

Safeguarding Policy

Introduction

Heal is an environmental charity that coordinates activities and events that involve both children and adults in the UK. Heal hosts a community of volunteers which is deliberately diverse in age, background and other characteristics. Heal runs both online and in person events and activities.

Heal believes that children and vulnerable adults should never experience abuse of any kind. We have a responsibility to promote the welfare of all children and vulnerable adults to keep them safe. We are committed to practice in a way that protects them.

This document outlines the way in which Heal will comply with its duties to identify and escalate safeguarding concerns. The aim is to ensure that Heal colleagues are suitably equipped to do this.

Definitions

- **Safeguarding**
“Safeguarding means protecting a citizen’s health, wellbeing and human rights; enabling them to live free from harm, abuse and neglect.” – *NHS England*
- **Vulnerable Adult**
“A vulnerable adult is someone aged 18 or above who may need community care services for reasons like mental health issues, disability, age or illness.” – *Mencap*
- **Child**
“England, Wales, Northern Ireland and Scotland each have their own guidance setting out the duties and responsibilities of organizations to keep children safe, but they agree that a child is anyone who has not yet reached their 18th birthday.” – *NSPCC Safeguarding Information Service, August 2008*
- **Child safeguarding**
“Child safeguarding is the protection of the health, well-being, and rights of children. For the purpose of this policy and procedures, the terms ‘child’ and ‘children’ refer to anyone up to the age of 18 years” – *Child Protection Act 1989*
- **Safeguarding adults**
“Safeguarding adults means protecting a person’s right to live in safety, free from abuse and neglect” – *Care Act 2014*

Purpose of this policy

Our main policy objective is to ensure that we will promote safeguarding as the moral norm so that it becomes everybody's business, meaning that Heal staff, volunteers, trustees, partner organisations and individuals working with children, families and vulnerable adults understand their safeguarding responsibilities and their active role in working together to safeguard children and vulnerable adults from harm. For this policy to be effective it is essential that all Heal staff, volunteers, trustees, and partner organisations and individuals have an understanding of what safeguarding means, know that safeguarding is everyone's responsibility, know the signs and symptoms of potential harm, how to access safeguarding information, advice and guidance, and are committed to making an informed contribution to safeguarding children and vulnerable adults.

This policy outlines the steps Heal is taking to ensure it operates in a way that actively prevents harm, harassment, bullying, abuse and neglect. It also sets out the procedures that enable Heal to be ready to respond safely and well if there is a problem. This policy applies to all organisations we work with, staff, including senior managers and the board of trustees, volunteers, students or anyone working on behalf of Heal Rewilding ("Heal"). The Heal Safeguarding Policy shall be made available to all partner organisations, volunteers, employers and employees of Heal.

Policy objectives

The two priority objectives of this policy are:

- To demonstrate how Heal will protect children and vulnerable adults who interact with Heal as volunteers, visitors and donors
- To provide staff, volunteers and partner organisations the overarching principles that guide our approach to safeguarding children and vulnerable adults

Legal framework

This policy has been drawn up on the basis of law and guidance that seeks to protect children and vulnerable adults, namely:

- Children Act 1989
- United Convention of the Rights of the Child 1991
- Data Protection Act 1998
- Public Interest Disclosure Act 1998
- No Secrets, Department of Health Guidance 2002
- Sexual Offences Act 2003
- Children Act 2004
- The Mental Capacity Act 2005
- Safeguarding of Vulnerable Groups Act 2006
- Equality Act 2010
- Protection of Freedoms Act 2012
- The Care Act 2014
- Working Together to Safeguard Children Guidance 2018
- Adult Safeguarding Network, NHS England
- Data Protection Act 2018

Related policies and procedures

This policy should be used in conjunction with other policies developed by Heal:

- Health and Safety Policy

- Equality and Diversity Policy
- Data Protection and Privacy Policy
- Whistleblowing Policy
- Child E-Safety Policy
- Procedure for Managing Safeguarding Allegations

Guiding principles

Underpinning the safeguarding of children, the safeguarding policy and procedures are guided by the following principles:

- The welfare of the child is paramount, as enshrined in the Children Act 2004
- All children, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse and a right to equal opportunities
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues
- Working in partnership with children, their parents, carers and other agencies is essential in promoting child welfare

Underpinning the safeguarding of safe adults, the safeguarding policy and procedures are underpinned by the following principles:

- Empowerment: people are supported and encouraged to make their own decisions and informed consent
- Prevention: it is better to take action before harm occurs
- Proportionality: the least intrusive response to the risk presented
- Protection: support and representation for those greatest in need
- Partnership: services offer local solutions through working closely with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse
- Accountability: accountability and transparency in delivering safeguarding


Safeguarding actions

Heal will seek to keep children and vulnerable adults safe by:

- Valuing, listening to and respecting children and vulnerable adults
- Adopting safeguarding practices through procedures and a code of conduct for staff and volunteers
- Implementing an effective E-safety Policy and related procedures
- Providing effective management for staff and volunteers through supervision, support and training
- Recruiting staff and volunteers safely, ensuring all necessary checks are made
- Sharing information about the protection of children and vulnerable adults and good practice with children, parents, vulnerable adults, carers, staff, and volunteers

- Ensuring our Safeguarding Policy is accessible to partner organisations involved directly with our work
- Ensuring that all concerns and allegations of abuse will be taken seriously by trustees, staff and volunteers and responded to appropriately, this may require involving parents, children, and/or carers, referral to children’s social care services, the independent Local Authority Designated Officer (LADO) for all allegations against staff, trustees and volunteers, referral to Multi Agency Safeguarding Hubs (for vulnerable adults), and in emergencies, the Police

We are committed to reviewing this policy and procedures annually.

Policy	Safeguarding Policy
Next review date	08 December 2024
Designated Safeguarding Officer	Julia Galbenu and Jan Stannard
Signature	

CEO signature



Heal Safeguarding Procedure

Designated Safeguarding Officer (DSO)

Julia Galbenu
Community Engagement Manager
07794 885970
julia.galbenu@healrewilding.org.uk

Designated Safeguarding Officer (DSO) and Designated Trustee

Jan Stannard
Chair of Trustees
07710 171 704
jan@healrewilding.org.uk

1. Role of Designated Safeguarding Officer (DSO)

The DSO is responsible for managing all aspects of the referral process, including:

- Referring cases of suspected abuse to the local authorities as required and supporting staff who make referrals
- Referring cases where a person is dismissed or has left due to risk/harm to a child or vulnerable adult to the Disclosure and Barring Services as required
- Referring cases where a crime may have been committed to the police as required
- Keeping secure records of all referrals

In the event of a referral, the DSO is responsible for liaising with parents, teachers, carers case managers and designated officers at the local authority.

The DSO should act as a source of support, advice and expertise for all staff and volunteers with regards to matters of safety and safeguarding. The DSO should be available for team members to discuss any safeguarding concerns.

The DSO should undergo training to provide them with the knowledge and skills required to carry out the role. This training should be updated at least every two years.

The DSO should encourage a workplace culture where safeguarding is a top priority, and is responsible for ensuring the organisation's safeguarding policies and procedures are known, understood, used appropriately and revised annually.

2. Recruitment and induction

2.1.1 Staff recruitment

All Heal staff are required to have an up-to-date relevant DBS check where their post is eligible for this (including a check against the relevant barred list if the post involves regulated activity). We use the Disclosure and Barring Service's Eligibility tool to determine the level of check required. More information can be found here: <https://www.gov.uk/government/collections/dbs-eligibility-guidance>.

All prospective Heal staff are subject to comprehensive interviews, must provide a CV, two references from previous employers and account for any gaps in employment.

All prospective Heal staff are required to share any record of cases of child abuse made against them at any time.

2.1.1 Volunteer recruitment

Volunteers may work with children and vulnerable adults. In most cases, there will be a group leader/ teacher/ parent or guardian present who is responsible for the children/ vulnerable adult's wellbeing and safety. In which case, the volunteer must read and adhere to the safeguarding policy to understand their individual safeguarding responsibilities. In addition, they must also be supervised by a staff or volunteer who is DBS checked.

In the exceptional circumstance where a volunteer is independently leading a group of children/ vulnerable adults (and no supervisor/leader is present) they are required to have an up-to-date relevant DBS check (including a check against the relevant barred list if the post involves regulated activity). We use the Disclosure and Barring Service's Eligibility tool to determine the level of check required. More information can be found here: <https://www.gov.uk/government/collections/dbs-eligibility-guidance>. In addition they will be subject to comprehensive interviews, must provide a CV, two references from previous employers and account for any gaps in employment.

Anyone who applies to volunteer with children and/or vulnerable adults at Heal is required to share any record of cases of child and/or vulnerable adult abuse made against them at any time.

2.1.2 Staff induction

As part of their induction, all Heal staff are required to read this policy, and sign to confirm they have read it and will act in accordance with it.

All Heal staff will receive safeguarding training and be made aware of all relevant policies and procedures and Heal's mission and commitment to safeguarding.

Staff will be trained to recognise signs of abuse and know the appropriate reporting systems for this.

Staff will receive guidance on how to respond to disclosures of abuse.

All new staff will be adequately supervised and their progress reviewed on a regular basis.

2.1.2 Volunteers induction

As part of their induction, all Heal volunteers will be provided access to a web portal containing all of Heal's policies.

Any volunteers who sign up to work on Heal Future activities must sign to confirm they have read the safeguarding policy and will act in accordance with it.

All volunteers who sign up to work on Heal Future activities will receive safeguarding training and be made aware of all relevant policies and procedures and Heal's mission and commitment to safeguarding.

All volunteers who sign up to work on Heal Future activities will be trained to recognise signs of abuse and know the appropriate reporting systems for this.

All volunteers who sign up to work on Heal Future activities will receive guidance on how to respond to disclosures of abuse.

All volunteers who sign up to work on Heal Future activities will be adequately supervised and their progress reviewed on a regular basis.

3. Code of Conduct

The following are examples of good practice that all Heal staff, trustees and volunteers will be expected to follow at all times:

- Treat colleagues, children, vulnerable adults and staff from partner organisations with respect at all times
- Attend any meetings or calls at the required time as specified by the Heal's supervising staff member and dress in appropriate clothing that isn't 'revealing'
- Report any inappropriate questioning or behaviour to Heal's supervising staff member
- Maintain a safe and appropriate distance with children and vulnerable adults
- Build balanced relationships based on mutual trust, which empower children and vulnerable adults to share in the decision-making process
- Always work in an open environment, encouraging open communication with no secrets
- Be an excellent role model - this includes not smoking or drinking alcohol in the company of young people or vulnerable adults
- Give enthusiastic and constructive feedback rather than negative criticism
- Ensure that a Heal staff member is present at all times when interacting in person with children and vulnerable adults
- Ensure that relationships formed with children and vulnerable adults while working with Heal remain professional at all times and are not considered personal relationships by Heal staff, volunteers or by the children/vulnerable adults
- Read and follow Heal's E-safety Policy

Practices that are to be avoided except in emergencies include:

- Spending time alone with a child or vulnerable adult away from others. Where this situation is unavoidable, this should be with the full knowledge and consent of Heal's supervising staff member and/or the child's parents or the vulnerable adult's carers

Practices that are never to be sanctioned include:

- Swearing, aggressive behaviour or referencing material that is not age appropriate in conversation
- Engaging in rough, physical or sexually provocative games, including horseplay
- Sharing a room with a child or vulnerable adult
- Allowing or engaging in any form of inappropriate touching
- Allowing children to use inappropriate language unchallenged
- Making sexually suggestive comments to a child or vulnerable adult, even as a joke
- Reducing a child or vulnerable adult to tears as a form of control
- Allowing allegations made by a child or vulnerable adult to go unrecorded or not acted upon
- Doing things of a personal nature for children or vulnerable adults that they can do for themselves
- Inviting or allowing children or vulnerable adults to stay with you at your home
- Sharing photos of a child or vulnerable adult on your personal social media platform. Always retweet/share Heal's original content
- Sharing personal information with a child or vulnerable adult, or contacting a child or vulnerable adult online (see our E-Safety Policy)
- Taking photos of a child or vulnerable adult on a personal mobile phone or camera or storing photos of a child or vulnerable adult on your personal computer
- Sharing personal or identifiable information about a child or vulnerable adult, such as their name, school or address, without permission

4. Anti-bullying

All reasonable steps should be taken to ensure that every child and vulnerable adult we work with feels safe, happy and supported and protected at all times. Bullying and cyberbullying incidents will always be taken seriously and treated as a safeguarding issue.

Heal will not tolerate unkind actions or remarks, or stand by when someone is being bullied or supporting bullying. It should be noted that abusive comments and interactions should not be passed off as mere 'banter'. Such comments referring to a person's race, religion, ethnicity, sexuality, culture, special educational needs are not acceptable and will be treated as bullying and therefore considered a safeguarding issue.

Any Heal staff member or volunteer who is made aware of or witnesses bullying behaviour should report the incident.

5. Recognition of abuse

Staff and volunteers should recognise the following as indicators of abuse:

5.1. Physical abuse

Physical abuse is when someone hurts or harms a child or vulnerable adult on purpose. Physical abuse includes assault, hitting, slapping, punching, pushing, kicking, misuse of medication, poisoning, drowning, restraint or inappropriate sanctions. It's important to remember that physical abuse is any way of intentionally causing physical harm to a child or vulnerable adult.

Physical indicators of physical abuse include:

- Unexplained bruising
- Bruises which reflect hand marks
- Burns or scalds
- Bite marks
- Broken bones
- Scarring
- Breathing problems from drowning, suffocation or poisoning
- The effects of poisoning, such as vomiting, drowsiness or seizures

Behavioural indicators of physical abuse include:

- Fear of parent or carer being contacted
- Aggression or anger
- Keeping body covered
- Flinching
- Depression
- Withdrawn behaviour

5.2. Sexual abuse

Sexual abuse refers to actual and intended abuse. Sexual abuse can include rape, indecent exposure, sexual harassment, sexual teasing or innuendo, fondling, sexual photography, inappropriate sexual conversation or subjection to pornography or witnessing sexual acts, sexual assault, sexual acts to which the vulnerable adult has not consented or was pressured into consenting.

Physical indicators of sexual abuse include:

- Pain or itching in genital area
- STD
- Vaginal discharge
- Stomach pains
- Discomfort when walking or sitting
- Pregnancy

Behavioural indicators of sexual abuse include:

- Sudden changes in behaviour
- Advanced sexual knowledge
- Self harm
- Keeping 'secrets'
- Fear of certain people
- Talking about abuse

5.3 Emotional abuse

Emotional abuse is any type of abuse that involves the continual emotional mistreatment of a child or vulnerable adult. It's sometimes called psychological abuse. Emotional abuse can involve deliberately trying to scare, humiliate, isolate or ignore a child or vulnerable adult.

Emotional abuse is often a part of other kinds of abuse, which means it can be difficult to spot the signs or tell the difference, though it can also happen on its own.

Emotional abuse can include:

- Emotional ill treatment
- Bullying
- Deliberate rejection
- Lack of love and affection
- Constantly shouting at a child or vulnerable adult
- Threats and taunts
- Constant over protection
- Failure to put a stop to racism

In a work and/or volunteering context, emotional abuse may refer to constant criticism, bullying and unrealistic pressure.

Physical indicators of emotional abuse can include:

- Developmental delay
- Sudden speech disorder

Behavioural indicators of emotional abuse can include:

- Neurotic or paranoid behaviours
- Unable to take part in activities
- Fear of making mistakes
- Self harm or mutilation
- Fear of parents or carers being contacted

5.4 Neglect

Neglect occurs when a person fails to meet a child or vulnerable adult's basic needs such as warm clothing and provision of food.

It can also include:

- A child or vulnerable adult left constantly alone or unsupervised
- A lack of love, attention and affection
- Failure to ensure a child or vulnerable adult's safety

Neglect of vulnerable adults may occur through a carer's lack of knowledge or awareness, or through a decision not to act when they know the adult in their care needs help. It may impair the health or well-being of a vulnerable adult.

Physical indicators of neglect include:

- Constant hunger
- Unkempt state
- Weight loss, underweight or overweight
- Inappropriate dress

Behavioural indicators of neglect include:

- Missing appointments at doctors and hospital
- Truancy or lateness at school (in the case of children)
- Tiredness or fatigue
- Few friends
- Regularly alone or unsupervised

5.5 Self harm

Self-harm can take lots of physical forms, including cutting, burning, bruising, scratching, hair-pulling, poisoning and overdosing. There are many reasons why children and vulnerable adults try to hurt themselves. And once they start, it can become a compulsion. That's why it's so important to spot it as soon as possible and do everything you can to help.

Self-harm isn't usually a suicide attempt or a cry for attention. Instead, it's often a way for young people and vulnerable adults to release overwhelming emotions. It's a way of coping. So whatever the reason, it should be taken seriously.

Physical indicators of self-harm include:

- Cuts
- Bruises
- Burns
- Bald patches from pulling out hair

Behavioural indicators of self-harm include:

- Depression, tearfulness and low motivation
- Becoming withdrawn and isolated, for example wanting to be alone for long periods
- Unusual eating habits; sudden weight loss or gain
- Low self-esteem and self-blame
- Drinking or taking drugs
- Wearing clothing to conceal physical indicators of self-harm

5.6 Bullying and cyberbullying

Bullying is behaviour that hurts someone else – such as name calling, hitting, pushing, spreading rumours, threatening or undermining someone. It can happen anywhere – at school, at home or online. It's usually repeated over a long period of time and can hurt a child or vulnerable adult both physically and emotionally. Bullying that happens online, using social networks, games and mobile phones, is often called cyberbullying.

Physical indicators of bullying include:

- Belongings getting "lost" or damaged
- Physical injuries such as unexplained bruises
- Problems with eating or sleeping
- Spending significantly more/less time online

Behavioural indicators of bullying include:

- Being afraid to go to school (children) or to socialise/take part in activities (vulnerable adults), being mysteriously 'ill' each morning, or skipping school/activities
- Not doing as well at school (children) or in activities (vulnerable adults)
- Being nervous, losing confidence, or becoming distressed and withdrawn
- Asking for, or stealing, money (to give to a bully)
- Bullying others

5.7 Online grooming

Grooming is when someone builds an emotional connection with a child or vulnerable adult to gain their trust for the purposes of sexual abuse, sexual exploitation or trafficking.

Physical indicators of online grooming include:

- Unexplained physical injuries
- Changed physical appearance, for example loss of weight

Behavioural indicators of online grooming in children and vulnerable adults include:

- Being very secretive, including about what they are doing online
- Having older boyfriends or girlfriends
- Going to unusual places to meet friends
- Having new things such as clothes or mobile phones that they can't or won't explain
- Having access to drugs and alcohol

5.8 Child sexual exploitation

Child sexual exploitation is a type of sexual abuse. Children in exploitative situations and relationships receive something such as gifts, money or affection as a result of performing sexual activities or others performing sexual activities on them. Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation.

Physical indicators of child sexual exploitation include:

- Unexplained physical injuries
- Changed physical appearance, for example weight loss

Behavioural indicators of child sexual exploitation include:

- Going missing from home, care or education
- Being involved in abusive relationships, intimidated and fearful of certain people or situations
- Hanging out with groups of older people, or antisocial groups, or with other vulnerable peers
- Associating with other young people involved in sexual exploitation
- Having older boyfriends or girlfriends
- Spending time at places of concern, such as hotels or known brothel

6. Reporting suspected abuse

A disclosure may come from any child or vulnerable adult who has participated in Heal's work, an advocate acting on their behalf, such as a person with parental responsibility for the child/vulnerable adult or their solicitor, or from any other child or adult. A disclosure by or on behalf of a child or vulnerable adult may be made verbally, by phone, email or in writing to Heal's DSO or the designated trustee.

Staff or volunteers with a concern about the welfare of a child or vulnerable adult should complete a Heal Rewilding Safeguarding Report Form as soon as possible. The template for this form can be found at the end of this document. Completed forms and any written information regarding issues concerning individuals are kept on file in a safe locked place to ensure confidentiality.

Concerns about the welfare of a child or vulnerable adult should be reported directly to Heal's DSO using the Heal Rewilding Safeguarding Report template (see pages 14-17) who will then refer this information to the local social services department where necessary, who may then go to the police, or go directly to the police where appropriate. The parents or carers will be contacted as soon as possible following advice from the social services department or police.

In all cases, any suspicion that a child or vulnerable adult has been abused by a Heal member of staff or volunteer should be reported to the DSO, who will take the necessary steps to ensure the safety of the child or vulnerable adult in question and any other children or vulnerable adults who may be at risk, in line with the Discipline/Complaints Procedure outlined below.

If the DSO is the subject of the suspicion/allegation, the report must be made to the designated trustee.

If Heal staff are not available, allegations or disclosures can be reported to the police, social services or the NSPCC helpline (see 'Useful Contacts' section below).

7. Disciplinary and complaints procedures

Heal has a detailed plan regarding actions in the case of a safeguarding allegation and the disciplinary and complaints procedures pertaining to such a breach: **Procedure for Managing Safeguarding Allegations**. All concerns raised relating to the conduct of staff and volunteers in relation to safeguarding shall be considered as a matter of urgency and with protecting the interests of children and vulnerable adults the paramount consideration. Heal reserves the right to make referrals to such organisations as it sees fit, and in its absolute discretion. Any decisions about employment or status as a volunteer shall be made in a manner that is fair, lawful, and proportionate.

8. Information sharing

Everyone, including children and vulnerable adults, has a right to confidentiality (see Article 8 of the European Convention on Human Rights). The individual level of a child's maturity will affect their ability to express a view or take decisions about issues of confidentiality and sharing information, but Heal staff members and volunteers should always have regard to a child's right under the United Nations Convention on the Rights of the Child (UNCRC) to express their views freely in all matters affecting them, and to have those views given due weight in accordance with their age and maturity.

Sharing confidential information without consent will normally be justified in the public interest in the following circumstances:

- When there is evidence that the child is suffering or is at risk of suffering significant harm
- Where there is reasonable cause to believe that the child is suffering or is at risk of suffering significant harm
- To prevent serious crime, i.e. significant harm arising to children or adults, including through the prevention, detection and prosecution of serious crime

Vulnerable adults have a general right to independence, choice and self-determination including control over information about themselves. In the context of adult safeguarding these rights can be overridden in certain circumstances. Emergency or life-threatening situations may warrant the sharing of relevant information with the relevant emergency services without consent.

The law does not prevent the sharing of sensitive, personal information within organisations. If the information is confidential, but there is a safeguarding concern, sharing it may be justified.

The law does not prevent the sharing of sensitive, personal information between organisations where the public interest served outweighs the public interest served by protecting confidentiality – for example, where a serious crime may be prevented.

In order to protect vulnerable adults who lack capacity and enable them to take part, the following statutory principles set out in the Mental Capacity Act 2005 apply:

1. You must always assume a person has capacity unless it is proved otherwise
2. You must take all practicable steps to enable people to make their own decisions
3. You must not assume incapacity simply because someone makes an unwise decision
4. Always act, or decide, for a person without capacity in their best interests
5. Carefully consider actions to ensure the least restrictive option is taken

There are eight golden rules for information sharing as outlined below:

1. The protection of the child or vulnerable adult is the most important consideration in information sharing issues.
2. The Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.
3. Be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so
4. Seek advice if in any doubt, without disclosing the identity of the person where possible.
5. Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts of the case.
6. Consider safety and wellbeing: base your information sharing decisions on considerations of the safety and wellbeing of the person and others who may be affected by their actions.
7. Necessary, proportionate, relevant, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.
8. Keep a record of your decision and the reasons for it - whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

9. Whistle blowing

It is the responsibility of all trustees, staff, volunteers and individuals from organisations we work with to raise concerns about the attitudes or actions of Heal staff and volunteers.

If you find that any member of staff or volunteer is behaving in a way that does not adhere to our organisational policies, procedures or values, please report your concern by following the procedures outlined in Heal's **Whistle Blowing Policy**.

10. Useful contacts for reporting

- Child Exploitation Online Protection Command (CEOP COMMAND) reporting guide and form: <https://www.ceop.police.uk/Contact-Us/What-are-you-reporting/>
- Contact the relevant local authority's social care department to report any concerns about safeguarding of vulnerable adults
- Hourglass: for support where there are concerns that an older person is at risk of, experiencing or recovering from any form of abuse or neglect, call the 24/7 helpline on 0808 808 8141 or email helpline@wearehourglass.org
- In an emergency or if you feel that a child or vulnerable adult is in immediate danger call emergency services on 999 or the NSPCC Helpline on 0808 800 5000

11. Confirmation

- Information will be handled sensitively, telling only those who need to know and following all relevant data protection requirements
- Overall responsibility for this policy and its implementation lies with the Board of Trustees.

12. Report form template

Heal Rewilding Safety Safeguarding Report Form	
Reporting guidelines	
Do	Don't
Do listen to the child or vulnerable adult and write down everything they say	Don't make promises you can't keep
Do treat any allegations extremely seriously and act at all times towards the child or vulnerable adult as if you believe what they are saying	Don't interrogate the child or vulnerable adult or use leading questions - it is not your job to carry out an investigation, this will be up to the police and social services, who have experience in this
Do tell the child or vulnerable adult that they are right to tell you	Don't cast doubt on what the child or vulnerable adult has told you
Do reassure the child or vulnerable adult that they are not to blame	Don't interrupt or change the subject
Do be honest about your own position, who you have to tell and why	Don't say anything that makes the child or vulnerable adult feel responsible for the abuse
Do tell the child or vulnerable adult what you are doing and when, and keep them up to date with what is happening	Don't do nothing - make sure you tell the nominated DSO immediately - they will know how to follow this up and where to go for further advice
Do take further action as you may be the only person in a position to prevent future abuse	
Do tell the DSO immediately	
Your name:	
Your position:	
This report relates to a:	<input type="checkbox"/> Child
	<input type="checkbox"/> Vulnerable adult
Child/vulnerable adult's name:	
Child/vulnerable adult's address:	

Name and address of parents and/or carers:	
Location of incident(s) e.g. online chat, online meeting, in-person meeting:	
Date and time of incident(s):	
Your observations (describe your overall impression):	
What the child/vulnerable adult said (be as precise as you can about the words used):	
What you said (be as precise as you can about the words used): <i>Remember: do not lead the child/vulnerable adult - record actual details. Continue on separate sheet if necessary</i>	
Action taken so far:	
Information shared (and with whom):	

Signature:	
Print name:	
Date:	
For Designated Safeguarding Officer Only	
Police contacted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, name of name of person contacted:	
If yes, phone number of person contacted:	
Details of advice received from police:	
Local authority's social care contacted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, name of name of person contacted:	
If yes, phone number of person contacted:	
Details of advice received from local authority's social care	
Other organisation(s) contacted e.g. NSPCC?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If yes, name of name of person contacted:	
If yes, phone number of person contacted:	
Details of advice received from local authority's social care	
Additional notes	
Signature of DSO	
Date	