonstrate interest and concern while questioning. Listen well. Inform the person sharing with you that concerns they have raised must be recorded and passed on so that possible abuse can be dealt with, and that this will be done on a limited "need to know" basis, with as few others as possible knowing the identity of the complainant and all in the chain of reporting will respect confidentiality.

Reassure them that they have done the right thing in reporting their concerns and that you will do everything you possibly can to help. Do not make unrealistic promises. Ensure that testimony is passed to the Designated Officer so they can record on the Safeguarding Report Form, and that the complainant and subject of the complaint are treated in line with policy and guidance.

Reporting – All Staff

The following staff are trained Designated Safeguarding Officers:

- Julie Heathcote
- Amy Johnson

They have received training and support to ensure they carry out this role effectively. During both staff and learner inductions, the Designated Safeguarding Officer will be identified, and there are safeguarding policy statements displayed at each training centre to inform the learners.

Report your concerns to the Designated Safeguarding Officer in the first instance. Should this be inappropriate for whatever reason, you should not hold back from reporting but do so to an alternative Designated Officer or to an Authorised Director.

Once you have reported concerns about the abuse to the Designated Safeguarding Officer it is their responsibility to take further action.

Recording – Designated Safeguarding Officer

Designated staff should record precisely what has been alleged, using the words of the complainant. Records should include an accurate quotation. It should also, if felt appropriate, include factual observations about the observable physical and emotional state of the individual sharing their concerns with you.

Referral - Designated Safeguarding Officer

Only a Designated Officer should mount an investigation into suspicions of abuse. An investigation may include questioning staff or learners. Actions of this sort carried out by someone other than the Designated Officer could be construed as unjustified interference which could jeopardise an investigation and any possible subsequent court case. An exception to this is where an allegation means it is inappropriate to involve the DSL/DSO, where the Whistleblowing Policy will be applied.

Annex 3 – Identifying Abuse

Annex 3

Physical Abuse - Signs & Symptoms

- Unexplained injuries – frequent visits to GP or Hospital
- Person exhibiting self-harm
- Unexplained bruising (unusual patterns or areas)
- Unexplained fractures
- Unexplained burns (particularly in unlikely areas)
- Person appears frightened or behaves differently when in the presence of particular people
- Pinch or grip marks on upper arms
- Bite marks
- Person exhibits a change in usual behaviour

Sexual Abuse - Signs & Symptoms

- Pregnancy as a result of an act of abuse
- Person is very withdrawn or unusually subdued
- Person experiences pain, itching or bleeding in genital/anal area
- Bruising on inner thighs, upper arms or chest

Psychological Abuse - Signs & Symptoms

- Person has low esteem, is fearful, anxious, depressed or withdrawn.
- Obsessive or ritualistic behaviour
- Changes in personality
- Reluctant to give eye contact
- Self harming
- Person may suffer from insomnia or sleep excessively
- Sudden over-eating and weight gain
- Loss of appetite and weight loss
- Person becomes compliant

Financial Abuse/Exploitation - Signs & Symptoms

- Lack of money, even on benefit days
- Considerable debt and lack of money for basic living requirements
- Always asking to borrow money
- Someone expressing sudden/inappropriate interest in a person and their money
- Sudden or unexplained withdrawals from a bank account
- Bank books, credit cards cheque books are “lost”

Neglect – Signs and Symptoms

- Sudden or continuous weight loss
- Poor physical appearance or condition/body odour, dirty clothes
- Low mood
- Decaying teeth, overgrown toenails
- A person may lack necessary aids like walking frames, hearing aids, spectacles
- Insufficient or inappropriate clothing

Discriminatory Abuse - Signs and Symptoms

- Withdrawn and anxious
- Self-loathing/self-harm
- Defensive behaviour
- Loss of self-confidence - becoming self-critical
- Reluctance to socialise outside of own/known culture/caste
- Anger and aggression
- Feelings of heightened vulnerability
- Self neglect in appearance and diet

Domestic Abuse – Signs and Symptoms

- Withdrawn and anxious
- Self-loathing/self-harm
- Defensive behaviour
- Loss of self-confidence - becoming self-critical
- Reluctance to socialise outside of own/known culture/friendship group
- Anger and aggression
- Feelings of heightened vulnerability
- Self-neglect in appearance and diet
- Absence and lateness
- Bruises and physical injuries

Bullying/Cyberbullying

- Becomes withdrawn, anxious and lacking in confidence
- Stammers when talking
- Threatens suicide
- Regularly feels sick or unwell
- Unexplained cuts or bruises
- Becomes aggressive, disruptive or unreasonable, or general behaviour changes
- Does not want to use the internet
- Nervous or jumpy when a cyber message is received
- Reluctance to go into work or come into the centre
- Loss of appetite, weight loss, not sleeping

Drugs and Other Addictions

- Withdrawal symptoms such as cravings, moodiness, bad temper, poor focus, frustration, bitterness and resentment

- Financial difficulties
- Having problems with the law
- Dropping of interests and hobbies

Fabricated or Induced Illness

- Symptoms only appear when parent or carer are present
- Poor response to medication or other treatment
- Limiting of daily activities
- Excessive medical tests and procedures

Faith Abuse

- Pre-occupied thinking and anxiety
- Obsessive thinking, fear
- Lack of sleep and concentration
- Stomach aches, sweating and headaches
- Overuse of control on people, groups and expression
- Pressure to attend church services

Child on Child (Peer on peer) Abuse

- Becomes withdrawn, anxious and lacking in confidence
- Stammers when talking
- Threatens suicide
- Feels ill in the morning and feels sick
- Unexplained cuts or bruises
- Becomes aggressive, disruptive or unreasonable

Forced Marriage

- Truancy/Absence
- Low motivation
- Lack of punctuality
- Self-harm
- Depression and isolation
- Attempted suicide
- Eating disorders
- Family disputes
- Domestic violence

Child Sexual or Criminal Exploitation

- Unexplainable and or/persistent absences from education
- Health problems that may indicate a sexually transmitted infection
- Mood swings or changes in temperament
- Using drugs and alcohol
- Displaying inappropriate sexualised behaviours such as overfamiliarity with strangers, dressing in a sexualised manner or consensual or non-consensual sharing of nude and semi-nude images and/or videos, including those generated by AI.
- Unexplained physical harm such as bruising and cigarette marks
- Appearance of unexplained gifts, money or new possessions
- Changes in emotional well being

It also needs to be understood that some may show clear signs of trauma, and some may show no signs at all.

Mental Health

- Recent social withdrawal and loss of interest in others
- Difficulty in performing familiar tasks
- Problems with concentration, memory or logical thought
- Heightened sensitivity to sights, sounds, smells or touch
- Loss of initiative or desire to participate in any activity
- Fear or suspiciousness of others
- Uncharacteristic, peculiar behaviour
- Dramatic sleep and appetite changes or deterioration in personal hygiene

Poor mental health can be an indicator that someone has suffered, or is at risk of suffering abuse, neglect or exploitation.

Trafficking/ Modern Slavery

- Unpaid or paid very little
- Works excessively long and unusual hours
- Owes a large debt and is unable to pay it off
- Recruited through false promises concerning the nature of their job/work conditions
- Poor mental health or abnormal behaviour
- Lacks healthcare
- Has few or no personal possessions

Teenage Relationship Abuse (including physical, sexual, emotional abuse & stalking)

- Changes in weight
- Anxious about who they can talk to, what they can wear or what they can do
- Have to check if they can do something
- Stop taking part in social activities or mixing with friends

Gangs and Youth Violence

- Drug or alcohol abuse
- Decline in attendance and effort in classes/with work
- Self-harm
- Keeping late hours
- Having a lot of money or expensive items which can't be explained
- Change in clothing
- Use of hand signals to communicate with other members gang members
- Gang tattoos
- A change in friendships or relationships

Female Genital Mutilation

- Having difficulty walking, sitting or standing
- Spending longer than normal in the bathroom or toilet
- Having unusual behaviour after an absence
- Being reluctant to undergo normal medical examinations

Radicalisation

- Changes in behaviour, becoming more withdrawn
- Extremist tattoos
- Changes in friends/social activities

- Suggesting that they are being discriminated against
- Trying to inflict own religious views on others
- Unexplained absence
- Viewing/sharing extremism websites or publications
- Evidence of homophobic, religion based or racist bullying

Homelessness

- Household debt
- Rent arrears
- Domestic abuse and anti-social behaviour
- Self-neglect in appearance and cleanliness

Child exploitation: County Lines

- Unexplainable and or/persistent absences from education
- Drug or alcohol abuse
- Decline in attendance and effort in classes/with work
- Change in friends
- Keeping late hours

Annex 4 – Dealing with Safeguarding Concerns – Additional Reminders for Staff Annex 4

If you suspect abuse to have taken place, have witnessed it taking place, or you have received a report of abuse, you should respond by:

- Remaining calm and not showing shock or disbelief
- Demonstrate a sympathetic approach by acknowledging regret and concern that what has been reported has happened
- Ensure that any emergency action needed has been taken
- Confirm that the information given to you is treated seriously
- Record everything you have heard, suspected, or witnessed and pass on the information to the Designated Safeguarding Officer, unless you need to alert the emergency services (in which case you will pass on all information and your action when completed)
- Give those who have disclosed information to you information about what steps you will take with the information given
- Inform those who have disclosed information that you will feedback with the results of any action
- **If you suspect a crime has taken place you must contact the Police.**

When a Learner wants to confide in you - good practice

Do's

- Be accessible and receptive
- Listen carefully
- Take it seriously
- Reassure learner they are right to tell
- Negotiate getting help
- Find help quickly
- Make careful records of what was said immediately

Don'ts

- Jump to conclusions
- Try to get the learner to "disclose"
- Speculate or accuse anybody
- Make promises you cannot keep

- Understand your role. You are not expected to make decisions whether abuse is occurring or not, but you are expected to report your suspicions.
- Make yourself fully aware and familiar with the Safeguarding Policy and Procedures.
- Report and record suspicions immediately.
- Do not place yourself in a position where a learner may misunderstand your actions or intent.
- Do not make physical contact with any learner unless it is unavoidably necessary within the context of your professional duties.
- Do not swear, use sexual innuendo or sexual references.
- Do not isolate yourself from view if dealing with a learner e.g., providing first aid.
- Do not directly accuse any person of abuse.
- Do not disclose your concerns to any other person other than your Designated Officer or Director
- Maintain confidentiality at all times but inform the learner who you will be informing.
- Any intervention should be done with extreme caution.
- Do not make any accusations.
- Where possible, two employees should be present if there is any contact with a member of the public suspected of acting inappropriately.
- Employees should monitor all activities which involve young people and adults at risk.

It is important to remember that, although a single event may create a serious risk to the person's well being; it is often the accumulation of events, each of which may appear small that causes serious harm.

Annex 5 - Key Contacts & Websites

Annex 5

Organisation	Contacts
Performance Through People	Julie Heathcote - Designated Safeguarding Lead julieh@ptp-training.co.uk Confidential e-mail ask@ptp-training.co.uk
Walsall	Safeguarding in Walsall | Walsall Council
The Multi Agency Safeguarding Hub (MASH) (for family help with concerns about a child)	Tel: 0300 555 2866 Email: mash@walsall.gcsx.gov.uk Evenings, weekends, bank holidays (out of hours) Emergency Response Team Tel: 0300 555 2922 or 0300 555 2836
Local Authority Designated Officer (LADO), Walsall Children's Services	Telephone: 01922 654040
Walsall Safeguarding Adults Board (for concerns about an adult)	Professionals Working with Adults – Walsall Social Care and Inclusion Tel: 0300 555 2922 Textphone: 0845 111 2910 Email: initialintake@walsall.gov.uk
Wolverhampton	Home - Wolverhampton Safeguarding Together
The Multi Agency Safeguarding Hub (MASH) (for family help with concerns about a child)	Tel: 01902 555392.
Adult Social Services (for concerns about adults)	Report a Concern - Wolverhampton Safeguarding Together Tel: 01902 551199 Out of hours telephone: 01902 552999
Staffordshire and Stoke on Trent	Home - Staffordshire Safeguarding Children Partnership
The Multi Agency Safeguarding Hub (MASH) (for family help with concerns about a child)	**Staffordshire First Response Service** Tel: 0800 1313 126 Fax: 01785 854223 Email: firstr@staffordshire.gov.uk Staffordshire Families Integrated Front Door Service - Staffordshire County Council **Emergency Duty Service** Tel: 0845 604 2886 **Stoke-on-Trent Safeguarding Referral Team** Tel:01782 235100
Adult Social Services (for concerns about an adult)	**Staffordshire Adults Team (contact centre)** Tel: 0345 6042719 Out of hours: 0345 604 2886 (for emergencies only) Email: Protecting adults from abuse - Staffordshire County Council **Stoke-on-Trent Adults Referrals (contact centre)** Tel: 0800 5610015

Birmingham	Multi-Agency Safeguarding Hub (MASH) | Lifestyles - children | Birmingham City Council
The Multi-Agency Safeguarding Hub (MASH) (for family help with concerns about a child)	Tel: 0121 303 1888 Outside of these hours contact the Emergency Duty Team Tel: 0121 464 9001 Secure email: Secure.MASH@birmingham.gcsx.gov.uk
Local Authority Designated Officer (LADO) Team, Childrens Services	Tel: 0121 675 1669
Safeguarding Adults Board	If it is not an emergency call the "Adults & Communities Access Point" (ACAP) on 0121 303 1234 E-mail ACAP@birmingham.gov.co.uk Out of hours - Duty Team on 0121 675 4806
Sandwell	Homepage - Sandwell Safeguarding Adults Board
Single Point of Contact (SPOC) for advice on potential referrals In support of MASH team	Tel: 0121 569 3100 Email: access_team@sandwell.gcsx.gov.uk
Local Authority Designated Officer (LADO) Team, Childrens Services	Tel: 0121 569 4770 email sandwell_lado@sandwell.gcsx.gov.uk
Adult Safeguarding Team	http://www.sandwell.gov.uk/safeguardingadults/ Tel: 0121 569 2266 Email: sandwell_enquiry@sandwell.gov.uk Tel: 0121 569 2266 Out of hours Emergency Duty Team Tel: 0121 569 2355
Dudley	Safeguarding In Dudley | Dudley Council
Single Point of Access (SPA) (for concerns about a child)	Tel: 0300 555 0050 Out of office hours contact the Emergency Duty Team on 0300 555 8574
Police	
	Non-Emergency 101 Emergency 999

'Prevent'			
Police Anti-Terrorism Hotline	If you have information about possible terrorist activity, call the police Anti-Terrorist Hotline: 0800 789 321		
Domestic Abuse			
Nationwide	Refuge	0808 2000247	• Supports women and children through a range of services including refuges, independent advocacy, community and outreach, culturally specific services Website: Refuge, the largest UK domestic abuse organisation for women
Nationwide	Respect	Helpline for domestic violence perpetrators: 0808 8024040 Helpline for male victims of domestic violence: 0808 8010327	• UK membership organisation working with domestic violence perpetrators, male victims of domestic violence and young people Website: Respect | Home
Nationwide	Women's Aid (Refuge)	0808 2000247	• Helpline to support victims • Influence government policy Support schools and communities to contribute to ending domestic violence
Nationwide	Galop	0800 9995428	• UK's LGBT anti-abuse charity Website: Galop - the LGBT+ anti-abuse charity

Annex 6 – Mental Health First Aid Procedure