Recognising and responding to low level safeguarding concerns

1. Purpose

RNIB believes that protecting our customers from the risk of and actual harm is paramount. The following procedure has been developed to ensure that we respond in a consistent way to all low level safeguarding concerns, these are concerns that do not meet local authority thresholds for referral to external social care safeguarding teams and must be followed at all times.

It should be noted that authorities across the countries have developed differing thresholds for reporting safeguarding concerns therefore managers must refer to local multi-agency procedures and thresholds **before** deciding to identify a concern as low level. If there is any doubt a referral **must be made before following this procedure.**

2. Scope

This procedure outlines common responsibilities and arrangements for everyone who works with or for RNIB.

It applies to all staff, volunteers and contractors

3. Review

This procedure is due for review every 12 months or following any legislative changes, whichever comes first. This means it expires on 5 October 2018.

The procedure will be reviewed by the Safeguarding and Compliance Manager. The final draft of the procedure will then go to the Executive Board representative for safeguarding, Director of Care (or Director of Services as an alternate), for approval.

4. Recognising low level safeguarding concerns

A low level safeguarding concern is any incident which harms a person or puts a person at risk of harm that does not meet the threshold of significant harm set down by external agencies.

The following are examples of incidents and behaviours which may indicate that there is a safeguarding concern.

- Falls
- Pressure sores
- Poor nutritional care
- Lack of social inclusion
- Failure to follow safe moving and handling procedures
- Failure to follow safeguarding procedures
- Failure to maintain accurate and complete records of finances
- Medication not administered, wrong dose, time or medication
- Staff / volunteers forming inappropriate relationships with people who use our services
- Failure to follow care /support / behaviour management plans
- Inappropriate use of IT systems to access sexually explicit or exploitative material
- Any deprivation or restriction of liberty that is not authorised
- Rough treatment, being rushed, shouted at or ignored
- Incidences of bullying or aggression between people who use our services
- Repeated minor injuries such as scratches

5. Immediate action to safeguard people

The Designated Safeguarding Lead in your service must carry out enquiries immediately to determine if any action should be taken before the formal investigation to safeguard people and ensure that the action is taken.

6. Reporting of safeguarding incidents / concerns

All safeguarding concerns must be reported immediately to the Designated Safeguarding Lead in your service. This will normally

be the person in charge of your service. If you do not have a Designated Safeguarding Lead you should report concerns to debbie.lynch@rnib.org.uk

The only exception to this reporting is when shared care arrangements exist. In this instance incidents / concerns should be reported to the responsible lead organisation.

If you feel you cannot report your concern to the Designated Safeguarding Lead then you can email the Safeguarding and Compliance Manager at safeguarding@rnib.org.uk

Designated Safeguarding Leads must decide at this point if there is a requirement to report concerns to external regulators, families, social workers, etc and make referrals as required.

An RNIB accident / incident form MUST be completed by the service for all safeguarding concerns / incidents. If you do not have access to this you must email safeguarding@rnib.org.uk

In additional a chronology of events should be created. This will ensure that there is one overarching, easily accessible record of all the actions taken in relation to an incident. This record should include what action was taken, when and by whom and should be updated regularly until the point the incident is closed off.

7. Identifying an investigating officer

The investigating officer will normally be identified within the service where the incident / concern have occurred. However, this may not always be appropriate depending on the nature of the incident / concern. In this instance the Head of Service will decide who should carry out the investigation.

8. Investigation

All safeguarding incidents / concerns must be investigated fully, this is to ensure that any action to prevent reoccurrence can be identified and carried out.

If the incident / concern involve a member of staff or a volunteer, the human resources team or the group volunteering team, as applicable, must be informed before an investigation begins.

If the incident / concern involve a Trustee or Governor the Clerk of Trustees or the Clerk of Governors must be informed before an investigation begins.

The level of investigation required will vary depending on the incident / concern. For example, most falls are investigated as they occur and the results of that investigation entered onto the RNIB accident/incident form.

Some concerns / incidents will require a more formal investigation, for example if an allegation is made against a member of staff, an incident has resulted in a serious injury or safeguarding procedures have been breached.

At the point of incident / concern the Designated Safeguarding Lead will decide what level of investigation is required.

A written investigation report must be completed for all reported safeguarding incidents / concern.

9. Investigation timescales

All safeguarding investigations should be completed within 20 working days from receipt of the initial concern.

In the case of disciplinary investigations the disciplining officer should have received the report within 25 working days from receipt of the initial concern.

The disciplining officer should ensure that people are aware of the outcome of the investigation within 30 working days from receipt of the initial concern.

In exceptional circumstances where it is not possible to meet these standards all parties involved must be informed of the reason for delay and the revised timescales.

10. Action following conclusion of investigation

Managers must inform all relevant parties of the outcome as applicable; this may include external regulators, families, local authorities etc.

Copies of all investigation records must be sent to the Safeguarding and Compliance manager.

Managers must ensure that any action required arising out of investigations is carried out within the timescales identified.

If a member of staff, volunteer, governor or trustee is dismissed or removed from regulated activity managers must consider if there is a requirement to make a referral to the Independent Safeguarding Authority, Protecting Vulnerable Groups Scheme or other professional bodies such as the nursing and midwifery council.

Where managers decide that a referral is necessary they should ensure that the relevant paperwork is completed and signed by their line manager.

A copy of all referral paperwork must be sent to the Safeguarding and Compliance Manager.

11. Internal reporting and monitoring

All incidents / concerns will be logged on the safeguarding incident log and will be shared with Heads of Services where incidents have occurred.

The Executive Board representative for safeguarding, the Director of Care (or Director of Services as an alternate), will routinely review incidents.

An analysis of trends will be completed on all safeguarding incidents / concerns and the findings will be reported at Board level across the Group at least once per year.

12. Additional Information

- Safeguarding child protection procedure
- Safeguarding adult protection procedure
- Safeguarding Prevention Standards
- Safeguarding Policy
- Mental Capacity Act and Deprivation of Liberty Policy

13. Version control

The table below shows the history of the document:

Version	Review date
1	9 March 2015
2	18 October 2016
3	21 December 2016
4	21 August 2017
5	5 Oct 2017
6	5 April 2018
7	19 April 2018