



SOCIAL VALUE 360 LTD

Safeguarding Children and Adults at Risk Policy

2026 to 2027 | Version 1.4

Policy owner: Roy Ramrutton, Designated Safeguarding Lead

Prepared: 23 September 2026

Approved by: Roy Ramrutton, Responsible Director, SOCIAL VALUE 360 LTD

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Next review: 23 September 2027 or earlier if required

Purpose and scope

Social Value 360 is committed to safe, respectful programmes for participants predominantly aged 5 to 100. Safeguarding is everyone's responsibility. Staff must act on concerns promptly, listen to the person affected and never assume someone else will report them.

This policy covers staff, directors, volunteers, contractors, partner delivery, online activity, visits and work in community venues. It includes child protection, adult safeguarding, safer recruitment, concerns about personnel and safe delivery. Child procedures apply to everyone under 18. Adult procedures apply from 18; an adult is not automatically at risk because of age or disability.

The child's welfare is central to child protection. Adult safeguarding supports the person's wishes, rights, safety and involvement, using the least restrictive appropriate response. Participants receive an accessible explanation of how to seek help, including alternatives if their concern is about the usual contact.

Immediate action and essential contacts

If someone is in immediate danger or needs urgent emergency treatment, call 999. Do not wait for internal approval. For non-emergency police contact use 101. Anyone may refer a safeguarding concern directly to the relevant local authority.

Designated Safeguarding Lead for children and adults: Roy Ramrutton | roy@socialvalue360.co.uk | 07789 993621. Deputy Safeguarding Lead: Wendy Bower | wendybower12@hotmail.com. Her safeguarding training has been confirmed. Responsible Director: Roy Ramrutton, using the contact details above. Wendy's email must be included in the programme contact list and made available to personnel before delivery. Do not wait for an email response when urgent safeguarding action is needed. Concerns about Roy must be reported to Wendy and directly to the appropriate statutory safeguarding service where required.

For each delivery location, the programme lead maintains a verified contact list for children's social care, adult safeguarding, the Local Authority Designated Officer (LADO) and emergency out-of-hours social care. Use the relevant local authority's official referral route. Urgent child protection referrals must still go to children's social care or police.

Before each programme, check the relevant children's, adults', LADO and out-of-hours routes for the location and participants and make them accessible to personnel during delivery. Contact the authority where the person is at risk for immediate advice and coordinate any cross-boundary referral.

External routes and contacts must be accessible to staff during every activity. If the DSL or deputy is unavailable, contact social care or police directly and inform the DSL as soon as possible. Absence, holidays or a conflict of interest must never delay protection.

Framework and responsibilities

This policy uses the Children Acts 1989 and 2004, Working Together to Safeguard Children 2026, the Care Act 2014 adult safeguarding framework, the Mental Capacity Act 2005, the Equality Act 2010, data protection law and local safeguarding procedures as relevant to the service.

Keeping Children Safe in Education 2026 applies directly to schools and colleges within its scope. Social Value 360 uses its relevant safeguarding standards for child-facing delivery and meets any applicable contractual or statutory requirements, without claiming school status. The Director checks programme-specific duties, including childcare registration, regulated activity, Prevent, qualification and commissioning requirements before delivery.

The Director approves arrangements, resources trained cover, checks implementation and receives anonymised safeguarding assurance at least quarterly. The DSL coordinates referrals, case records, inter-agency work, safer practice and training. The deputy must be trained to provide effective cover. The DSL's responsibility is not transferred to a commissioner or venue simply because activities occur on its premises.

All personnel complete induction before unsupervised work, know the reporting routes, maintain professional boundaries, record concerns and follow safe instructions. Programme leads confirm risk assessments, participant information, emergency arrangements and partner responsibilities before activities begin.

Recognising harm

Child abuse includes physical abuse, emotional abuse, sexual abuse and neglect. It can happen in families, institutions, peer groups, communities and online. Children may be harmed by adults or other children and may not recognise the experience as abuse. Exploitation can appear consensual and still be abuse.

Possible indicators include unexplained injuries, fear of a person or place, withdrawal, marked behaviour changes, hunger or poor care, age-inappropriate sexual knowledge, unexplained money or gifts, controlling relationships, repeated absence, missing episodes or concerning online contact. An indicator is a reason for professional curiosity, not proof or a diagnosis.

Adult abuse may be physical, sexual, psychological, financial or material, discriminatory, organisational, domestic abuse, modern slavery, neglect or acts of omission and self-neglect. Watch for coercion, isolation, unexplained withdrawals, misuse of benefits, poor care, pressure to sign documents, restricted access to communication or another person speaking for the adult against their wishes.

The Care Act section 42 threshold concerns an adult with care and support needs who is experiencing or at risk of abuse or neglect and, because of those needs, is unable to protect themselves. The local authority decides its statutory response. Staff refer concerns and seek advice rather than rejecting a concern because they are unsure the threshold is met.

Responding to a disclosure or concern

1. Listen calmly, take the report seriously and make the person feel heard. Allow their own account; ask only limited, open questions needed to clarify immediate safety. Do not investigate, confront the alleged abuser or suggest answers.
2. Explain that you cannot promise secrecy and will share information only with people who need to help. Do not blame the person, promise a particular outcome or suggest they should have spoken sooner.

3. Check immediate safety, obtain emergency help where required and contact the DSL or deputy immediately. Take account of safe ways to communicate and risks from family members, carers or others.
4. Record as soon as possible the person's exact words, observations, date, time, location, those present and actions taken. Distinguish facts, reported information and professional opinion. Sign or authenticate the record and submit securely, normally the same day.
5. The DSL records the decision, reasons, referral, responsible person and follow-up date. If you remain concerned or action is not taken, refer directly to social care or police and use the local professional disagreement process.

The DSL follows up referrals if no response is received within the expected local timescale and escalates if risk remains. A referral is not the end of our responsibility. Staff cooperate with assessments, plans and reviews while staying within their role.

Child protection and family help

Where a child may be suffering or likely to suffer significant harm, make an immediate referral to children's social care and involve police where necessary. Do not wait for consent, a complete form or the next working day. For emerging needs below this threshold, the DSL considers family help or early support with the child, family and relevant services, following current local pathways.

The DSL considers the child's wishes and understanding and normally involves parents or carers. Do not contact them first if this could increase harm, prejudice an investigation or put someone else at risk. Seek social care or police advice, including for suspected intra-familial abuse, forced marriage or honour-based abuse.

Agree attendance and non-arrival reporting with parents, carers and referring organisations. For an unexplained absence, check promptly according to the individual risk plan; act immediately for a missing child or known serious risk. Do not assume a child is safe because a placement is part time or another organisation holds the main record.

Children in care, previously in care, with a social worker, young carers, children with SEND, health needs or communication barriers may need additional support. Do not explain away injuries, distress or behaviour as a disability. Seek an appropriate independent interpreter or communication aid; a suspected abuser must not interpret a disclosure.

Adult safeguarding and capacity

Speak with the adult privately where safe, ask what they want to happen and support them to participate in decisions. Consider accessible information, advocacy and a trusted supporter of their choice. Do not automatically inform relatives or carers; they may have no authority or may be involved in the concern.

Seek informed consent to an adult safeguarding referral where practicable. If the adult refuses, the DSL considers coercion, capacity, serious harm, risk to others, crime and legal duties with the local authority. A justified disclosure without consent may be necessary; record the lawful basis, reasons and what the adult was told. Respect a capacitous adult's decision where there is no overriding lawful reason to act, provide safety information and keep the situation under review.

The Mental Capacity Act applies from age 16. Presume capacity, provide support to decide and do not treat an unwise decision as proof of incapacity. Capacity is decision-specific and time-specific. Where it is in doubt, involve a suitably competent professional. Decisions for a person lacking capacity must follow the Act, including best interests and the least restrictive option, within the decision-maker's authority.

For 16- and 17-year-olds, mental capacity considerations do not replace child protection. For adults, check the scope and validity of any attorney, deputy or other representative's authority. Staff must not take control of finances, accept significant gifts or act as informal decision-makers beyond their role.

Child on child abuse and sexual harm

Bullying, discriminatory abuse, coercion, sexual harassment, sexual violence, intimate relationship abuse and initiation rituals are taken seriously. Do not dismiss them as banter or an inevitable part of growing up. Challenge misogyny and other degrading conduct and consider whether it signals a safeguarding risk.

Refer concerns immediately to the DSL. Reports of rape, assault by penetration or sexual assault should be referred to police, alongside children's social care where appropriate, including where a child alleged to have caused harm is below the age of criminal responsibility. Do not use mediation or require the person harmed to meet the alleged perpetrator.

The DSL makes an immediate risk and support plan for everyone affected, including separation where necessary, safe travel and online contact, supervision, educational or activity access and specialist support. The child alleged to have caused harm may also need protection. Record and review the plan with relevant agencies, respecting confidentiality and avoiding punishment of the person who reported harm.

Images online harm and exploitation

Staff must immediately report concerns about nude or semi-nude images, sexual extortion, grooming or AI-generated sexual material. Do not ask a child to show, send or download an image. Do not copy, print, forward or routinely view it, and do not delete potential evidence or ask the child to do so. If seen accidentally, report this and preserve the device or account information safely without reproducing the imagery.

The DSL follows current UKCIS guidance and seeks police or social care advice. Adult involvement, coercion, blackmail, immediate danger, developmentally unusual or violent sexual acts, or sexual acts involving a child under 13 require urgent referral. Reassure the person and address self-harm risk; do not blame them or arrange payment to an extortioner.

Risks include sexual and criminal exploitation, county lines, trafficking, modern slavery, serious violence, financial abuse and radicalisation. Staff report concerning conduct and circumstances, not assumptions based on ethnicity, religion or identity. The DSL seeks appropriate safeguarding and specialist advice and considers any applicable Prevent duty and referral pathway. Immediate danger is a police matter.

FGM forced marriage and other specific concerns

Female genital mutilation and forced marriage are safeguarding matters. Follow child or adult referral routes as appropriate. Do not mediate with family or community members or alert them where this could increase danger. Staff must not examine a participant to investigate suspected FGM.

Where a regulated professional has the personal statutory duty to report known FGM in a girl under 18, they must report to police in accordance with that duty and inform the DSL. Reporting only to the DSL does not discharge the professional's duty. Suspected FGM and risk of FGM still require safeguarding action even where the mandatory reporting test is not met.

Domestic abuse can harm children who see, hear or experience its effects and adults of any age. Mental ill health, self-harm, suicidal statements, homelessness, bereavement or substance misuse may indicate a need for help or protection. Seek urgent clinical or emergency help where needed; staff do not diagnose or promise counselling they are not qualified to provide.

If staff become aware of a possible private fostering arrangement, the DSL checks notification duties and contacts children's social care. Staff must also consider risks outside the activity setting, including travel, workplaces, peer networks and online communities.

Safe practice across age groups

Before delivery, assess staffing, supervision, venue access, toilets and changing arrangements, first aid, communication needs, collection and transport, one-to-one work and mixed-age contact. Set ratios according to the activity, age, needs and applicable rules; a single ratio is not suitable for all programmes. Adult participants are not automatically supervisors of children.

Use sign-in and sign-out arrangements and authorised collection for children. Agree any independent travel in advance with the appropriate person and record it. Have a procedure for late collection and missing participants. For adults, agree arrangements with the person, respecting autonomy and any lawful support plan.

One-to-one sessions must be planned, authorised and observable or otherwise safeguarded, with their time and location known to a colleague. Home visits, transport, personal care and high-risk activities require specific arrangements and trained personnel before they are offered. Do not improvise lone transport or personal care outside the agreed plan except to protect someone in an emergency.

Staff maintain professional boundaries, use approved communication channels and do not establish secret contact, private social media connections, sexual relationships with children, favouritism or inappropriate gift exchanges. Personal phones must not be used to capture participant images. Any necessary physical contact must be proportionate, explained where possible and appropriate to the activity; force must never be used as punishment. Record and report any protective intervention promptly.

For online sessions, use approved platforms, controlled access, appropriate supervision, privacy settings and clear conduct rules. Assess content, contact, conduct and commerce risks. The DSL and IT lead agree filtering, monitoring and alert response for systems we control and verify partner arrangements. No recording without specific approval, a lawful purpose and advance information.

Safer recruitment and partners

Recruitment describes safeguarding responsibilities and uses relevant applications, employment history, identity and qualification checks, references verified directly and interviews that explore suitability and unexplained gaps. At least one person involved in selecting child-facing staff must have safer recruitment training. Offers remain conditional until required checks and concerns are resolved.

Assess each role's eligibility for DBS checks and regulated activity separately for children and adults. Obtain the appropriate check and barred-list information only where legally permitted. Working with older adults alone does not automatically justify an adults' barred-list check. Use current DBS definitions and seek advice for uncertain roles. Record the check, date, decision and person responsible without retaining certificates unnecessarily.

Check right to work where required, relevant professional restrictions, overseas history and childcare disqualification where applicable. Do not assume that section 128 or school-specific checks apply to every Social Value 360 role. Any exceptional start before checks are complete requires a lawful, documented risk assessment and safeguards; never permit a barred person in regulated activity or bypass a required barred-list check.

For agency staff and delivery partners, obtain written confirmation of required checks, verify identity on arrival and agree safeguarding, attendance, incident, information-sharing and supervision responsibilities. Unchecked visitors and volunteers must not have unsupervised access to children. Due diligence and contracts must allow concerns to be escalated and unsuitable delivery stopped.

Allegations against staff and other adults working with children

Report immediately to the Director where a person may have harmed a child, committed an offence against or related to a child, behaved in a way suggesting risk to children or behaved in a way suggesting they may be unsuitable to work with children, including outside work. If the Director is

implicated or there is a conflict, report to Wendy Bower and directly to the LADO. If Wendy is also implicated or unavailable, use the statutory referral route directly.

Contact the LADO without delay and within one working day for allegations meeting or potentially meeting the harm threshold, following local procedures. Contact police or social care immediately if protection cannot wait. Gather only basic facts needed for referral; do not conduct a substantive internal investigation or notify the subject in a way that could prejudice external action before advice.

The case manager agrees next steps with the LADO and other agencies, records decisions, coordinates the employer or agency and supports the child and the person accused appropriately. Suspension is not automatic: assess risk and alternatives, record reasons and review restrictions. Protect confidentiality and agree what may be shared with families and the subject.

Resignation, a settlement or ending a placement does not stop safeguarding action. Make a DBS referral where the legal conditions are met, including removal from regulated activity because of relevant harm or risk, or where removal would have occurred had the person not left. Consider professional regulator, commissioner or registration notifications where required.

Record the outcome accurately: substantiated, false, malicious, unsubstantiated or unfounded, as appropriate to the evidence and relevant process. Insufficient evidence does not prove a malicious report. Review learning and support on return to work where appropriate. References must be accurate and follow applicable rules on allegations and substantiated concerns.

Adult safeguarding allegations and low level concerns

For concerns about a person working with adults, ensure immediate safety, notify the DSL and follow local adult safeguarding and persons-in-positions-of-trust procedures. Inform police, the employer, commissioners, relevant regulators and DBS where thresholds or duties are met. The children's LADO route does not replace adult safeguarding arrangements; use both if risks cross age groups.

A low-level concern is behaviour inconsistent with safe professional conduct that does not appear to meet the child harm threshold, such as inappropriate familiarity, humiliating language, favouritism or unapproved private contact. Low-level does not mean unimportant. Report promptly to the Director, or to Wendy Bower where the concern involves the Director, including self-reports and concerns about volunteers or contractors. Use the relevant statutory safeguarding route directly where the concern warrants referral or internal reporting would create a conflict.

Record the concern, context, action and reasons confidentially. Review patterns and consult the LADO if uncertain about the threshold. Address behaviour through supervision, training or the appropriate conduct process. Notify an agency employer where necessary to identify patterns. Retention follows the Data Retention Policy and is reviewed when engagement ends.

Information sharing and records

Share relevant, accurate and proportionate information securely with those who need it for safeguarding. Data protection law does not prevent necessary lawful sharing. Record the purpose, lawful basis, any special category or criminal offence condition, recipient and reasons, including decisions not to share. Seek advice when uncertain without delaying urgent protection.

Keep a separate restricted safeguarding record with the concern, exact words where relevant, chronology, assessments, decisions, actions, referrals, communications, support plan and outcome. Do not store case files in general attendance records or personal messaging accounts. Access and retention follow the Data Retention Policy.

For transfer to another setting, verify the recipient, share necessary information promptly and securely and confirm receipt. Where KCSIE transfer requirements apply, follow them, including the relevant five-day arrangements. Agree what record Social Value 360 must retain and why. Do not automatically destroy our record or retain a full duplicate without assessment.

Speaking up training and review

Staff may report unsafe practice to Roy Ramrutton or Wendy Bower and directly to social care, LADO or police as appropriate. Good-faith reporting must not lead to retaliation. A participant or staff member need not use the complaints procedure before raising a safeguarding concern externally.

All personnel receive induction covering this policy, professional boundaries, disclosures, local referral routes, online safety and role-specific risks before unsupervised duties. Provide at least annual updates. Child-facing staff read the relevant current KCSIE staff guidance as an organisational standard. DSLs and deputies receive appropriate child and adult safeguarding training, refreshed at least every two years with knowledge updates at least annually.

The Director checks contact cover, training, recruitment, case follow-up, partner compliance and online controls at least quarterly. The DSL reviews the policy annually and after serious incidents, legal changes or changes to services. Participant feedback and accessible reporting routes form part of this review.

Safeguarding record prompt

Record the reporter; participant's name and safe contact; age; date and time; location; exact disclosure and observations; immediate risk; actions and emergency contacts; who was informed and when; participant's wishes; consent or reason for sharing without it; referral reference; decision and rationale; responsible person; next review; outcome. Do not delay reporting while completing the record.

Core guidance and referral sources

Keeping Children Safe in Education: <https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

Working Together to Safeguard Children: <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

Care and Support Statutory Guidance chapter 14: <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

Find the relevant local council and its safeguarding referral routes: <https://www.gov.uk/find-local-council>

Find the relevant council child protection route: <https://www.gov.uk/report-child-abuse-to-local-council>

UKCIS image-sharing guidance: <https://www.gov.uk/government/publications/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people>