Policies & Procedures

## Children & Vulnerable Adults

## Safeguarding, Disclosure and Barring Policy

## 1. General Statement of Policy

Culture Health and Wellbeing Alliance CIC is firmly committed to the belief that all children and vulnerable adults have a fundamental right to be protected from harm and fully recognises its responsibility for child and adult protection. The safety and protection of all vulnerable people that the Culture Health and Wellbeing Alliance CIC supports is paramount and has priority over all other interests, unless life is at imminent risk. All

Culture Health and Wellbeing Alliance CIC’s employees, non-exec Directors, interns, volunteers, and contractors are required to comply with the procedures contained within this policy.

There are five main elements to the policy:

* ensuring that the organisation practices safe recruitment in checking the suitability of staff and volunteers to work with young people and vulnerable adults;
* raising awareness of child protection and vulnerable adult issues amongst staff, volunteers and contractors;
* developing and implementing procedures for identifying and reporting cases or suspected cases of child or adult abuse;
* supporting the child or adult who has been abused;
* establishing a safe environment in which children and adults can develop and grow, where they are able to talk and be listened to.

## 2. Definitions

### 2.1 Definitions

The following definitions apply throughout the Safeguarding Policy and associated procedures:

#### ‘Child’ or ‘Children’

The Children Act 1989 defined a child as a person under eighteen, for most purposes. The emphasis now is on activities and there are new definitions which scale back the breadth of regulated activities.

Regulated activity relating to children covers:

1. Unsupervised activities: teaching, training, instructing, caring for or supervising children, or providing advice/guidance on well-being, or driving a vehicle only for children.
2. Working for a limited range of establishments (‘specified places’), with opportunity for contact. For example: schools, children’s homes, childcare premises. Not work by supervised volunteers.

**Work under (i) or (ii) is regulated activity only if done regularly.**

1. Relevant personal care, for example washing or dressing; or health care by or supervised by a professional.
2. Registered child-minding; and foster-care.

#### ‘Adults’

The definition of regulated activity relating to adults places the emphasis on the kind of activity carried out for any adult who requires them rather than on any specific groups of people or vulnerabilities. These activities cover:

1. Provision of healthcare
2. Provision of personal care
3. Providing social work
4. Assistance with cash, bills, shopping etc.
5. Assistance with conduct of personal affairs
6. Conveying e.g. to receive healthcare

#### ‘Young Person’

The term ‘young person’ will include those aged between 5 and 24 years. For the purposes of this policy, a young person aged under 18 years is regarded as a child and a vulnerable adult includes all people aged 18 and over subject to the criteria of the Protection of Vulnerable Adults Scheme (PoVA 2004) Scheme.

#### ‘Vulnerable Adult’ or ‘Vulnerable Adults’

The Protection of Vulnerable Adults Scheme (PoVA 2004) defined a vulnerable adult as a person aged 18 or over who has a condition of the following type:

* A substantial learning or physical disability;
* A physical or mental illness or mental disorder, chronic or otherwise, including addiction to alcohol or drugs;
* A significant reduction in physical or mental capacity.

We note that power imbalances can create vulnerability – for example, CHWA as an employer will have a position of power over employees or contractors; we should be aware of potential abuses of this position of power in our own organisation and others that we may work with.

We also acknowledge 'temporary’ vulnerability which may be caused by life experiences, including for example, bereavement or changes in mental or physical health status, or caring responsibilities.

### 2.2 Forms of abuse

The Children Act 1989 defines four types of abuse: physical, emotional, sexual and neglect. These categories of abuse apply and will be relevant to vulnerable adults as well as to children with whom the Culture, Health and Wellbeing Alliance CIC has contact as part of its activities with people of all ages.

#### Physical Abuse

Physical abuse may take many forms e.g. hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating.

It may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child or vulnerable adult. This unusual and potentially dangerous form of abuse is now described as fabricated or induced illness.

#### Emotional Abuse

Emotional abuse is continual emotional ill treatment causing severe and persistent effects on the child or vulnerable adult’s emotional development and may involve:

* conveying the message that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person;
* imposing developmentally inappropriate expectations;
* causing the child or vulnerable adult to feel frightened or in danger – e.g. witnessing domestic violence;
* exploitation or corruption of children, young people or vulnerable adults.

Some level of emotional abuse is involved in most types of ill treatment, although emotional abuse may occur alone.

#### Sexual Abuse

Sexual abuse involves forcing or enticing a child or vulnerable adult to take part in sexual activities, whether or not they are aware of what is happening, and includes penetrative and non-penetrative acts.

It may also include non-contact activities such as looking at, or being involved in, the production of sexually explicit materials, watching sexual activities or encouraging children or vulnerable adults to behave in sexually inappropriate ways.

#### Neglect

Neglect involves the persistent failure to meet basic physical and/or psychological needs, which is likely to result in serious impairment of the neglected person’s health and development. It may involve failure to provide adequate food, shelter or clothing, failure to protect from physical harm or danger or failure to ensure access to appropriate medical care or treatment. It may also include neglect of basic emotional needs.

Staff should also be aware of other factors which influence these forms of abuse, such as racial or homophobic abuse.

### 2.3 Status of Policy

This policy applies to all employees, non-exec Directors, interns, volunteers, and contractors. Its purpose is to protect the personal safety of all children, young people and vulnerable adults using the facilities, resources and activities provided by the Culture, Health and Wellbeing Alliance CIC by actively promoting awareness, good practice and sound procedures. The Directors will review this policy regularly and as informed by risk assessments relating to all activities of the Culture, Health and Wellbeing Alliance CIC.

## 3. Procedures

### 3.1 Personnel/Recruitment

All employees, non-exec Directors, interns, volunteers, and contractors working in direct or indirect contact with children and vulnerable adults as part of the organisation’s activities or as part of the environment where the activities take place, are required to provide references that the Culture, Health and Wellbeing Alliance CIC deems appropriate, which are always verified.

**All paid and unpaid staff involved in regulated or intensive contact with vulnerable people as part of their work for the Culture, Health and Wellbeing Alliance CIC will be subject to the Disclosure and Barring procedures of the Disclosure and Barring Service (DBS).**

If the job or role is eligible then a DBS ‘Standard’, ‘Enhanced’ or ‘Enhanced check with list checks’ as appropriate check will be carried out.

No new employees, non-exec Directors, interns, volunteers, and contractors should start employment/volunteer work until references have been verified and, where one is required, DBS checks received. If this is not possible then new employees, directors and volunteers must not be involved with regulated activities as set out in Part 2 until references and DBS checks are completed. Details of the checks to be carried out are set out in Part 5.

**All employees, non-exec Directors, interns, volunteers, and contractors working in direct or indirect contact with children and vulnerable adults as part of the organisation’s activities or as part of the environment where the activities take place,** **will receive, and will be required to read and sign this Safeguarding Disclosure and Barring Policy.**

All employees, non-exec Directors, interns, volunteers, and contractors will receive regular support in their work with children and vulnerable adults.

### 3.2 Responsibilities

All employees, non-exec Directors, interns, volunteers, and contractors working on behalf of the Culture, Health and Wellbeing Alliance CIC have a responsibility for the welfare of the children and vulnerable adults that they work with, in relation to their employment.

All employees, non-exec Directors, interns, volunteers, and contractors have a duty to ensure that any suspected incident, allegation or other manifestation relating to child and vulnerable adult protection is reported using the reporting procedures detailed in this policy.

**The Culture, Health and Wellbeing Alliance CIC has a Designated (named) Safeguarding Officer and a nominated deputy.**

The Executive Director, or their deputy in his or her absence (or if there isn’t a paid worker post, the Chair of the Board) must also be informed of issues which arise under this policy. The Designated Safeguarding Officer and Deputy Safeguarding Officer are responsible for child and vulnerable adults’ protection and the implementation of this policy. It is the responsibility of the Designated Safeguarding Officer to take appropriate action following any expression of concern and make referrals to the appropriate agencies.

### 3.2.1 Designated Safeguarding Officers

The Designated Safeguarding Officers will attend training as appropriate and make referrals to external agencies. Other aspects of their role include:

* obtaining information from employees, non-exec Directors, interns, volunteers, contractors, children, parents or carers who have concerns relating to the protection of children or vulnerable adults and to record this information;
* assessing information quickly and carefully and asking for further information where appropriate;
* consulting with statutory child and vulnerable protection agencies e.g. the local social services department and police, to clarify doubts or worries;
* making referrals to Social Services, the Disclosure and Barring Service or the police, without delay.

**All employees will be made aware of the named Designated Safeguarding Officers and how to contact them.** Contact details also appear in Part 12 of this policy. The Designated Safeguarding Officers have contact telephone numbers for the local Area Safeguarding Boards and other statutory agencies.

### 3.3 Reporting Procedures: What to do if you suspect someone is being abused

All employees, non-exec Directors, interns, volunteers, and contractors working in direct or indirect contact with children and vulnerable adults as part of the organisation’s activities or as part of the environment where the activities take place, must be alert to the signs of abuse. Anyone who suspects that abuse is taking place in this environment or to whom a child or vulnerable adult discloses issues relating to safeguarding should contact the Designated Safeguarding Officer immediately.

Any suspicion or allegation must be reported as soon as possible on the day of the occurrence to the Designated Safeguarding Officer. Disclosure or evidence for concern may occur in a number of ways including a comment made by a child or adult, physical evidence such as bruising, a change in behaviour, or inappropriate behaviour or knowledge.

It is the responsibility of the Designated Safeguarding Officer to liaise with other relevant agencies where necessary and seek clarification from the Safeguarding and Protection Unit of the local Constabulary if there is any concern about the validity of any allegation.

Any suspicion or allegation of abuse must be recorded by the observer/s on the appropriate incident reporting form. This form must be kept strictly confidential and stored securely following the Data Protection Procedures. All employees and volunteers are instructed to report the disclosure or discovery of abuse or alleged abuse directly to their Line Manager who will inform the Designated Safeguarding Officer.

All employees, non-exec Directors, interns, volunteers, and contractors will report such incidents directly to the Designated Safeguarding Officer.

All stages of the reporting procedure must be documented, marked CONFIDENTIAL and stored securely following the procedures laid out in the Data Protection Policy.

### 3.4 Allegations against employees, directors or volunteers

When any form of complaint is made against an employee or volunteer, it must be taken seriously and the complaint should initially be dealt with by the Executive Director or the most senior staff member on site at the time the complaint is made. This staff member must report the complaint to the designated Safeguarding Officer immediately, giving details of the circumstances. If the designated Safeguarding Officer is unavailable (or is the person against whom a complaint has been made) the Chair or in their absence another non-exec Director must be informed immediately and they will deal with the complaint and ensure that the designated Safeguarding Officer is informed

If any of the above (Chair, other Director, Executive Director or the designated Safeguarding Officer) is the person against whom a complaint has been made they will be excluded from the processing of the complaint.

The Executive Director or the Chair/non-exec Director will attend the site of the allegation to gain an initial account of what has occurred from all relevant parties, including the person against whom the allegation has been made. If this is not possible, contact will be made by telephone.

The Executive Director or the Chair/non-exec Director will have the right to suspend from duty and/or the premises, any person who is a party to the allegation until a full investigation has been made in line with the Culture, Health and Wellbeing Alliance CIC’s Disciplinary Procedures (available here https://www.culturehealthandwellbeing.org.uk/policies-procedures).

This action does not prejudge the outcome of the investigation of the complaint or imply in any way that the person suspended is responsible for, or is to blame for, any action leading up to the complaint. The purpose of any such suspension is to enable a full and proper investigation to be carried out in a totally professional and objective manner.

It is the responsibility of the Safeguarding Officer to make the decision as to whether to inform Social Services, NHS Community Mental Health Team (CMHT) and/or the Safeguarding Unit of the local Constabulary, depending on the nature of the allegation. They may also need to follow their legal duty to report the case to the Disclosure and Barring Service (DBS) (See 7 below).

The Culture, Health and Wellbeing Alliance CIC will co-operate fully with the Police, Social Services, the NHS and all other parties involved.

The Executive Director or their nominated deputy will ensure that the Chair of the Culture, Health and Wellbeing Alliance CIC, or in their absence the Board are briefed. An agreed statement will be prepared for the purpose of accurate communication with external sources and for the protection of the legal position of all parties involved.

The Executive Director or his/her nominated deputy will make a full written report of the incident and the actions taken. This report will be stored securely following the procedures detailed in the Data Protection Policy.

### 3.4.1 Resignation

If, during the course of an investigation relating to safeguarding, an employee, non-exec Director, volunteer, intern or contractor tenders their resignation, or ceases to provide their services, the Culture, Health and Wellbeing Alliance CIC is not prevented from following up an allegation in accordance with these procedures. Every effort will be made to reach a conclusion, including in cases where the person concerned refuses to co-operate with the process.

See also:

PART 7: Reporting cases to the Disclosure and Barring Service, and the Culture, Health and Wellbeing Alliance CIC’s:

1. Grievance, Whistleblowing and Disciplinary Procedure
2. Complaints, Comments and Compliments Procedure

Available at: https://www.culturehealthandwellbeing.org.uk/policies-procedures

## 4. Confidentiality

All employees, non-exec Directors, interns, volunteers, and contractors must work under the principle that confidentiality is extremely important and plays a large part in much of any work carried out with children and vulnerable adults. However, under no circumstances will any individual in the employment of the Culture, Health and Wellbeing Alliance CIC, or acting as a volunteer, intern or non-exec Director, keep confidential any information that raises concerns about the safety and welfare of a child or vulnerable adult. This statement relating to confidentiality will be made known to all who access any provision of the Culture, Health and Wellbeing Alliance CIC.

## 5. Recruitment

The Culture, Health and Wellbeing Alliance CIC undertakes to ensure employees, non-exec Directors, interns, volunteers, and contractors are suitable to work in an environment where they will encounter children and vulnerable adults as part of the Organisation's work. It also reserves the right to refuse to employ staff, volunteers or interns whom it has a reasonable belief may pose a risk to children and vulnerable adults.

Culture Health and Wellbeing Alliance CIC has systems in place to prevent unsuitable people from working with children or vulnerable adults and to promote safe practice. These systems apply to all new employees, non-exec Directors, interns, volunteers, and contractors and require the following checks to be made on appointment:

* A minimum of two references, satisfactory to Culture Health and Wellbeing Alliance CIC, one of which should be from a previous employer;
* Documentary evidence checks of identity, nationality, residency and “right to work” status;
* DBS Check at the level relevant for the job/role;
* Documentary evidence of qualifications;
* Satisfactory completion of the probationary period.

## 6. The Disclosure and Barring Scheme

The Protection of Freedoms Act 2012 places a duty on the Culture, Health and Wellbeing Alliance CIC to undertake an Enhanced check with list checks with the Disclosure and Barring Service for all employees, non-exec Directors, interns, volunteers, and contractors supervising or carrying out regulated activity with children or vulnerable adults.

The Culture, Health and Wellbeing Alliance CIC carries out appropriate DBS checks on all staff whose jobs or roles are eligible for one.

## 7. Disclosure and Barring Service (DBS)

The Culture, Health and Wellbeing Alliance CIC has a statutory duty to make reports and provide relevant information to the DBS where there are grounds for believing, following an investigation, that an individual is unsuitable to work with children or adults in certain regulated activities, or may have committed misconduct. The responsibility for reporting cases to the DBS lies with the Designated Safeguarding Officer.

The DBS make barring decisions for Section 142 of the Education Act (formally known as List 99), The Protection of Children Act List (PoCA) and the Protection of Vulnerable Adults List (PoVA) and the Protection of Freedoms Act 2012. This has now been combined as part of the Vetting and Barring Procedures of the DBS.

## 8. Supporting Staff

All staff and workers who work with children and vulnerable adults must undertake training on the subject of safeguarding. This Policy will be issued to all new staff as part of their induction. The Culture Health and Wellbeing Alliance CIC is aware that safeguarding cases can be distressing and that both paid and unpaid staff who have been involved may find it helpful to talk about their experiences, in confidence, with the Designated Safeguarding Officer or with a trained counsellor. Staff wishing to be referred for counselling should contact their line manager or the Designated Safeguarding Officer.

### 8.2 Whistleblowing

Any employee, non-exec Director, intern, volunteer, or contractor who raises an issue where they believe the employer, a fellow employee, non-exec Director or any volunteer or intern is acting in a way which is unlawful or falls below proper standards or contrary to this policy are protected by the Public Disclosure Act 1998, provided they comply with statutory procedures.

Any employee, non-exec Director, intern, volunteer, or contractor looking at whistleblowing can do so by using the grievance procedure (see https://www.culturehealthandwellbeing.org.uk/policies-procedures) and in the first instance should discuss it with their Line Manager, the Chair of the Board or the Safeguarding Officer.

Any volunteer with such concerns must raise it with the person responsible for their management or the Chair of the Board. Anyone involved in whistleblowing will be supported and the Association will ensure that proper procedures are followed.

## 9. Equal Opportunities

### 9.1 Equality of Opportunities

As part of the community served by the Culture, Health and Wellbeing Alliance CIC, all children and vulnerable adults have the right to be safeguarded from harm and exploitation whatever their race, religion, gender, sexuality, age or disability. This policy relates to the Organisation’s legal obligation to protect children and vulnerable adults who are suffering forms of abuse as defined in the Children Act 1989 and Safeguarding Vulnerable Groups Act 2006 and is therefore in line with the Culture, Health and Wellbeing Alliance CIC’s equality and diversity policies (see https://www.culturehealthandwellbeing.org.uk/policies-procedures).

## 10. Operational Practices Policy

### 10.1 The use of cameras, videos, or camera mobile phones

The Culture, Health and Wellbeing Alliance CIC may take photographs of children and young people participating in activities and events. At all times written permission from parents/guardians/carers will be obtained **before** photographs are taken.

The Culture, Health and Wellbeing Alliance CIC reserves the right to prohibit the use of cameras, videos and mobile telephones with picture-taking capacity at any events or gatherings it organises. This includes requesting others attending events or gatherings organised by the Culture, Health & Wellbeing Alliance CIC not to take photographs or share pictures of other participants.

### 10.2 Attending events

All children and vulnerable adults attending a Culture Health and Wellbeing Alliance CIC organised activity must be accompanied by a parent/guardian. This applies to all Culture Health and Wellbeing Alliance CIC organised activities, regardless of their location.

### 10.3 Outside Organisations

Any club, society, organisation or individual undertaking activities on behalf of the Culture, Health and Wellbeing Alliance CIC involving children aged under 18 and vulnerable adults will be required to either adopt this Culture, Health and Wellbeing Alliance CIC Safeguarding Policy or show proof that they have their own robust policies.

Any club, society, organisation or individual working with children and vulnerable adults on behalf of the Culture, Health and Wellbeing Alliance CIC will be subject to random spot checks periodically by the Culture, Health and Wellbeing Alliance CIC employees to ensure policies and procedures are in place and being implemented.

## 11. Contacting the Designated Safeguarding Officer

#### Designated Safeguarding Officer

Name: Deborah Munt

Tel: 07595 577 359

Email: deborah.munt@googlemail.com

#### Deputy Designated Safeguarding Officer

Name: Victoria Hume

Tel: 07511 972 172

Email: victoria@culturehealthandwellbeing.org.uk

All employees, non-exec Directors, interns, volunteers, and contractors who are not the Designated Safeguarding Officer, but who are approached with concerns about a child or vulnerable adult, must bring the concerns raised to the attention of the Designated Safeguarding Officer, his/her deputy or their line manager immediately.

All employees, non-exec Directors, interns, volunteers, and contractors to whom a vulnerable person discloses issues that may be related to safeguarding must keep written notes of concerns. The staff member must also complete an Incident Form immediately after the issues have been noted by them or reported to them.

## 12. Review and Maintenance of Policy

**The Culture, Health and Wellbeing Alliance CIC undertakes to review this policy, its implementation and effectiveness annually.** The views of all employees and volunteers shall be sought where necessary and reflected in the review process.

Any new legislation or developments in existing legislation will be considered as and when required and the policy will be updated to reflect these developments.

This policy was approved and agreed by the Board of Directors on the date shown below.

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Signed:

Name (please print): Matt Walsh

Position: Co-Chair of Board of Directors

Date: 8 December 2022

Review dates: Every two years from the date above

Organisation name: Culture, Health & Wellbeing Alliance CIC

Company Number: 12359172

**Appendix**

**Template for a risk assessment**

**1. Name of activity/event:**

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| --- |
|  |

**2. Nature, length and frequency of contact:** (Insert text describing the type of activity, length of time involved and the frequency e.g. lunch club, 1.5 hours once a fortnight.

|  |
| --- |
|  |

**3. Safeguarding Risk Rating:**

**High**: Legal Action is being taken and Protection Plan is being implemented

**Moderate**: Safeguarding Protection Plan is in place

**Low**: Safeguarding Issue has been addressed

**None**: No Safeguarding Action is taking place

**4. Contact**

| **Contact Name of Employee/Volunteer** | **Nature of Contact** | **Length** | **Type of Contact** | **Risk** |
| --- | --- | --- | --- | --- |
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**5. Health and Safety Issues**

| **Hazard** | **Risk** | **Action** | **Alternative working practice** |
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**6. Any children or vulnerable adults particularly vulnerable:**

| **Hazard** | **Risk** | **Action** |
| --- | --- | --- |
|  |  |  |
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**7. Identified children or vulnerable adults with particular needs (medical, disability, behavioural)**

| **Hazard** | **Risk** | **Action** |
| --- | --- | --- |
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**8. Any additional requirements for DBS check?**

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| --- |
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**9. Safe use of ICT**

|  |  |  |
| --- | --- | --- |
| **Hazard** | **Risk** | **Action** |
|  |  |  |
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|  |  |
| --- | --- |
| **10. Risk assessment carried out by:** (insert name) |  |
| **Date completed:** |  |
| **Signed off by Safeguarding Officer:** (insert name) |  |
| **Signature of Safeguarding Officer:** |  |

## Guidelines for Responding to an Allegation of Abuse

When a Safeguarding issue is raised it is important to record what is said or seen and what action was taken. This record or any other written record should be kept in a locked cabinet. Access should be limited to only:

* the person who has completed the form
* the designated Safeguarding Officer
* The Executive Director or the Chair of the Board

The child/vulnerable adult can be shown this record but discretion should be used. Their permission should be sought before showing it to the parent/guardian/carer.

It may be shown to the police and/or social services, and could possibly be used in court although this is rare.

### General Points

* Keep calm – do not appear shocked or disgusted
* Accept what the child/vulnerable adult says without passing judgement (however unlikely the disclosure may sound)
* Look directly at the child/vulnerable adult
* Be honest
* Let them know you will need to tell someone else, don’t promise confidentiality
* Be aware the child/vulnerable adult may have been threatened and fear reprisals for having spoken to you
* Never push for information or question the child/vulnerable adult as this can undermine any subsequent criminal investigation. If at any point a child/vulnerable adult decides not to continue, accept that and let them know that you are ready to listen should they wish to continue at any time.

### Helpful things to say or show

* Show acceptance of what the child/vulnerable adult says
* “I take what you are saying very seriously”
* “I am pleased that you have told me. Thank you for telling me”
* If appropriate,

“It isn’t your fault and you are not to blame at all”

“I am sorry that happened to you”

“I will help you”

### Things not to say

* “Why didn’t you say something before?”
* “I really can’t believe it”
* “Are you sure this has happened?”
* “Why?” “Where?” “When?” “Who?” “What?” “How?”
* Don’t make false promises to the child/vulnerable adult – like confidentiality – be honest now, any lies will be further abuse and betrayal
* Never make statements such as ‘I am shocked!’ or ‘don’t tell anyone else’.

### Concluding the conversation

* Reassure the child/vulnerable adult that they were right to tell you
* Let the child know what you are going to do next and tell them that you will let them know what is happening at each stage.

The following is a template that you can use:

**Record of Concerns**

| Name of Child/Vulnerable Adult: | |
| --- | --- |
| Address: | |
| Telephone Nos: | |
| Parent/Carers details:  Name(s): | Telephone No(s): |
| What is said to have happened or what was seen? | |
| When and where did it occur? | |
| Who else, if anyone, was involved and how? | |
| What was said by those involved? | |
| Were there any obvious signs e.g., bruising, bleeding changed behaviour? | |
| Was the child/vulnerable adult able to say what happened, if so, how did they describe it? | |
| Who has been told about it and when? | |
| Do the parents/carers know? | |

Signed ………………………………………………………………

Date …………………….