

Safeguarding, Prevent and Online Safety Policy

Adult Skills Provision | Operational Responsibilities | Response, Referral and Assurance

Version 5.0 | August 2026

Policy field	Current position
Provider	Quack Recruitment & Training Ltd
Controlled reference	1.1 - Safeguarding, Prevent and Online Safety Policy
Document status	Approved overarching safeguarding policy and operational response framework
Applies to	Adult Skills Bootcamp learners (normally 19+), applicants, staff, directors, tutors, contractors, agency staff, volunteers, visitors, employers, subcontractors and other partners acting for Quack.
Delivery context	In-person, remote and blended adult skills delivery; learner support, employer engagement and post-programme progression activity.
Designated Safeguarding Lead	Jessica Roughton - DSL / Quality & Compliance Lead
Deputy DSL	Aaron Jones - DDSL / Lead Tutor
Dedicated safeguarding route	safeguarding@quackrecruitmentandtraining.co.uk 0333 577 0036 approved Safeguarding Concern Form
Senior accountable lead	Managing Director
Repository	Management > Shared > 15. Policies & Procedures > 1. Safeguarding, Prevent and Staff Suitability
Next review	August 2027, or earlier after a serious incident, lessons-learned review, legal/Ofsted change, material delivery change or change to local safeguarding arrangements.

Policy intent

Safeguarding is everyone's responsibility, but responsibility is not the same as role. The person who receives a concern owns the immediate safety response, listening and recording; the DSL/DDSL owns safeguarding triage, referral and case coordination; leaders provide resources and challenge; governance tests whether the system works in practice. No concern is simply handed off without action or lost between roles.

Contents

1. Purpose, Scope and Safeguarding Commitment.....	3
2. Regulatory and Inspection Framework.....	3
3. Adult Safeguarding: Threshold, Principles and Making Safeguarding Personal	3
3.1 Adult at risk / Section 42 threshold	3
3.2 Six adult safeguarding principles.....	4
4. Roles, Responsibilities and Operational Accountability.....	4
5. Recognising Safeguarding Risk.....	4
5.1 Ten categories of adult abuse and neglect	4
5.2 Additional contextual risks relevant to Quack.....	5
6. Responding to a Disclosure or Concern - Staff Action	5
7. Urgency, Escalation and Referral Timescales	5
8. DSL/DDSL Triage and Decision-Making	6
8.1 External Safeguarding, Referral and Signposting Routes	6
9. Consent, Confidentiality and Information Sharing	7
10. Mental Capacity and Supported Decision-Making	7
10.1 Capacity assessments by trained Quack staff.....	8
11. Self-Harm, Suicide Ideation and Acute Mental-Health Risk.....	8
12. Domestic Abuse, Coercive Control and Safe Contact.....	9
13. Safeguarding Where Children Are Involved.....	9
14. Prevent, Radicalisation, Extremism and British Values	9
15. Online, Remote and Digital Safeguarding	9
16. Attendance, Engagement and Learner Journey Safeguarding	10
17. Concerns or Allegations About Staff and Other Adults.....	10
18. Employers, Subcontractors, Venues and External Partners	10
19. Recording, Case Management and Information Security	11
20. Staff Training, Competence, Supervision and Professional Curiosity.....	11
20.1 Staff welfare following serious or distressing safeguarding cases	11
21. Safeguarding Governance, Monitoring and Continuous Improvement	12
22. Learner Awareness, Complaints and Whistleblowing.....	12
Appendix A - Staff Safeguarding Response Card.....	13
Appendix B - DSL/DDSL Triage and Case Checklist.....	13
Appendix C - Companion Policies and Operational Evidence	14
Appendix D - Version Control and Reference Framework.....	14

Inspection-use note

This policy is designed to describe Quack's normal safeguarding system, not to manufacture inspection evidence. Ofsted inspectors may speak directly with learners and staff, review casework and test whether people understand and apply these arrangements. Records should therefore show what actually happened, why decisions were made and what impact followed.

1. Purpose, Scope and Safeguarding Commitment

Quack Recruitment & Training Ltd is committed to protecting learners and others connected with its provision from abuse, neglect, exploitation, radicalisation and other harm. Safeguarding is embedded across recruitment, enrolment, teaching, assessment, attendance, learner support, employer engagement and progression rather than treated as a DSL-only activity.

- Safeguarding is everyone's responsibility. Any member of staff receiving a concern must take the immediate safety action within their competence; they must not simply redirect the person and disengage.
- Learner safety and welfare take priority over reputation, contract performance, staffing convenience or concern about creating a record.
- Adult choice, dignity and desired outcomes are central. Quack uses a Making Safeguarding Personal approach while recognising that information may sometimes need to be shared without consent to prevent serious harm or protect others.
- Staff are expected to be professionally curious: notice changes, ask proportionate safety questions, listen to what the learner wants and avoid assumptions or stereotypes.
- Quack does not investigate suspected abuse itself where a statutory agency should do so. Staff recognise, respond, record and report; the DSL/DDSL triages and coordinates the appropriate external route.
- Safeguarding concerns can arise in person, online, during telephone support, at employer sites, through attendance/disengagement patterns, complaints, staff conduct information or third-party reports.

No hand-off gap

The receiving staff member owns the immediate response until the person is safe and the concern has been reported. The DSL/DDSL then owns safeguarding triage and case coordination. This prevents a learner being repeatedly passed between people or assuming that an email/form submission alone has made them safe.

2. Regulatory and Inspection Framework

Framework / source	Application to Quack
Care Act 2014 / Care and Support Statutory Guidance	Primary adult safeguarding framework. Section 42 duties apply where an adult has care and support needs, is experiencing or at risk of abuse or neglect and, because of those needs, is unable to protect themselves.
Mental Capacity Act 2005 / Code of Practice	Capacity is presumed, decision-specific and time-specific. People must be supported to make their own decisions; an unwise decision alone does not demonstrate lack of capacity.
Counter-Terrorism and Security Act 2015 / Prevent Duty Guidance 2023	Prevent is integrated into safeguarding. Quack maintains a separate Prevent Risk Assessment and Prevent, Radicalisation and Extremism Policy.
Domestic Abuse Act 2021	Domestic abuse includes physical or sexual abuse, violent or threatening behaviour, controlling or coercive behaviour, economic abuse and psychological/emotional abuse between personally connected people.
Modern Slavery Act 2015	Relevant to trafficking, forced labour, exploitation, coercion and labour-market risks encountered through training, recruitment and employer engagement.
UK GDPR / Data Protection Act 2018	Safeguarding information is special-category/high-risk personal data and must be recorded, accessed and shared lawfully, securely, proportionately and on a need-to-know basis.
Working Together to Safeguard Children 2026	Applies when a concern involves a child. Quack's normal funded learner population is 19+, but a learner may disclose risk to a child or a child may otherwise be encountered.
KCSIE / local LADO arrangements where applicable	Used where Quack falls within the relevant statutory scope or a child-related allegation requires the child safeguarding harm-threshold/LADO route. LADO is not the automatic route for adult-only cases.
Ofsted FE and skills inspection toolkit / operating guides	Safeguarding is tested through culture and impact, not policy wording alone. Inspectors may sample casework, speak to learners/staff, test referrals, training, staff-allegation processes and whether policies are understood and applied.
Commissioner / local safeguarding arrangements	Local authority adult safeguarding, PIPOT, Prevent/Channel and other routes vary by area. Quack follows the applicable local arrangement based on the person's location and circumstances.

Current Ofsted emphasis

The September 2026 FE toolkit explicitly expects providers to identify mental-health issues that may develop into safeguarding risk, including self-harm and suicide ideation; secure timely expert help; ensure staff are trained and empowered to act; work effectively with external agencies; and continually review the impact of safeguarding systems and case decisions.

3. Adult Safeguarding: Threshold, Principles and Making Safeguarding Personal

3.1 Adult at risk / Section 42 threshold

For Care Act safeguarding duties, all three conditions below are considered. Quack does not require a learner to have a formal diagnosis, be receiving social care or have eligible local-authority-funded needs before raising a concern or seeking advice.

Condition	Operational question
Care and support needs	Does the adult have needs for care and support, whether or not those needs are currently assessed or being met?
Abuse or neglect	Is the adult experiencing, or at risk of, abuse or neglect?
Unable to protect because of those needs	Because of the care/support needs, is the adult unable to protect themselves from the risk or experience of abuse/neglect?

A concern that does not meet all three Section 42 criteria may still require welfare support, mental-health support, police action, domestic-abuse support, Prevent action, a complaint, disciplinary action or another referral. Staff must not dismiss a concern merely because the statutory adult-safeguarding threshold is uncertain.

3.2 Six adult safeguarding principles

Principle	How Quack applies it
Empowerment	Ask what the person wants to happen, what would make them safer and what help they want. Obtain informed consent where appropriate.
Prevention	Act early on warning signs, attendance/disengagement changes, online risk, exploitation indicators and repeated low-level concerns.
Proportionality	Use the least intrusive response that adequately addresses the risk; do not over-intervene merely because an adult makes a choice staff would not make.
Protection	Take decisive action where a person cannot protect themselves or faces immediate/serious harm.
Partnership	Work with adult social care, police, health, Prevent/Channel, employers and other services when required.
Accountability	Record facts, consent, decisions, external advice, action, rationale, follow-up and outcome so decisions can be scrutinised and learned from.

4. Roles, Responsibilities and Operational Accountability

The table below defines who does what, when and where the evidence sits. Safeguarding responsibility cannot be delegated away, but specialist decisions are allocated to the appropriate role.

Role	What they must do	When	Primary evidence
All staff / person receiving the concern	Listen; establish immediate safety/current location; call emergency services if required; ask only necessary clarifying/safety questions; do not promise secrecy; record exact words and actions; submit the Safeguarding Concern Form; notify DSL/DDSL.	Immediate danger: now. All other safeguarding concerns: same working day.	Concern Form; contemporaneous notes; emergency/service reference where applicable.
Tutor / trainer	Maintain safe learning environment; reinforce reporting routes; monitor attendance, behaviour, interaction and online risks; escalate sudden or concerning change; make reasonable adjustments for communication/SEND.	During every session and review; escalate same working day.	Registers; ILP/review/support record where appropriate; Concern Form for safeguarding information.
Enrolment / learner engagement staff	Explain safeguarding routes; identify disclosed support needs and safe contact information; avoid intrusive questioning; escalate safeguarding disclosures or concerning eligibility/contact circumstances.	At initial contact/enrolment and whenever new information arises.	Enrolment/support records; Concern Form where safeguarding threshold/concern exists.
Progressions / employer engagement staff	Remain alert during wraparound, job search and employer contact to exploitation, unsafe work, harassment, domestic abuse, financial abuse, modern slavery or wellbeing concerns; report rather than treat solely as progression issue.	Throughout progression and post-programme support.	Career/progression record for routine support; Concern Form for safeguarding information.
DSL - Jessica Roughton	Own safeguarding triage; determine adult/child/Prevent/staff-allegation route; consider consent, capacity and information sharing; consult/refer externally; set safety/follow-up plan; maintain restricted case record; review patterns and learning.	Immediate/urgent cases: immediately. Other concerns: initial triage same working day.	Restricted safeguarding case file/log; referral/consultation record; decision rationale; follow-up and closure record.
DDSL - Aaron Jones	Act with DSL authority when DSL is absent/unavailable; support triage/case management; take lead where concern relates to DSL or a conflict requires alternative routing.	As required; same urgency standards as DSL.	Same restricted safeguarding records.
Managing Director	Ensure resources, staffing and organisational action; support serious-incident/employment/commissioner decisions; receive proportionate serious-risk escalation; ensure conflicts do not interfere with safeguarding. Does not override DSL referral decisions for reputational or operational reasons.	Immediate where organisational risk or senior staff allegation requires action; otherwise through scheduled governance.	Management decision/risk record; HR/commissioner record where applicable; safeguarding details only on need-to-know basis.
Independent governance / safeguarding oversight	Provide challenge on trends, response quality, training, staff allegations, conflicts and lessons learned; provide independent route where senior leadership relationships create a material conflict.	Quarterly and after serious/material cases where independent challenge is required.	Governance minutes/assurance report; anonymised unless identifiable detail is necessary and lawful.
Quality / compliance function	Maintain policy/training assurance, audit response times and records, test staff understanding and ensure actions feed SAR/QIP. Where the DSL also holds the quality role, independent challenge is used for safeguarding case assurance.	Monthly assurance and annual review; after material incidents.	Training matrix; audit/action tracker; QIP; policy review record.
Employers / subcontractors / partners	Follow their own statutory procedures and immediately notify Quack of concerns affecting Quack learners. Quack retains responsibility for its own safeguarding response and does not assume another organisation has completed it.	Immediately/same working day according to risk.	Partner communication; due diligence; Concern Form/case record where relevant.

Confidentiality and leadership awareness

Routine safeguarding case detail is not circulated automatically to senior leaders. The DSL shares what is necessary for safety, organisational action, legal/contractual reporting and governance. Serious risk, staff allegations, systemic issues or matters requiring resources are escalated appropriately. Quarterly governance reporting is normally anonymised.

5. Recognising Safeguarding Risk

5.1 Ten categories of adult abuse and neglect

Category	Examples / indicators
Physical abuse	Assault, hitting, slapping, pushing, misuse of medication, inappropriate restraint or physical punishment.
Domestic abuse	Physical/sexual abuse, threats, controlling or coercive behaviour, economic abuse, stalking, technology-facilitated abuse and psychological/emotional abuse.
Sexual abuse	Rape, sexual assault, sexual harassment, non-consensual sexual activity, exploitation or sexual acts where valid consent is absent.
Psychological / emotional abuse	Threats, humiliation, intimidation, isolation, bullying, coercion, verbal abuse, controlling behaviour or cyber abuse.

Category	Examples / indicators
Financial / material abuse	Theft, fraud, scams, coercion over money, misuse of benefits/property, pressure to transfer funds, debt exploitation or employment/pay exploitation.
Modern slavery	Human trafficking, forced labour, servitude, exploitation through work, debt bondage or restriction of movement.
Discriminatory abuse	Harassment, unequal treatment, hate incidents or abuse linked to protected characteristics or identity.
Organisational abuse	Poor or abusive practice within an organisation/service, including neglectful systems, rigid practices or misuse of power.
Neglect / acts of omission	Failure to meet essential care, health, medication, nutrition, heating, hygiene or safety needs.
Self-neglect	Severe neglect of personal care, health or surroundings, hoarding or behaviour creating serious risk to the person's safety or wellbeing.

5.2 Additional contextual risks relevant to Quack

- Mental-health deterioration that develops into risk of harm, including self-harm, suicide ideation, severe distress or inability to keep safe.
- Criminal exploitation, county lines, coercion, threats, debt or pressure from others.
- Unsafe accommodation, homelessness, financial hardship or crisis where the circumstances create abuse, exploitation or serious welfare risk.
- Online grooming, impersonation, doxxing, image-based abuse, scams, harmful content or extremist influence.
- Harassment, sexual harassment, hate incidents, bullying or discriminatory abuse in learning, employment or online environments.
- Forced marriage, so-called honour-based abuse, stalking or coercive control.
- Exploitation associated with recruitment agencies, informal work, underpayment, illegal deductions, trafficking or unsafe employer practice.
- A safeguarding concern about a member of staff, contractor, employer representative, visitor or another learner.

6. Responding to a Disclosure or Concern - Staff Action

Staff use the following response. They are not expected to diagnose, prove abuse or conduct a formal investigation. They are expected to make the person safe, listen, ask proportionate safety questions, preserve the account and report it.

The 5 Rs - core staff mnemonic

Recognise the signs or disclosure; Respond calmly and establish immediate safety; Record facts and the person's own words where material; Report to the DSL/DDSL the same working day (immediately for urgent risk); Refer is coordinated by the DSL/DDSL to the correct statutory or specialist route. In an emergency, any staff member calls 999 first and does not wait for DSL permission.

Stage	Required staff action
1. Recognise	Take the information seriously. Notice what is said, behaviour, injuries, changes, attendance patterns, online indicators or third-party information.
2. Respond	Listen calmly; thank the person for telling you; do not express shock or blame; do not challenge alleged facts; do not promise confidentiality. Ask what they need now.
3. Establish immediate safety	Ask: Are you safe now? Where are you now? Can the person causing harm access you? Are children or other adults at risk involved? Do you need emergency help? For remote contact, obtain current location/postcode where possible.
4. Record	Record facts, exact words where important, date/time/location, witnesses, current risk, action already taken, safe-contact instructions and any consent/refusal. Separate fact from opinion.
5. Report	Submit the approved Safeguarding Concern Form and notify the DSL/DDSL the same working day. Do not assume form submission replaces direct contact in an urgent case.
6. Remain engaged	Where immediate/urgent risk exists, remain with the person or keep the call/online contact open where safe until emergency/DSL support is in place. Do not simply end the conversation after reporting.

Questions staff may ask

Staff may ask short questions needed to understand immediate safety and support: "Are you safe now?", "Where are you?", "What would you like to happen?", "What help would you like?", "Is it safe for us to contact you?", "Are children or anyone else at risk?", and for suicide risk, direct questions about thoughts, plan, means and immediate intent. Staff should not repeatedly question the person to test credibility or obtain a full evidential account.

7. Urgency, Escalation and Referral Timescales

Risk level	Examples	First action	DSL/DDSL action
Emergency / immediate danger	Immediate threat to life; serious ongoing assault; active suicide plan with immediate intent/means; person cannot keep themselves safe; serious crime occurring. This also includes a serious offence in progress or just happened, violence or threatened violence, an offender still present, or another situation requiring immediate police attendance.	Any staff member calls 999/emergency services now. Keep contact where safe; obtain location; alert a colleague/DSL simultaneously where possible. Staff do not wait for DSL or management permission. For police matters that are not emergencies, use 101 or the relevant online police reporting route rather than 999.	Immediate coordination; record emergency reference; consider police/social care/other safeguarding notifications; maintain follow-up until safety route is clear. Follow the instructions of the 999 call handler/emergency service and update the DSL/DDSL as soon as safely practicable.
Urgent safeguarding risk	Abuse likely to recur soon; perpetrator has access; domestic abuse with escalating risk; serious exploitation; credible threat; significant mental-health deterioration; child may be at risk.	Notify DSL/DDSL immediately; complete concern record as soon as safety permits.	Same-day triage and external consultation/referral where indicated; safety plan and safe-contact arrangements recorded.

Risk level	Examples	First action	DSL/DDSL action
Safeguarding concern - not immediate	Disclosure or indicators of abuse/neglect without immediate danger; repeated low-level indicators; welfare issue that may meet safeguarding threshold.	Report to DSL/DDSL and submit concern form same working day.	Initial triage same working day; decide safeguarding/welfare/other route; record rationale and follow-up.
Welfare / support issue	Barrier or wellbeing issue not currently indicating abuse, neglect or serious risk.	Provide appropriate support/signposting and record through normal learner-support route. Escalate if risk information emerges.	DSL involvement only where safeguarding indicators/risk arise or advice is requested.

Outside normal working hours

Immediate concern means a situation needing action now to protect life, prevent serious harm or obtain immediate police/emergency attendance. Examples include a serious offence in progress or just happened, current violence or threats of violence, an offender still present, serious injury/medical emergency, a person who cannot keep themselves safe, or a direct current threat to take their own life. Any staff member must call 999 immediately where these circumstances apply; safeguarding paperwork and management notification follow once immediate safety action is underway.

The safeguarding inbox/form is not an emergency service and may not be monitored 24/7. Immediate danger is dealt with through 999/emergency services or the relevant local authority emergency route. The DSL/DDSL is informed as soon as safely practicable afterwards.

8. DSL/DDSL Triage and Decision-Making

The DSL/DDSL converts the initial concern into a clear safeguarding decision and plan. The decision must be transparent enough that another competent reviewer can understand what was known, what was considered, what was done and why.

Triage question	Required consideration / record
Immediate safety	Is the person safe now? Is emergency action still required? Is the alleged source of harm able to access them?
Who is affected	Adult at risk, child, other learner, staff member, family member or multiple people?
Threshold / route	Care Act adult safeguarding; welfare/support; police/criminal; child safeguarding; Prevent/Channel; staff allegation/PIPO/LADO; domestic-abuse service; health/mental-health route; complaint/HR in addition.
Person's desired outcome	What does the adult want to happen? What help would make them safer? Is the proposed response proportionate and person-centred?
Consent / information sharing	Has consent been sought where appropriate? If information is shared without consent, what lawful safeguarding reason justifies it?
Capacity / communication	Is there any reason to doubt capacity for the specific decision? What support/adjustment is needed for communication? Does specialist assessment/advice need to be obtained?
Children / others	Are children or other adults exposed to risk? Does this change the need to share or refer even if the adult does not want a referral?
External advice / referral	Which local authority/service has jurisdiction? What advice/referral was made, when, by whom, and what reference/outcome was received?
Follow-up	Who will contact the learner, how and when? Is contact safe? What action remains open? When will the case be reviewed/closed?

The DSL uses the person's current location/residence and the nature of the concern to identify the correct local adult safeguarding, children's safeguarding, police or Prevent route. Quack maintains a live external safeguarding contacts register separately from this policy so numbers and local arrangements can be updated without waiting for a policy revision.

8.1 External Safeguarding, Referral and Signposting Routes

Signposting is not a substitute for safeguarding action. Where statutory safeguarding, police, Prevent or emergency intervention may be required, the DSL/DDSL records the referral or consultation and does not simply give the learner a telephone number. Where the issue is support rather than a statutory safeguarding referral, Quack should wherever possible use a warm handover: explain the service, check the learner is willing and able to access it, support contact where appropriate, and record agreed follow-up.

Concern / need	Typical external route or signposting example	Operational control
Immediate danger, serious assault, immediate threat to life	Emergency services (999); police where a crime or immediate protective action is required.	Any staff member acts immediately. Record location, action taken and incident/reference details; notify DSL/DDSL as soon as safely practicable.
Adult safeguarding / abuse or neglect	Local authority Adult Social Care / Safeguarding Adults route for the adult's location or residence. Local examples historically relevant to Quack delivery include Walsall, Warrington and Sheffield; current details are taken from the live contacts register. Hampshire is also an active Quack delivery area and must be covered in the live contacts register, with the correct Hampshire County Council adult safeguarding route selected according to the learner's actual residence/location.	DSL/DDSL checks the applicable local threshold and route, records consultation/referral, reference number/advice and follow-up.
Child at risk	Local authority Children's Social Care / safeguarding front door or MASH for the child's location; police/emergency route if immediate danger.	DSL/DDSL applies current child safeguarding arrangements. Parental consent is not an absolute precondition where sharing is necessary to protect a child.
Domestic abuse, coercive control, stalking	Local commissioned domestic-abuse service / IDVA or specialist support; police where crime, stalking, escalation or immediate danger is present.	Confirm safe contact before referral or signposting. Never contact the alleged perpetrator. Record whether voicemail, text, email or family contact is safe.
Self-harm, suicide ideation or acute mental-health crisis	NHS, GP or local urgent mental-health/crisis route; emergency services where there is immediate risk to life or the person cannot keep themselves safe. Hub of Hope may be used to identify appropriate local and national mental-health support alongside NHS/local crisis routes; it is a signposting directory and does not replace emergency or statutory safeguarding action.	Staff ask direct safety questions and establish location. DSL/DDSL coordinates follow-up; referral does not by itself close the safeguarding case.

Concern / need	Typical external route or signposting example	Operational control
Sexual violence or sexual abuse	Police where appropriate; Sexual Assault Referral Centre (SARC) / local specialist sexual-violence support and health services.	Do not conduct an evidential interview. Preserve the person's account, consider immediate medical/safety needs and obtain specialist advice.
Modern slavery, trafficking or labour exploitation	Police / local safeguarding route and appropriate specialist labour-exploitation or modern-slavery support. Employer or recruitment-related exploitation is treated as a safeguarding and integrity concern, not merely an employment dispute.	DSL/DDSL coordinates safeguarding action and preserves evidence; escalate internally under modern-slavery/fraud controls where relevant.
Prevent / radicalisation concern	Local Prevent/Channel or police Prevent route in accordance with current local arrangements; emergency police route for an imminent threat.	DSL/DDSL determines consultation/referral. Staff report concern and context; they do not investigate ideology.
Housing instability / homelessness creating risk	Local authority housing/homelessness service and relevant welfare support; adult/child safeguarding route where abuse, exploitation or serious risk is also present.	Learner Support may coordinate practical support; DSL/DDSL retains safeguarding oversight where risk thresholds are engaged.
Financial abuse, scams or coercive control over money	Police or relevant fraud route where criminality is suspected; bank safeguarding/fraud team and local adult safeguarding where vulnerability/abuse is present.	Preserve evidence and avoid alerting an alleged perpetrator where this could increase risk. DSL/DDSL records safeguarding decision and referrals.
Hate crime, harassment or discriminatory abuse	Police where criminal threshold may be met; local specialist support; employer/venue action where relevant; safeguarding route where vulnerability or serious risk is present.	Safeguarding, EDI, complaints and disciplinary routes may operate in parallel. One process must not delay necessary protection.
Family separation / relationship breakdown where there is no immediate safeguarding danger	National Family Mediation (NFM) may be used as a signposting option for appropriate family separation or mediation support. It must not be used as a substitute for domestic-abuse, coercive-control, child-safeguarding or police action.	Before signposting to mediation, staff consider whether abuse, coercion, fear or unsafe contact is present. Where safeguarding indicators exist, use the safeguarding/domestic-abuse route instead.
General mental-health / wellbeing support where there is no immediate danger	Hub of Hope, GP/NHS routes, local commissioned mental-health services and other credible support identified through the live contacts register.	Staff may support a warm handover/signposting where appropriate, record the support given and escalate to DSL/DDSL if safeguarding indicators or increased risk emerge.

Live safeguarding contacts register

The DSL owns a controlled External Safeguarding Contacts Register covering every active delivery/recruitment geography. At minimum it records adult safeguarding, children's safeguarding/front door, out-of-hours routes, police, Prevent/Channel, domestic-abuse support, urgent mental-health/crisis support, sexual-violence/SARC, housing/homelessness and relevant exploitation routes, plus the date last checked and person who verified it. The register is checked before delivery starts in a new geography and reviewed at least quarterly and after any failed/changed contact route.

9. Consent, Confidentiality and Information Sharing

Safeguarding is not confidential in the sense of secrecy. Staff explain that information will be kept as private as possible but may need to be shared with people who can help keep the person or others safe. Quack follows the principles of necessity, proportionality, relevance, accuracy, timeliness and secure sharing.

Situation	Default approach
Adult has capacity; no immediate risk to others	Seek informed consent before routine external safeguarding/support referral. Work with the adult on desired outcomes and explain options.
Adult refuses consent but serious/immediate harm is likely	Consider sharing without consent where necessary and proportionate to protect life, prevent serious harm or meet another lawful safeguarding basis. Record rationale.
Child may be at risk / significant harm concern	Do not make parental consent an absolute precondition. Share/refer where necessary to safeguard the child. Do not seek consent if doing so could increase risk, alert an alleged perpetrator or compromise protective action.
Other adults may be at risk / serious crime / coercion	Consider wider public/third-party protection and statutory/police duties. Adult wishes remain important but may not be determinative.
Person may lack capacity for the specific decision	Support decision-making first. If they cannot make the specific decision, obtain appropriate advice and act in accordance with the MCA/best-interests framework where applicable.
Domestic abuse / unsafe contact	Confirm safe contact method and times. Do not automatically call an emergency contact, leave voicemail, email or contact family where this may expose the person to further risk.

Record the decision, not just the outcome

The case file should state whether consent was obtained, refused, not sought or overridden; what the adult wanted; what information was shared; with whom; the reason; and why the decision was necessary and proportionate.

10. Mental Capacity and Supported Decision-Making

Quack applies the Mental Capacity Act 2005 principles when safeguarding decisions may be affected by a person's ability to make a specific decision. Capacity is presumed unless there is evidence to the contrary, is decision-specific and time-specific, and must be considered only after practical steps have been taken to support the person to decide. The functional test considers whether the person can understand, retain, use or weigh relevant information and communicate their decision. Frontline staff identify and report concerns; they do not undertake complex or clinical capacity assessments outside their competence.

- Start from the presumption that an adult has capacity. Capacity is specific to the particular decision and the time it must be made.
- Give practical support to help the person decide: plain language, additional time, accessible information, interpreter/communication support, quiet environment or involvement of an appropriate supporter where the person wants this.
- A person is unable to make the decision if, because of an impairment or disturbance in the functioning of mind or brain, they cannot understand, retain, use/weigh relevant information or communicate the decision.
- An unwise, risky or unusual choice is not by itself evidence of incapacity.
- Frontline staff may identify concerns about capacity and record what they observed. They should not label a learner as lacking capacity or undertake a complex formal assessment outside their competence.

- Where capacity materially affects a safeguarding decision, the DSL/DDSL seeks appropriate professional/local-authority/health advice and records the decision-specific rationale.

Important distinction

The Care Act safeguarding duties can apply whether or not the adult lacks mental capacity. Capacity affects how decisions, consent and best interests are handled; it is not a prerequisite for recognising abuse or raising a safeguarding concern.

10.1 Capacity assessments by trained Quack staff

A capacity assessment is decision-specific and time-specific. Following appropriate Mental Capacity Act training and DSL guidance, any Quack staff member may undertake a proportionate capacity assessment for a decision that falls within their role. This is not restricted to clinicians. The assessor must be appropriate to the decision and must use the statutory two-stage test and the functional test below. More serious, complex or disputed decisions require a more formal record and may require health, social-care or legal advice.

- Stage 1 - identify whether there is an impairment of, or disturbance in, the functioning of the mind or brain that may affect the decision.
- Stage 2 - because of that impairment/disturbance, establish whether the person is unable to make the specific decision at the time it needs to be made.
- Functional test - can the person understand the relevant information, retain it long enough to decide, use or weigh it as part of the decision, and communicate the decision by any means?
- Support first - reasonable steps must be taken to help the person decide before concluding that capacity is lacking. An unwise decision is not evidence of incapacity.
- Recording - the staff member records the specific decision, information provided, support used, questions/observations, outcome and rationale. Where the assessment relates to safeguarding, consent to information sharing, serious risk or a complex decision, the DSL/DDSL must be informed and the assessment is retained within the restricted safeguarding record.

11. Self-Harm, Suicide Ideation and Acute Mental-Health Risk

Mental-health concerns are not automatically safeguarding matters, but they become safeguarding concerns where there is risk of harm, exploitation, abuse, inability to keep safe or a significant crisis. From September 2026, Ofsted's FE toolkit expressly includes mental-health issues that may develop into safeguarding risks, including self-harm and suicide ideation.

If a learner says they may harm or kill themselves	Staff response
Ask directly and calmly	Ask whether they are thinking about suicide/self-harm, whether they have a plan, access to means, a timeframe/intent and whether they can keep themselves safe right now. Asking directly is a safety question, not an investigation.
Establish location and support	Find out where they are now, preferably including postcode/address for remote contact, whether anyone safe is with them and whether they can move to a safer environment.
Immediate / imminent risk	Do not leave them alone or end remote contact if avoidable and safe. Ask another staff member to alert the DSL/DDSL and emergency services. Call 999 where there is immediate danger or the person cannot keep themselves safe. Quack treats any direct current statement that the learner intends to kill themselves, or any situation where staff reasonably believe the learner may act imminently, as an emergency: 999 must be called while staff continue the safety conversation.
No immediate danger but significant concern	Escalate to DSL/DDSL same working day. Support access to appropriate NHS/local mental-health/crisis/GP services and other credible support such as Hub of Hope. Agree follow-up.
Emergency contact	Do not contact automatically. Consider whether the named person is safe and appropriate, especially where domestic abuse/coercion is possible. In an emergency, proportionate sharing may be necessary to preserve life/safety.
Record and follow up	Record exact statements, questions asked, location, risk information, actions, agencies contacted, advice, agreed safe contact and follow-up. Do not close the case merely because a referral was made.
Two-person response for a suicide emergency	The staff member receiving the disclosure keeps the learner engaged and immediately gets another member of staff's attention. One staff member remains with the learner or stays on the phone/online contact; the second calls 999, alerts the DSL/DDSL and provides the learner's current location/postcode and the known risk information. Do not wait for a manager to approve the 999 call.
If the learner leaves or disconnects	Do not physically restrain or unlawfully detain an adult. If a learner at immediate suicide risk leaves the venue, disconnects, stops responding or cannot be kept engaged, call/update 999 immediately with the learner's last known location, contact details, description and any other information requested by emergency services. Continue reasonable attempts to re-establish contact if safe and directed.
Staff safety and transport	Staff safety comes first. Do not enter an unsafe property, confront a perpetrator, place yourself between people who are violent, or take a learner experiencing an acute mental-health/suicide crisis to hospital in a staff member's own vehicle. Use 999/emergency services and follow their instructions on safe conveyance. Staff should not remain alone in a situation that creates a foreseeable risk to themselves or others.

Staff are not clinicians

A direct suicide threat is not left to routine signposting. Hub of Hope, GP, NHS crisis routes and other services are useful support/signposting options, but where the learner states a current intention to kill themselves or cannot keep themselves safe, Quack's first action is emergency protection through 999 while staff remain engaged where safe.

Quack staff do not diagnose mental illness or attempt a clinical suicide-risk score. Their role is to ask direct safety questions, preserve life, obtain specialist help, report to safeguarding and remain appropriately engaged until responsibility is safely transferred.

12. Domestic Abuse, Coercive Control and Safe Contact

Domestic abuse requires particular attention to safe communication. A routine call, voicemail, email or contact with a family member can increase risk if an alleged perpetrator monitors the person's communications.

- Ask whether it is safe to contact the learner, by which channel, at what times, and whether voicemail/text/email is safe.
- Ask what the learner wants to happen and what would help them feel safer. Do not pressure an adult with capacity to leave a relationship as a condition of support.
- Do not contact the alleged perpetrator or seek to mediate the relationship.
- Check whether children or other adults are involved and whether they may be at risk. This may require information sharing/referral even where the adult does not want action for themselves.
- Where there is immediate danger, stalking/escalation, threats, serious assault or inability to keep safe, use emergency/police safeguarding routes.
- Record safe-contact instructions prominently in the restricted case record and ensure staff who need to make contact can see the instruction without exposing unnecessary case detail.

13. Safeguarding Where Children Are Involved

Quack currently delivers adult Skills Bootcamps to learners normally aged 19+, but staff may become aware that a learner's child, another child or an unborn child is at risk. Child safeguarding is not outside Quack's responsibility merely because the enrolled learner is an adult.

- Any concern that a child may be at risk is reported to the DSL/DDSL immediately/same working day according to urgency and recorded through the safeguarding route.
- The DSL uses current Working Together/local children's safeguarding arrangements and contacts children's social care/police where required.
- Parental consent should be sought where appropriate and safe, but it is not an absolute requirement before sharing information needed to safeguard a child.
- Do not seek consent where doing so may place the child or another person at increased risk, lead to evidence being destroyed, alert an alleged perpetrator or delay necessary protection.
- Where the concern is an allegation about an adult working with a child, Quack applies the child harm-threshold/LADO route where applicable and follows procedure 1.4.

14. Prevent, Radicalisation, Extremism and British Values

Prevent is part of safeguarding but has a separate operational policy and risk assessment. Staff must know how susceptibility to radicalisation can present, avoid stereotyping and report behavioural/contextual concerns rather than investigate ideology.

- All staff receive Prevent training and know the DSL/DDSL reporting route.
- Prevent concerns are reported the same working day; credible imminent terrorist threat or immediate danger is reported to police/emergency services first.
- The DSL determines external Prevent/Channel consultation or referral in line with current guidance and local arrangements.
- Curriculum and learner-support activity develops critical thinking, online resilience, respectful lawful debate and understanding of British values without tokenism.
- Quack maintains and reviews a provider-specific Prevent Risk Assessment and applies proportionate controls to online activity, external speakers, employer events and partnerships.

Companion controls

Read this section with 1.2 Prevent Risk Assessment and 1.3 Prevent, Radicalisation and Extremism Policy. The safeguarding policy gives the overarching reporting route; the Prevent policy contains the detailed risk, referral, curriculum and external-activity controls.

15. Online, Remote and Digital Safeguarding

Quack delivers through in-person, remote and blended models. Online safeguarding therefore covers the learning platform, official communications, staff boundaries, harmful content and the limitations of provider control when adults use their own devices away from Quack networks.

Control area	Required control
Identity / access	Use approved enrolment/identity checks and controlled meeting links/access. Do not share learner/session access unnecessarily.
Official channels	Staff use approved Quack email, Teams, PICS and other authorised systems for work. Personal social-media/messaging accounts are not used for routine learner contact.
Remote session oversight	Tutors monitor participation, chat and breakout activity proportionately. Concerns are acted on in real time. Sensitive safeguarding disclosures are moved to an appropriate private channel without leaving the learner unsupported.

Control area	Required control
Camera use	Camera expectations may be used for identity/engagement where appropriate, but camera use is not treated as a universal safeguarding test. Privacy, SEND, accessibility and reasonable adjustments are considered.
Recording	Sessions are not routinely recorded for safeguarding. Any authorised recording follows data-protection/quality rules; staff must not make ad hoc recordings or screenshots of safeguarding disclosures on personal devices.
Filtering / monitoring	Quack applies proportionate filtering, security and monitoring to systems/networks/devices it controls. Where adults use personal devices/networks, safe-use education, official channels and prompt reporting remain key controls.
Online harm	Grooming, extremist content, harassment, threats, scams, image-based abuse, stalking, exploitation or harmful contact is reported through safeguarding routes.
Data handling	Safeguarding records/evidence are stored only in approved restricted systems. Sensitive information is not retained in personal downloads, local desktop folders or ordinary chat threads beyond operational necessity.

16. Attendance, Engagement and Learner Journey Safeguarding

Absence is not automatically a safeguarding concern, but changes in attendance, contactability or behaviour can be indicators. Quack triangulates attendance with what staff know about the learner rather than treating non-attendance only as a funding/engagement issue.

Point in journey	Safeguarding control
Recruitment / enrolment	Explain reporting routes; record support/communication needs; identify safe contact where relevant; do not create unnecessary sensitive data.
Induction	Learners are told who the DSL/DDSL are, how to report a concern, that they can bypass their tutor, what to do in immediate danger and how to stay safe online.
Teaching / weekly review	Tutors reinforce safeguarding/Prevent/online safety, create opportunities to disclose concerns and notice change in presentation, interaction or attendance.
Absence / disengagement	Staff follow the Attendance Policy. Sudden unexplained disengagement, repeated inability to contact, concerning messages or known vulnerability prompts welfare/safeguarding consideration and DSL escalation where indicated.
Progression / employment	Progressions staff remain alert to unsafe employment, exploitation, harassment, modern slavery, financial abuse, workplace risk and post-course welfare issues.
Learner voice	Quack checks whether learners feel safe, know how to report concerns and trust that concerns will be acted on; themes feed safeguarding review/QIP.

17. Concerns or Allegations About Staff and Other Adults

Safeguarding concerns about staff, contractors, visitors, employers or other adults are routed immediately into the Managing Allegations, Low-Level Concerns and Safeguarding Concerns About Staff Procedure (1.4). They are not handled only as a complaint, grievance or performance matter.

- Adult-only cases use the relevant Care Act/local PIPOT framework where applicable; LADO is not used automatically.
- Where a child is involved and the harm threshold is met or may be met, the applicable child safeguarding/LADO process is used.
- Low-level concerns are recorded and reviewed for patterns. “Low level” describes the current threshold, not the seriousness with which Quack records and reviews the information.
- A concern about the DSL is reported to the DDSL and Managing Director/independent route; a concern about the Managing Director is routed to the DSL and independent governance route. The subject of an allegation cannot control the referral or outcome.
- Safeguarding, employment, criminal, DBS/regulatory and commissioner processes are kept distinct but coordinated. Precautionary action is not treated as proof of misconduct.

18. Employers, Subcontractors, Venues and External Partners

Expectation	How it is controlled
Pre-engagement assurance	Quack confirms proportionate safeguarding expectations/checks for subcontractors, learner-facing partners and delivery venues according to the activity and risk.
Employer contact / interviews / work	Learners know how to report unsafe behaviour. Quack does not assume employer safeguarding systems replace its own response.
Concern raised by partner	The partner takes immediate protective action within its responsibility and informs Quack promptly. Quack records and triages the concern through its safeguarding process.
Concern about partner staff	Quack applies safeguarding/person-in-position-of-trust/child LADO routes as applicable and protects the learner while external/employment processes proceed.
Information sharing	Only necessary safeguarding information is shared, using secure routes and clear responsibility for follow-up.
Assurance review	Material incidents, repeated concerns or weak partner response may trigger due-diligence review, suspension of activity, risk escalation or contract action.

19. Recording, Case Management and Information Security

A strong safeguarding record is a factual chronology of what was known, what the person wanted, what decisions were made and what happened next. It is not a retrospective narrative written for inspection. Quack's minimum case-management chain is: Safeguarding Concern Form -> PICS safeguarding marker / restricted case reference -> Safeguarding Risk Register -> DSL/DDSL triage and decision record -> external referral/consultation where required -> follow-up/review -> formal closure and residual-risk rationale.

Record	Minimum requirement
Safeguarding Concern Form	Reporter; person at risk; current location/safety; safe contact; children/adults involved; alleged access to person; concern category; date/time/location; exact facts/words; witnesses; impact; action taken; agencies informed; evidence status.
DSL triage / decision record	Risk level; threshold/route; desired outcome; consent; capacity/communication; information-sharing decision; external advice/referral; safety plan; responsible person; review date.
Referral / consultation record	Agency/service; date/time; person contacted; information shared; reference number; advice/decision; next action.
Follow-up / closure record	Learner contact; support provided; agency outcome; residual risk; whether desired outcomes were met; further monitoring; closure rationale/date.
Governance / learning record	Anonymised themes, response timeliness, referrals, trends, lessons learned, training/policy/process actions and QIP link.
Staff allegation record	Managed under procedure 1.4 with restricted safeguarding/HR records and external referral evidence where applicable.
PICS safeguarding marker / learner record	Every safeguarding concern is reflected in PICS using the minimum necessary information: date, safeguarding flag/marker or approved note, restricted case reference, DSL/DDSL ownership and any essential safe-contact instruction. Detailed disclosures, allegations, medical information and sensitive chronology remain in the restricted safeguarding case record rather than general-access PICS notes.
Safeguarding Risk Register	Every safeguarding case is entered on Quack's existing restricted Safeguarding Risk Register. The register records the case reference, learner/person, concern category, date opened, current risk/urgency level, case owner, referral/agency status, outstanding actions, next review date, case status, residual risk and closure date/rationale. The DSL/DDSL maintains the register and uses it to drive case review and governance assurance.

- Safeguarding records are restricted to authorised personnel and separated from general learner notes where wider access would expose sensitive information.
- Staff must record the source of information and distinguish direct observation, disclosure, third-party information and professional judgement.
- Original wording is preserved where material. Records are dated and attributable; later corrections do not overwrite the audit trail.
- Safeguarding information is retained in accordance with Quack's Records Management/Retention Policy and any legal, commissioner or safeguarding hold. Disposal is secure.
- Ordinary Teams chats, personal WhatsApp, personal email, personal cloud storage or local downloads are not safeguarding case-management systems.

20. Staff Training, Competence, Supervision and Professional Curiosity

Role / activity	Minimum assurance
All staff induction	Safeguarding, adult safeguarding, Prevent, online safety, reporting route, concerns about staff, whistleblowing, immediate danger, recording and safe information sharing before/at start of learner-facing duties.
Annual refresher	Formal safeguarding/Prevent refresher plus updates for law/guidance, provider risk and lessons learned.
Termly / periodic update	Short scenario-based updates: disclosures, domestic abuse, suicide risk, capacity/consent, online risk, staff concerns, local referral learning or other identified gaps.
DSL / DDSL	Advanced adult safeguarding competence, current Prevent knowledge, local referral knowledge, case-management skill, information sharing/MCA understanding and continuing CPD. DDSL must be capable of acting in the DSL role when required.
Managers / governance	Role-specific awareness of safeguarding oversight, conflicts, staff allegations, safer recruitment, challenge, learning and how to avoid interfering with professional safeguarding decisions.
Impact check	Training completion alone is insufficient. Quack tests staff understanding through scenario questions, supervision/1:1s, case review, learner feedback, audit and the staff policy acknowledgement process.

Supervision

The DSL receives regular safeguarding supervision/independent challenge appropriate to case volume and complexity. Serious or complex cases are not held by one individual without advice/challenge where this would create risk. Staff who manage distressing disclosures are offered appropriate debrief/support without compromising learner confidentiality.

20.1 Staff welfare following serious or distressing safeguarding cases

Safeguarding work can expose staff to distressing disclosures, threats, suicide risk, domestic abuse, violence, exploitation or other traumatic information. Quack therefore treats staff welfare after serious safeguarding activity as a management responsibility, not as an optional extra. Support is offered without requiring the staff member to repeat confidential learner detail unnecessarily.

- Immediate check-in - once the learner is safe and responsibility has transferred appropriately, the DSL/DDSL or line manager checks the staff member's immediate welfare and whether they need a break, cover, to stop learner-facing activity temporarily or another practical adjustment.
- Manager follow-up - for serious cases, the line manager/DSL follows up again by the next working day and, where appropriate, again during the following week. The purpose is welfare, reflection and support rather than criticism of the staff member for having received the disclosure.

- Health Assured | Wisdom Wellbeing - staff are reminded that Quack provides a confidential Assistance Programme through HA | Wisdom Wellbeing, including 24/7 wellbeing support, counselling routes, the Wisdom app and management support. Managers should actively signpost this following serious cases rather than waiting for the employee to ask.
- Critical incidents - where a safeguarding event has had a significant impact on one or more staff, senior management may use the available Health Assured/Wisdom Wellbeing manager or critical-incident support and consider temporary workload or duty adjustments.
- Confidentiality - managers record that a welfare check/support offer took place and any agreed workplace adjustment, but do not seek or record confidential counselling content.

21. Safeguarding Governance, Monitoring and Continuous Improvement

Frequency	Owner	Minimum review
Ongoing / per case	DSL/DDSL	Safety, referral status, follow-up actions and whether the case can safely close.
Weekly for high-risk/open urgent cases	DSL/DDSL	Outstanding agency action, learner contact, risk changes, unresolved actions and escalation.
Monthly	DSL / Quality assurance	Open/closed case log; categories; referral timeliness; repeat concerns; attendance/welfare themes; Prevent; staff concerns; online incidents; training/awareness gaps; overdue actions.
Quarterly	Managing Director + independent governance/oversight	Anonymised safeguarding dashboard; serious cases; referral outcomes; staff allegations; Prevent; learner voice; training compliance; SCR/safer recruitment assurance; policy/process impact; QIP actions and challenge.
Annually / after material event	DSL / Quality / governance	Policy review; local contacts/thresholds; risk assessment; training needs; learner profile/geographies; online/delivery model; effectiveness and lessons learned.
On Ofsted/commissioner/legal change	Policy owner / senior accountable lead	Immediate gap analysis and controlled update where the change is operationally material.

Quack uses safeguarding learning to improve practice rather than simply count concerns. A rise in reporting may indicate increased risk, but it may also show improved trust and awareness; leaders consider context, quality of response and learner impact before drawing conclusions.

22. Learner Awareness, Complaints and Whistleblowing

- Learners may report to any member of staff, the DSL/DDSL, the dedicated safeguarding route or the approved concern form. They may bypass their tutor or line of delivery support.
- Anonymous reports are accepted, although anonymity may restrict follow-up. Staff do not reject a concern because the reporter is not willing to identify themselves.
- A complaint containing safeguarding information is immediately routed to safeguarding triage as well as the complaints process where appropriate.
- Staff may use the Whistleblowing and Protected Disclosures Policy for serious safeguarding wrongdoing or where normal reporting routes are compromised.
- Retaliation against a person for raising a genuine safeguarding concern is prohibited and may itself lead to disciplinary or other action.

Appendix A - Staff Safeguarding Response Card

If in doubt: safety first, then report

If someone may be in immediate danger, call 999. Do not wait for DSL approval. For all other safeguarding concerns, act on immediate safety, record and report to DSL/DDSL the same working day.

Step	Staff action	Do not
1. Listen	Stay calm; take seriously; let the person speak; thank them for telling you.	Do not interrogate, challenge, blame or make promises about outcomes.
2. Safety	Ask whether they are safe now, where they are, who can access them and whether others/children are at risk. For remote contact, establish the learner's current location/postcode early enough for emergency services to act if risk escalates.	Do not end an urgent call/session merely to complete paperwork.
3. Support	Ask what help they want and what would make them safer. Confirm safe contact method.	Do not automatically contact family/emergency contact where this could increase risk.
4. Emergency	Call 999 where immediate danger/life risk exists; keep contact where safe. This includes a serious offence in progress/just happened, current violence/threatened violence, or a direct current suicide threat/inability to keep safe.	Do not delay emergency action for management permission. Do not transport an acute mental-health crisis in your own vehicle or place yourself in danger.
5. Record	Use exact words/facts, time, location, action, consent, agencies and reference numbers.	Do not write speculative conclusions or store records on personal devices.
6. Report	Safeguarding Concern Form + direct DSL/DDSL notification for urgent cases; same working day for all safeguarding concerns.	Do not assume another colleague, employer or agency has reported it unless confirmed.
7. Follow through	Remain available; complete further actions assigned; maintain confidentiality.	Do not discuss the case casually or seek updates beyond your need-to-know role.

Appendix B - DSL/DDSL Triage and Case Checklist

Check	Status	Evidence / note
Immediate safety established	Yes / No / N/A	Emergency action/reference recorded
Current location / safe contact recorded	Yes / No / N/A	
Adult at risk / Section 42 criteria considered	Yes / No / N/A	
Child / other-person risk considered	Yes / No / N/A	
Mental-health / self-harm / suicide risk considered	Yes / No / N/A	
Domestic abuse / coercion / unsafe contact considered	Yes / No / N/A	
Prevent / radicalisation route considered	Yes / No / N/A	
Staff allegation / PIPOT / LADO route considered	Yes / No / N/A	
Person's desired outcome recorded	Yes / No / N/A	
Consent decision and rationale recorded	Yes / No / N/A	
Capacity / communication support considered	Yes / No / N/A	
External advice/referral recorded	Yes / No / N/A	Agency / reference
Safety/support plan assigned	Yes / No / N/A	Owner / due date
Follow-up date set	Yes / No / N/A	
Case closure / residual risk rationale recorded	Yes / No / N/A	
PICS safeguarding marker / restricted case reference added	Yes / No / N/A	Minimum necessary note only; sensitive detail retained in restricted case file
Safeguarding Risk Register entry created / updated	Yes / No / N/A	Risk level, case owner, referral status, next review and current status recorded
Staff welfare check completed after serious case	Yes / No / N/A	Manager/DSL check-in and support offer recorded where applicable
Suicide emergency two-person response applied where relevant	Yes / No / N/A	One staff member maintained contact; second called 999/DSL; location recorded
Staff safety / safe conveyance considered	Yes / No / N/A	No unsafe transport or staff exposure; emergency-service instructions followed

Appendix C - Companion Policies and Operational Evidence

Reference	Companion control	Use with this policy for
1.2	Prevent Risk Assessment	Provider-specific Prevent risk, controls and review.
1.3	Prevent, Radicalisation and Extremism Policy	Detailed Prevent recognition, external activity, referral and Channel arrangements.
1.4	Managing Allegations, Low-Level Concerns and Safeguarding Concerns About Staff Procedure	Concerns/allegations about staff, contractors, visitors and other adults; PIPOT/LADO distinction.
1.5-1.7	Safer Recruitment / SCR / DBS controls	Recruitment, vetting, ongoing suitability and DBS handling.
2.1 / 2.2	Learner Support / EDI	Support, SEND, reasonable adjustments and inclusive practice.
2.4	Attendance, Engagement, Re-engagement and Withdrawal Policy	Absence/disengagement response and welfare/safeguarding indicators.
2.7	Complaints Policy and Procedure	Complaints containing safeguarding information.
4.2-4.4	GDPR / Information Security / Records Management	Lawful information sharing, access, secure records and retention.
5.1 / 5.2 / 5.5	Governance / Risk / Whistleblowing	Oversight, organisational risk, independent challenge and protected disclosure.
6.1 / 6.2 / 6.6	Staff Conduct / Training / Disciplinary	Professional boundaries, competence and conduct response.
7.1	Health and Safety Policy	Physical safety, incidents and risk controls.
8.2	Modern Slavery, Human Trafficking and Labour Exploitation Policy	Labour exploitation, trafficking and employer/supply-chain concerns.

Operational evidence includes the Safeguarding Concern Form, restricted safeguarding log/case files, referral/consultation records, the controlled External Safeguarding Contacts Register, signposting/warm-handover and follow-up evidence where relevant, staff training matrix, learner awareness/voice evidence, SCR audits, Prevent Risk Assessment, safeguarding governance reports and QIP actions., PICS safeguarding markers/restricted case references, the Safeguarding Risk Register, staff welfare check records where applicable

Appendix D - Version Control and Reference Framework

Version	Date	Summary of change	Next review
4.0	February 2026	Previous safeguarding, Prevent and online-safety policy.	Superseded by v5.0
5.0	7 August 2026	Comprehensive operational rewrite following full safeguarding policy review and current statutory, inspection and sector-practice learning. Adds role ownership, immediate-response/triage workflow, Making Safeguarding Personal, consent/information sharing, MCA clarification, suicide/self-harm response, domestic-abuse safe contact, child interface, PIPOT/LADO distinction, referral/signposting controls, digital safeguards, case management, governance and Ofsted September 2026 alignment. Final strengthening added explicit 999/immediate-danger rules, suicide two-person response and staff-safety controls, trained-staff capacity assessment, PICS and Safeguarding Risk Register recording, Hampshire/Hub of Hope/NFM signposting, and staff post-incident wellbeing support through Health Assured Wisdom Wellbeing.	August 2027 or earlier after material change

Reference framework; Police.uk emergency reporting guidance (999/101); NHS urgent/emergency mental-health guidance; Hub of Hope mental-health support directory; National Family Mediation (NFM) as a non-safeguarding family-support signposting option where appropriate

Care Act 2014; Care and Support Statutory Guidance (adult safeguarding); Mental Capacity Act 2005 and Code of Practice; Counter-Terrorism and Security Act 2015 and Prevent Duty Guidance 2023; Domestic Abuse Act 2021; Modern Slavery Act 2015; UK GDPR and Data Protection Act 2018; Equality Act 2010; Working Together to Safeguard Children 2026; KCSIE where applicable; Ofsted Further Education and Skills Inspection Toolkit and Operating Guide including the versions published for use from September 2026; applicable local Safeguarding Adults Board, PIPOT, children's safeguarding, police and Prevent/Channel arrangements.