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Index 20: SAFEGUARDING POLICY V 1.2

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John Taylor
Group Director

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Safeguarding Definition

Safeguarding means protecting people’s Health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect; and describes the broader preventative and precautionary approach to planning and procedures that are necessary to be in place to protect children, young people and adults.

Child Protection focuses on recognising abuse and neglect and acting on it, whereas Safeguarding looks at keeping young people and vulnerable groups safe from a much wider range of potential harmful influences and looks at preventative action, not just a reaction.

APT Health and Safety Training Solutions Ltd’s Prevent Agenda

APT Health and Safety Training Solutions Ltd acknowledges the importance of shared responsibility for the implementation of our Prevent Agenda and for the wellbeing of all our learners and staff. APT Health and Safety Training Solutions Ltd’s policies and procedures relating to safeguarding include and reflect the need to protect vulnerable individuals from the growing threat of radicalisation and being drawn into terrorism.

Note

It is important to note that employees of APT Health and Safety Training Solutions Ltd are not responsible for deciding whether learners have been abused or are being groomed/radicalised. Employees are responsible for recording and reporting any concerns to a **Designated Safeguarding Officer** (as specified within this policy) in a timely manner to ensure we are working together to safeguard learners under arrangements in place within this Policy and set down by the Local Safeguarding Children Board (LSCB); and in consideration of the Government’s Counter-Terrorism Strategy (CONTEST), in particular the multi-agency intervention process referred to as ‘**Channel**’.

In the absence of a **Designated Safeguarding Officer**, concerns should be raised with a **APT Health and Safety Training Solutions Ltd Director (as listed in section 2)**.

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1.0 General Statement of Policy

1.1 Policy Statement

APT Health and Safety Training Solutions Ltd believes that it is always unacceptable for a learner to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all learners by commitment to practices that protect them.

APT Health and Safety Training Solutions Ltd recognises that:

- The welfare of the learner is paramount.
- All learners have a right to feel safe and should be protected whilst using APT Health and Safety Training Solutions Ltd's services and APT Health and Safety Training Solutions Ltd has an obligation to ensure this safety and protection.
- All learners, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have the right to equal protection from all types of harm or abuse.
- Safeguarding is everyone's responsibility,
- Working in partnership with learners and with other agencies is essential in promoting a safe learning environment and engaging the learner in 'early help' wherever possible.

APT Health and Safety Training Solutions Ltd will seek to safeguard learners and staff by:

- Providing a safe environment for individuals to learn in, and for staff to work in.
- Appointing a Designated Safeguarding Officer (who acts as Safeguarding Lead).
- Ensuring there is an appropriate Safeguarding Policy and procedure in place.
- Providing training to support staff to recognise signs of neglect and abuse (including risk of radicalisation); and understand how to raise concerns or respond to disclosures.
- Adopting safeguarding guidelines through procedures and a code of conduct for staff and volunteers, as well as learners.
- Adopting safe staff recruiting practices.
- Sharing information about concerns with agencies who need it, and involving the individual and their parents/carers appropriately.
- Valuing individuals, listening to them, and respecting them.
- Acting in the best interests of the individual.

1.2 Policy Purpose

This policy sets out APT Health and Safety Training Solutions Ltd' commitment to safeguard our learners (and staff) and provides a clear framework to fulfil that commitment in an environment where we promote safety and welfare of all. It details how to record and report potential abuse (including physical, sexual and emotional) and neglect. It sets out our approach to ensuring safe staff recruitment practices, staff training, and how to deal with allegations of abuse. The Policy applies to all learners and staff, including senior managers and the board of directors, volunteers, agency staff, or anyone working on behalf of APT Health and Safety Training Solutions Ltd.

1.3 Policy Development.

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APT Health and Safety Training Solutions Ltd’s Designated Safeguarding Officers, supported by the all staff, have been charged with developing and updating the Safeguarding Policy (and associated procedures) and to positively promote the arrangements contained within them throughout the organisation. Tutors act as Safeguarding Champions and assist in development of these procedures and training employees in the application of them.

APT Health and Safety Training Solutions Ltd has adopted a learner-centred and co-ordinated approach to Safeguarding and is committed to fulfilling its responsibilities and promoting the welfare of all staff and learners, and ensuring that we have a culture of vigilance that minimises any risk of harm. Our aim is to maintain an attitude of ‘it could happen here’ when shaping Policy and agreeing procedures.

The term ‘learners’ is used throughout this Policy to cover all ages of individuals as APT Health and Safety Training Solutions Ltd works with post-16 learners who have left full-time education, as well as young people still in full-time education (through partnership arrangements). The policy pays due regard to the following:

Working Together to Safeguard Children 2018, which sets out the statutory functions of the local authority under the 1989 and 2004 Childrens Acts (recognising that we are an important part of the local authorities’ wider safeguarding systems).

Keeping Children Safe in Education 2022, statutory guidance from the Department of Education, including, *What to Do if You are Worried a Child is being Abused*.

Safeguarding Vulnerable Groups Act 2006 and the Protection of Freedoms Act 2012, which aims to help avoid harm, or risk of harm, by preventing people who are deemed unsuitable to work with children and vulnerable adults from gaining access to them through their work.

Counter-Terrorism and Security Act 2015, which under section 26 requires APT Health and Safety Training Solutions Ltd, as a Training Provider, to have due regard to the need to prevent people from being drawn into terrorism, along with *Revised Prevent Duty Guidance: for England and Wales*, and *Prevent Duty Guidance: for further education institutions in England and Wales*.

Ofsted’s *Education Inspection Framework*

1.4 Policy Review

The Policy will be reviewed on an on-going basis in accordance with changes to legislation. The formal review and on-going development of the policy will be led by the Senior Designated Safeguarding Officer and approved by the Group Director.

1.5 Policy Distribution

A copy of this policy will be available for Staff, Learners, Employers and Stakeholders on our website <https://www.apthealthandsafety.co.uk/>

This policy is distributed at induction with each party.

2.0 Roles and Responsibilities

2.1 APT Health and Safety Training Solutions Ltd Board

The Board recognises and supports APT Health and Safety Training Solutions Ltd’s Safeguarding responsibilities and will engage with external partners as appropriate to support APT Health and Safety Training Solutions Ltd to meet its safeguarding obligations and aims. Members will receive updates on APT Health and Safety Training Solutions Ltd’s arrangements from the Group Director. The Board will appoint a ‘Board Safeguarding Lead’ to support the Group Director and Designated Safeguarding Officer in exercising their responsibilities and will undertake training on Safeguarding as appropriate.

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2.2 Group Director

Has overall and final responsibility for Safeguarding in the company (supported by the Board) and will deal with issues or concerns in the absence of a Designated Safeguarding Officer.

2.3 Apprenticeship Director

Authorised to deal with issues or concerns, in the absence of a Designated Safeguarding Officer.

2.4 Senior Designated Safeguarding Officer (DSO)

- Leads on Safeguarding for APT Health and Safety Training Solutions Ltd, managing on a day-to-day basis and keeping up-to-date with safeguarding developments.
- Ensures working arrangements are in place to safeguard and promote the welfare of all learners and staff, supported by the Safeguarding Champions.
- Is the first point of contact within APT Health and Safety Training Solutions Ltd for referrals and information on safeguarding.
- Responsible for making appropriate decisions in respect of reported concerns and liaising with the local authority and other external agencies as required in line with local authorities' policy.
- Ensures procedures as dictated by this policy are adhered to and that policy development and review takes place.
- Maintains securely records of safeguarding referrals and allegations of abuse.
- Oversees the referral process and follows up any referrals made, internally and with external agencies.
- Plans, develops and manages staff training in conjunction with the HR Co-ordinator.
- Keeps the MD up to date with Safeguarding arrangements and any policy changes required.

2.5 Deputy Designated Safeguarding Officer (DSO)

- Supports the Senior DSO in day-to-day management.
- Helps review and develop processes
- Helps shape policy

2.6 Safeguarding Champions (Tutors)

- Support the DSO with developing learner induction and training regarding safeguarding, Health & well being.
- Represent all learners at each Training Centre
- Help review and develop processes
- Help shape policy

2.7

- Support the DSO in keeping staff and learners informed of Safeguarding updates
- Review the learning and working environment in training centres
- Help review and develop processes
- Help shape policy

2.8 HR Co-ordinator

- Manages safer recruitment processes
- Helps review and develop processes
- Helps shape policy

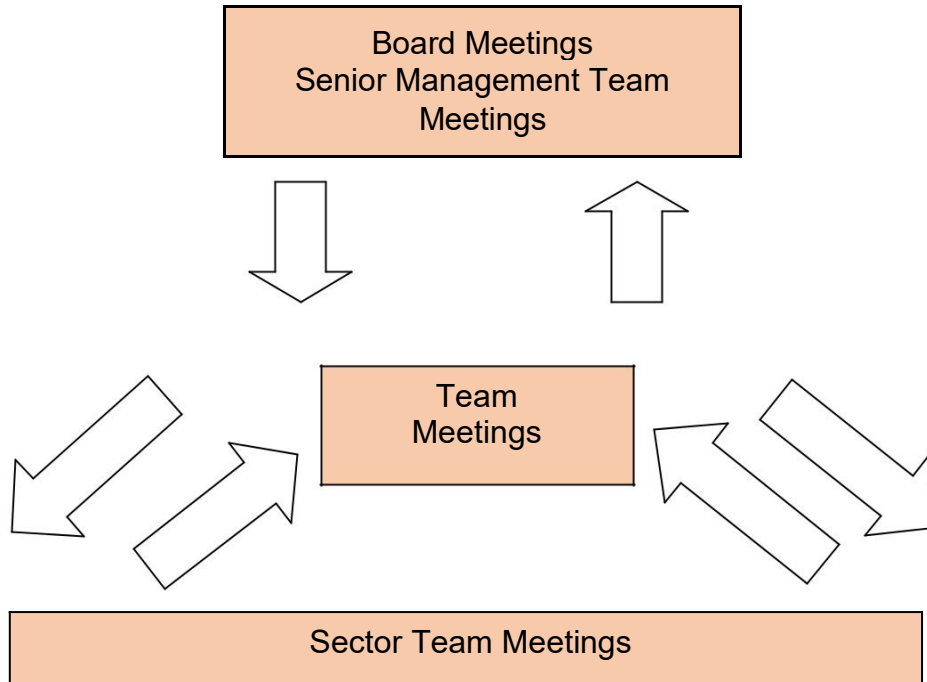
2.9 All employees

Have a responsibility to promote safeguarding to learners and employers; and to co-operate with management to ensure APT Health and Safety Training Solutions Ltd offers a safe working environment for learners. All staff must abide by APT Health and Safety Training Solutions Ltd' "Code of Professional Conduct" at all times and attend Safeguarding training as requested. All staff must read Keeping Children Safe In Education 2022.

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Safeguarding Communication Flow Diagram



Safeguarding is a permanent agenda item at management meetings and staff meetings. All staff have the opportunity to discuss Safeguarding at these meetings.

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3.0 Management of Safeguarding (Preventative)

3.1 Learners in our Training Centres

All APT Health and Safety Training Solutions Ltd staff have a collective responsibility for the Safeguarding of our learners when they are in our training centres. Learners are informed about Safeguarding during induction. Safeguarding is then embedded throughout the “learner journey”, continually raising awareness as part of APT Health and Safety Training Solutions Ltd’s approach to the ‘Safe Learner Concept’, our ‘Prevent Agenda’, Equality and Diversity and fundamental British Values ethos. Learners expected into centre are contacted if they do not attend and APT Health and Safety Training Solutions Ltd have not been notified of the absence. The DSO is informed if contact cannot be made.

3.2. Learners in the Workplace

Safeguarding forms part of APT Health and Safety Training Solutions Ltd’s Workplace Health and Safety Assessment procedure; raising awareness of the importance of Safeguarding with the learner, supervisors and company representatives. APT Health and Safety Training Solutions Ltd issue a Safeguarding Information Leaflet with contact details (including a direct email address for safeguarding). All companies require an assessment regardless of the age, experience and status of the learners involved.

Safeguarding forms part of the learner induction and is embedded throughout delivery in the workplace.

Employed learners follow their employer absence procedures and employers are encouraged to notify either the Training Adviser (or DSO directly) if contact cannot be made. If hosting work experience learners, placement employers are contacted by APT Health and Safety Training Solutions Ltd to check attendance; and employers contact APT Health and Safety Training Solutions Ltd if the learner fails to return from a planned break or planned appointment.

We also recognise our responsibility in ensuring that any of our learners who may come into contact with vulnerable groups during work placements may also require appropriate checks or restrictions in placement (e.g. learner working with young children in a nursery).

Further guidance on work placement vetting can be found in our **Safety, Health and Welfare Policy and procedures**.

3.3 All learners

Delivery staff have access to learning resources for use with learners in our centres and with learners who are based in the workplace. APT Health and Safety Training Solutions Ltd’s aim is to raise awareness and help learners stay safe and to build resilience to threats (including on-line threats). Learners are made aware of the support available and who they can contact if they have a concern or issue about their own, or others, safety. Details of APT Health and Safety Training Solutions Ltd’s Designated Safeguarding Officers are also displayed in our Centres and we have a designated safeguarding email address. Learners agree to adhere to a Code of Conduct and Acceptable Usage Agreement. APT Health and Safety Training Solutions Ltd has separate policies covering E- Safety and Responsibility, Anti-Bullying and Domestic Abuse. APT Health and Safety Training Solutions Ltd also acknowledges that learners can abuse their peers. APT Health and Safety Training Solutions Ltd make clear to learners that ‘abuse is abuse’ and should never be tolerated.

3.4 Learners on programme through our Delivery Subcontractors

Subcontractors are required to have arrangements in place which at least meet APT Health and Safety Training Solutions Ltd’ own standards. As a minimum, we expect:

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- A satisfactory quality systems audit, carried out by APT Health and Safety Training Solutions Ltd' Supply Chain Manager before delivery of provision commences.
- Safeguarding matters are considered to be well managed.

3.5 Photographing Learners

All persons wishing to record any images of learners e.g. Equality and Diversity events, must complete the necessary consent form. Staff should challenge any persons acting suspiciously and recording images of learners without consent.

With advances in technology, especially with mobile phones being able to record and transmit images, staff must be extra vigilant. Whilst a ban on the use of mobile phones is not practical and would be difficult to police, staff should certainly challenge any persons using recording equipment without consent.

Images of non-employed Children/Young People (14–17year olds) will not be used to promote APT Health and Safety Training Solutions Ltd Training without the express permission of the parent or carer.

Further guidance on photographing learners can be found in the **Safeguarding Procedure**.

3.6 Administering First Aid to Learners

If employees are required to administer first aid to any learners, either as the result of abuse or a result of an accident, employees will observe the following guidelines:

- Where possible two employees should be present.
- The employees should, where possible, be a gender mix of male/female.
- Wherever possible, an employee of the same gender as the injured learner should administer any first aid required; however, this should not prevent administering first aid if the same gender is not available in any emergency.

In certain circumstances, the provision of first aid has to be immediate and it may not be possible to comply with all the above guidelines. In these circumstances, employees must remain vigilant and protect themselves from any allegations of inappropriate behaviour.

3.7 Staff Recruitment, Selection and Pre-employment Checks

APT Health and Safety Training Solutions Ltd strives to create a culture of safe recruitment and, as part of this, ensure that we have in place procedures that help deter, reject or identify people who pose a risk of harm to our service users. Processes comply with *Keeping Children Safe in Education 2022*.

The Disclosure and Barring Service (DBS), was introduced in 2012, through the *Safeguarding Vulnerable Groups Act 2006* and *Protection of Freedoms Act 2012*, its purpose to reduce the risk of harm to children and vulnerable adults.

APT Health and Safety Training Solutions Ltd has DBS and Vetting Procedures in place as part of its recruitment processes to enable APT Health and Safety Training Solutions Ltd to determine regulated or unregulated activity and carry out DBS checks as appropriate (see **Annex 1** for more information about regulated activity). The full legal definition of regulated activity is set out in *Schedule 4 of the Safeguarding Vulnerable Groups Act 2006* as amended by the *Protection of Freedoms Act 2012*.

APT Health and Safety Training Solutions Ltd will make a referral to the Disclosure and Barring Service (DBS) if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have been if they had not resigned.

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Further guidance can be found in *Keeping Children Safe in Education*

Further staff guidance on APT Health and Safety Training Solutions Ltd’s Safer Recruitment processes can be found in the HR Policies and Procedures within the Staff Handbook.

Information about the Independent Safeguarding Authority can be found on the following website www.gov.uk/disclosure-barring-service-check/overview

3.8 Staff Code of Professional Conduct

All staff must clearly understand the need to maintain appropriate boundaries in their dealings with learners. All staff must adhere to APT Health and Safety Training Solutions Ltd’ Staff Code of Professional Conduct, which outlines APT Health and Safety Training Solutions Ltd’ behavioural expectations including acceptable use of technologies, staff/learner relationships, and communications (including social media).

APT Health and Safety Training Solutions Ltd recognises that staff may sometimes be victims of false or malicious allegations of learner abuse and APT Health and Safety Training Solutions Ltd’ expectations also aim to minimise this risk. The Staff Code of Professional Conduct can be found in APT Health and Safety Training Solutions Ltd’ Staff Handbook.

3.9 Staff Training

All staff and volunteers will be trained in Safeguarding as part of their induction programme, and will have awareness and understanding of APT Health and Safety Training Solutions Ltd’ Safeguarding Policy and procedures. Safeguarding training will be updated regularly (formally at least every 3 years through ‘Practical Safeguarding’ sessions and Prevent training sessions as appropriate, which take place within their occupational sector whereby relevant experiences can be discussed and safeguarding can be put into context for staff).

Staff will also receive regular safeguarding updates through APT Health and Safety Training Solutions Ltd’ communication meetings and the staff intranet (but at least annually to coincide with the Policy review schedule). It is the responsibility of the Designated Safeguarding Officers to raise awareness amongst staff on a regular basis.

APT Health and Safety Training Solutions Ltd will ensure Designated Safeguarding Officers are trained to provide them with the skills and knowledge required to carry out their role. Formal training will be updated at least every 4 years. They will attend training with local Safeguarding Boards as appropriate.

The DSO’s knowledge and skills will also be updated regularly via on-line access to bulletins and safeguarding resources (but at least annually to coincide with the Policy review schedule); and agree to keep up-to-date with developments in Safeguarding.

The rationale behind APT Health and Safety Training Solutions Ltd’ training model is to develop a competent, vigilant management framework. In doing so, the protection of learners will not rely solely on the screening of employees through recruitment and DBS disclosure process, but through a systematic approach to safeguarding.

Training will be revised and developed in line with Government and local priorities.

Subcontractors will need to evidence a programme of safeguarding training and this will be managed by the Directors

Records of formal (internal and external) training will be held by the Director of Customer Engagement showing who has been trained and when.

Training Schedule for new Staff (*effective date August 2022*)

New staff, as part of their induction programme, will complete the following training within the following timescales:

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Within 2 weeks of joining APT Health and Safety Training Solutions Ltd:

Introduction to Safeguarding – internal e-learning course via the staff intranet.

Within 2 months of joining APT Health and Safety Training Solutions Ltd:

Formal **Prevent** training accredited by The Education and Training Foundation (ETF) which contains 4 modules, accessed via '[foundationonline](#)' (as appropriate to staff job role(s) – see below). Each module includes an on-line assessment.

	*Prevent for Governors & Board	Prevent for Leaders and Managers	Prevent for Practitioners	Prevent for Support Staff	
*Board Members	✓				On-line Assessment
Directors		✓	✓		On-line Assessments
Line Managers		✓	✓		On-line Assessments
Delivery Staff & Safeguarding Champions			✓		On-line Assessments
Support Staff				✓	On-line Assessments
Designated Persons		✓	✓	✓	On-line Assessments

Staff will also attend scheduled Workshop to Raise Awareness of Prevent (WRAP) sessions. These will be scheduled according to demand based on staff recruitment levels.

Within 4 months of joining APT Health and Safety Training Solutions Ltd:

Formal **Safeguarding** on-line training, accredited by The Education and Training Foundation (ETF). Staff will complete one of two courses based on their role (see below). Following the course staff will complete an on-line assessment.

Staff (delivery and support)	Safeguarding in FE ‘foundationonline’ link to course					
	Module 1 Intro & Context	Module 2 Safer Organisations	Module 3 My Role	On-line Assessment		
All Line Managers	Safeguarding and Safer Recruitment in FE ‘foundationonline’ link to course					
Designated Persons	Module 1 Intro & Context	Module 2 Safer Organisations	Module 3 My Role	Module 4 Safer Recruitment	Module 5 Support & Development	On-line Assessment

Within 6 months of joining APT Health and Safety Training Solutions Ltd:

Internal ‘Practical Safeguarding Skills’ session led internally by the Designated Officers.

3.10 Risk Assessments

Safeguarding is embedded as part of our risk assessment processes as detailed in the **Safety Health and Welfare Policy and Procedures**. Queries or concerns for a learner’s (or staff member’s) safety must be referred to the DSO.

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4.0 Safeguarding Issues

4.1 Types of Abuse and Neglect

APT Health and Safety Training Solutions Ltd recognises that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition. In most cases, multiple issues will overlap with one another. The following information is taken primarily from the *Keeping Children Safe in Education* guidance but can be applied to all individuals in the context of this Policy (although the Designated Safeguarding Officer will follow age related requirements when a referral from staff is received). Therefore, the word 'child' has been replaced with 'individual' to include children, young people and adults at risk of harm.

Abuse:

Abuse is a form of maltreatment of an individual. Somebody may abuse or neglect an individual by inflicting harm or by failing to act to prevent harm. They may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or by another child or children.

4.1.1 Physical Abuse

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning; or scalding, drowning, suffocating; or otherwise causing physical harm to an individual. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in an individual.

4.1.2 Emotional Abuse

The persistent emotional maltreatment of an individual such as to cause severe and adverse effects on their emotional development. It may involve conveying to them that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the individual opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on an individual. These may include interactions that are beyond the individual's developmental capability as well as overprotection and limitation of exploration and learning, or preventing them participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing individuals frequently to feel frightened or in danger, or the exploitation or corruption of individuals. Some level of emotional abuse is involved in all types of maltreatment of an individual, although it may occur alone.

4.1.3 Sexual Abuse

Involves forcing or enticing an individual to take part in sexual activities, not necessarily involving a high level of violence, whether or not they are aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving individuals in looking at, or in the production of, sexual images, watching sexual activities, encouraging them to behave in sexually inappropriate ways, or grooming them in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

4.1.4 Neglect

Neglect is the persistent failure to meet an individual's basic physical and/or psychological needs, likely to result in the serious impairment of their Health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide

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adequate food, 12 clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, the individual's basic emotional needs.

4.2 Specific Safeguarding Issues

APT Health and Safety Training Solutions Ltd' Safeguarding approach aims to ensure staff, employers and learners are aware of potential safeguarding issues and be aware that issues can manifest themselves via peer on peer abuse, such as bullying/cyberbullying, gender-based violence/sexual assaults and sexting. The following gives an overview of some of the specific safeguarding issues that may affect our learners.

4.2.1 Peer-on-Peer Abuse

Peer-on-peer abuse is most likely to include, but may not be limited to, bullying (including cyberbullying), gender based violence/sexual assaults and sexting. APT Health and Safety Training Solutions Ltd aim to minimise this by ensuring all learners are aware of our Learner Code of Conduct and Acceptable Usage Agreement (with clear procedures where our expectations are not met), underpinned by APT Health and Safety Training Solutions Ltd' approach to Equality and Diversity and upholding British Values.

4.2.2 Forced Marriage

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example).

4.2.3 Child Sexual Exploitation

This is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation does not always involve physical contact and can happen online. A considerable number of children who are victims of sexual exploitation go missing from home, care and education at some point.

4.2.4 People who are missing

Every year an estimated 200,000 people go missing in the UK. In some cases, missing adults may have made a choice to leave and 'start their lives over again', but the vast majority of missing people, children and adults, are vulnerable and need protection and support. APT Health and Safety Training Solutions Ltd has an Attendance Policy for learners attending the centre and monitoring procedures for learners on work experience placements, so that staff can quickly identify potential safeguarding issues.

4.2.5 Domestic Abuse

Domestic abuse is defined by the Home Office as "any incident of controlling, coercive or threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults, aged 16 and over, who are or have been intimate partners or are family members, regardless of gender and sexuality." This includes

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honour-based violence, forced marriage and female genital mutilation (FGM). APT Health and Safety Training Solutions Ltd has a separate Domestic Abuse Policy.

4.2.6 Female Genital Mutilation

This comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. There are specific and timely **personal** reporting requirements for staff members receiving disclosure of, or having evidence of, FGM in under 18's. It is therefore important to report this immediately to APT Health and Safety Training Solutions Ltd's Designated Safeguarding Officer to ensure any requirements are fulfilled.

4.2.7 Radicalisation

Protecting individuals from the risk of radicalisation is seen as one of APT Health and Safety Training Solutions Ltd' wider safeguarding duties, and is similar in nature to protecting individuals from other forms of harm and abuse. During the process of radicalisation, it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings.

APT Health and Safety Training Solutions Ltd also has a separate Prevent Agenda to support our approach to raising awareness and building resilience to the threat of radicalisation, and embedding British values within our curriculum.

Staff use the existing Safeguarding referral procedure if they have any concerns.

A 'Prevent' related referral received by the DSO may require the DSO informing the Counter-Terrorism Unit, to ensure the most appropriate agency supports the individual.

Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for organisations to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages.

4.2.8 So-called Honour Based Violence

So-called "honour based violence" (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community.

4.2.9 Bullying

Bullying is behaviour by an individual or group, repeated over time, that intentionally hurts another individual or group either physically or emotionally. Bullying can take many forms (for instance, cyber-bullying via text messages, social media or gaming, which can include the use of images and video) and is often motivated by prejudice against particular groups, for example on grounds of race, religion, gender, sexual orientation, special educational needs or disabilities, or because a person is adopted, in care or has caring responsibilities. It might be motivated by actual differences between individuals, or perceived differences.

The rapid development of, and widespread access to, technology has provided a new medium for 'virtual' bullying, which can occur in or outside the organisation. Cyber-bullying is a different form of bullying and can happen at all times of the day, with a potentially bigger audience, and more accessories as people forward on content at a click.

APT Health and Safety Training Solutions Ltd has a separate Anti-Bullying Policy (including Cyber-bullying) that sets out APT Health and Safety Training Solutions Ltd's zero tolerance approach to all forms of bullying.

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Links to Government sites giving more information on some of the main Safeguarding Issues can be found in **Section 8**.

For the main safeguarding issues and possible signs to look out for see **Annex 3**.

5.0 Dealing with Concerns of Abuse or Neglect

5.1 Key Principles to Work By

Staff need to understand how to deal with a concern/disclosure/allegation and know how to manage the requirement to maintain an appropriate level of confidentiality whilst liaising with the DSO, and other agencies as directed by the DSO. Staff are encouraged to follow these 4 steps:

Be alert to signs – alert to the signs of abuse and neglect, and to understand APT Health and Safety Training Solutions Ltd procedures and referral process.

Question behaviour - the signs of child abuse might not always be obvious and a learner might not tell anyone what is happening to them. You should therefore question behaviours if something seems unusual.

Ask for help - if you are at all unsure about a learner's welfare ask for help from the Designated Safeguarding Officer.

Refer – refer to the Designated Safeguarding Officer (DSO) or authorised Director in a DSO's absence, unless the learner is in immediate danger, where direct referral may be required.

5.2 The 5 R's

All staff have a responsibility to follow the 5 R's (Recognise, Respond, Report, Record & Refer) whilst engaged on APT Health and Safety Training Solutions Ltd's business, and must immediately report any concerns about an individual's welfare to a Designated Safeguarding Officer (DSO) or to an authorised Director in a DSO's absence. Further guidance on the 5 R's can be found in **Annex 2**.

5.3 Information Sharing and Confidentiality

It is important to remember that throughout all stages of our processes, sharing information is an intrinsic part of our role. The decisions about how much information to share, with whom and when can have a profound impact on people's lives. Staff should weigh up what might happen if the information is shared against the consequences of not sharing the information. Early sharing of information is key to providing effective early help where there are emerging problems. Sharing information can be essential to put in place effective protection services.

Whilst legislation places duties on organisations and individuals to process personal information fairly and lawfully, it is not a barrier to sharing information where the failure to do so would result in an individual being placed at risk of harm. Fears about sharing information cannot be allowed to stand in the way of the need to promote the welfare and protect the safety of staff and learners. Although inter-agency working and information sharing are vital in identifying and tackling all forms of abuse, it is clear they are especially important to identify and prevent child sexual exploitation.

If a learner discloses information, staff must not promise that they will not tell anyone – this is ultimately against the best interests of the learner.

However, records and information must be retained confidentially as all reports will contain sensitive data. The DSO is responsible for retaining reports and information securely.

It is considered good practice that DSO's inform any person that they intend to refer their conduct or actions to Social/Care Services. However, the following exceptions apply:

- If sexual abuse is suspected within the family

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- If there is evidence of fabricated or induced illness
- If to do so would place the child/person in more danger
- If to do so would place the staff member in danger

Further government advice on information sharing can be found at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419628/Information_sharing_advice_safeguarding_practitioners.pdf

APT Health and Safety Training Solutions Ltd take our staff's safety and welfare seriously and we expect staff to act within the realms of this policy when having concerns about a colleague's safety or welfare. The following will be applied (in the appropriate context) for any concerns about colleagues as well as learners.

5.4 If a staff member has a concern about an individual

If a staff member has a concern about an individual (as opposed to the individual being in immediate danger) the staff member must report the concerns to the Designated Safeguarding Officer (DSO) (or authorised Director if DSO is unavailable) following the 5R's.

The Safeguarding Report Form will then be completed by the DSO who has received training in its completion. Any referral to an external agency by a Director will be reported to the DSO. The DSO will follow-up on any referral where a response from the Agency/appropriate support is not forthcoming. The DSO is responsible for overseeing the referral process to external agencies.

5.5 If a third party reports a concern about an individual

If a staff member is informed of a concern about an individual, by another individual (learner, employee or colleague), the staff member must report the concerns to the Designated Safeguarding Officer (DSO) (or authorised Director if DSO is unavailable) following the 5R's.

The Safeguarding Report Form will then be completed by the DSO who has received training in its completion. If necessary the DSO will contact the Police, Local Authority or Child Protection Helpline for advice.

5.6 If the individual is in immediate danger or risk of harm

In an emergency situation, the staff member should contact the local authority's Social/Care Services and/or Police immediately and the DSO is informed. The DSO will follow this up when it is safe to do so by completing the Safeguarding Report Form and complying with the reporting procedure.

5.7 If a staff member observes abuse taking place

If a staff member observes abuse taking place, intervention may be required to protect and safeguard the individual.

Intervention is defined as being any direct action which is taken to safeguard individuals which is over and above observing the suspect or merely completing the Safeguarding Reporting Form.

Any intervening action should be taken with extreme caution.

If intervention is required, it will be in response to an obvious incident e.g. a physical assault on a learner. The nature of the incident will dictate the response and action.

Where possible the Police should be summoned to intervene. However, if a delay would place the individual in further danger, staff members should take appropriate action. Anyone intervening must not place themselves at risk and must only use "reasonable force" as a last resort.

Once appropriate action has been taken, the incident must be immediately reported to the Group Director, the Police, Social/Care Services or the Child Protection Helpline and the Safeguarding Report Form completed by the Designated Safeguarding Officer.

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In appropriate cases, where it is safe to do so, the individual concerned should be made aware that their conduct or actions are unacceptable and are giving cause for concern.

Do not attempt to detain the individual or get involved in any physical contact.

APT Health and Safety Training Solutions Ltd does not have insurance cover for any employee who fails to comply with this requirement.

5.8 If an individual discloses abuse to a staff member

All disclosures made must be treated seriously and whilst the sensitivity and confidentiality of the situation should be respected, such disclosures should be reported immediately using the established reporting procedure to the Designated Safeguarding Officer (DSO) (or authorised Director if DSO is unavailable). The DSO will complete the Safeguarding Report Form.

If necessary the DSO will contact the Police (or local Prevent Officer), Local Authority or Child Protection Helpline for advice.

For further guidance on dealing with safeguarding issues, see **Annex 4**.

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6.0 Dealing with Allegations of Abuse Against Members of Staff

6.1 If a staff member has a concern about a colleague’s conduct

Where a staff member has a concern about another staff member they should report this to the Group Director (MD) (which can be through the Designated Safeguarding Officer if preferred). They should not disclose the fact that they are making a report to the individual concerned or any other colleagues.

If the concern is about the MD, the Board’s Safeguarding Lead should be informed, via the DSO if preferred.

If the concern is about a DSO, then the MD should be informed, (via another DSO if preferred).

The DSO, the MD and the Board’s Safeguarding Lead (as appropriate to the allegation) will evaluate the need to notify the Local Authority Designated Officer (LADO), Children’s Services and the Police.

The DSO (where appropriate) will oversee the procedure for dealing with the allegation and any liaison with the Local Safeguarding Children Board as required.

Further guidance on reporting a Colleague can be found in the Whistle Blowing Policy within the staff handbook.

6.2 If a staff member has a concern about safeguarding practices within APT Health and Safety Training Solutions Ltd or its subcontractors

All staff should feel able to raise concerns about safeguarding practice or potential failures in APT Health and Safety Training Solutions Ltd’s (or its subcontractor’s) regimes and know that such concerns will be taken seriously. For reporting procedure refer to paragraph 6.1 above.

7.0 Other Related APT Health and Safety Training Solutions Ltd Policies

- Recruitment and Selection of Staff Policy
- Code of Professional Conduct
- Safety, Health & Welfare Policy
- Equality & Diversity Policy
- Disciplinary Procedure
- Whistleblowing Policy
- E-Safety and Responsibility Policy
- Anti-Bullying/Cyber Bullying Policy
- Domestic Abuse Policy

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8.0 Useful Websites

Disclosure and Barring Service	https://www.gov.uk/government/organisations/disclosure-and-barring-service
Child Exploitation & Online Protection Centre – Internet safety - CEOP	www.ceop.gov.uk
Social Care Institute for Excellence	http://www.scie.org.uk
Dignity in Care	Website www.dignityincare.org.uk
Care Quality Commission (CQC) national body that inspects and rate care providers	CQC national Customer Service Centre Citygate Gallowgate Newcastle upon Tyne NE1 4PA Telephone: 03000 616161

- [bullying including cyberbullying](#)
- [children missing education](#)
- [child sexual exploitation \(CSE\)](#)
- [domestic violence](#)
- [drugs](#)
- [fabricated or induced illness](#)
- [faith abuse](#)
- [female genital mutilation \(FGM\)](#)
- [forced marriage](#)
- [gangs and youth violence](#)
- [gender-based violence/violence against women and girls \(VAWG\)](#)
- [hate](#)
- [mental Health](#)
- [missing children and adults](#)
- [preventing radicalisation](#)
- [relationship abuse](#)
- [sexting](#)
- [trafficking](#)

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Annex 1 – Information on Regulated Activity

Annex 1

Regulated Activity Relating to Children

Regulated activity includes (exclusions apply):

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/550197/Regulated_activity_in_relation_to_children.pdf

- a) teaching, training, instructing, caring for (see (c) below) or supervising children if the person is unsupervised, or providing advice or guidance on well-being, or driving a vehicle only for children,
- b) work for a limited range of establishments (known as ‘specified places’, which include schools and colleges), with the opportunity for contact with children, but not including work done by supervised volunteers;

Work under (a) or (b) is regulated activity only if done regularly. Some activities are always regulated activities, regardless of their frequency or whether they are supervised or not. This includes:

- c) relevant personal care, or Health care provided by or provided under the supervision of a Health care professional:
 - personal care includes helping a child, for reasons of age, illness or disability, with eating or drinking, or in connection with toileting, washing, bathing and dressing;
 - Health care means care for children provided by, or under the direction or supervision of, a regulated Health care professional.

Regulated Activity Relating to Adults

There are six categories of people who will fall within the definition of regulated activity (and so will anyone who provides day to day management or supervision of those people). A broad outline of these categories is set out below:

(i) Providing Health care

Any Health care professional providing Health care to an adult, or anyone who provides Health care to an adult under the direction or supervision of a Health care professional. Please see the Safeguarding Vulnerable Groups Act 2006, as amended by the Protection of Freedoms Act 2012, for further details about what is meant by Health care and Health care professionals.

(ii) Providing personal

care Anyone who:

- provides physical assistance with eating or drinking, going to the toilet, washing or bathing, dressing, oral care or care of the skin, hair or nails because of an adult’s age, illness or disability;
- prompts and then supervises an adult who, because of their age, illness or disability, cannot make the decision to eat or drink, go to the toilet, wash or bathe, get dressed or care for their mouth, skin, hair or nails without that prompting or supervision; or
- trains, instructs or offers advice or guidance which relates to eating or drinking, going to the toilet, washing or bathing, dressing, oral care or care of the skin, hair or nails to adults who need it because of their age, illness or disability.

(iii) Providing social work

The activities of regulated social workers in relation to adults who are clients or potential clients. These activities include assessing or reviewing the need for Health or social care services, and providing ongoing support to clients

(iv) Assistance with general household matters

The provision of assistance to an adult because of their age, illness or disability, if that includes managing the person’s cash, paying their bills or shopping on their behalf.

(v) Assistance in the conduct of a person’s own affairs

Anyone who provides various forms of assistance in the conduct of an adult’s own affairs, for example by virtue of an enduring power of attorney. Please see the Safeguarding Vulnerable Groups Act 2006, as amended by the Protection of Freedoms Act 2012, for the further categories which are covered here.

(vi) Conveying

A person who transports an adult because of their age, illness or disability either to or from their place of residence and a place where they have received, or will be receiving, Health care, personal care or social care; or between places where

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they have received or will be receiving Health care, personal care or social care. This will not include family and friends or taxi drivers.

Annex 2 – THE 5 R’S

Annex 2

Safeguarding, if it is to impact on all aspects of our organisation must be the informed responsibility of all. All staff, senior managers, subcontractors and work placement employers have a responsibility to make the learning environment safe and secure for all.

To do so you should consider and act on the **5 R’s**

- Recognition
- Response
- Reporting
- Recording
- Referral

Recognition – All Staff

The ability to recognise behaviour that may indicate abuse is of fundamental importance. Whether the abuse may occur on our premises or in the home or in any other setting in which the learner may find themselves, all those playing a role in meeting the learners’ needs should be aware and informed so that possible abuse can be recognised, investigated and acted on seamlessly and effectively.

Signs and symptoms of abuse of learners may include direct disclosure. Other people in a position to identify concerns include training advisers, tutors, employers, IQAs, other learners and those offering additional services, such as the Connexions Service. All of these should be trained to understand signs of possible abuse and know how, where and to whom to report concerns.

Response - All Staff

Appropriate response is vital. No report of or concern about possible abuse should ever be ignored. In order to determine the most appropriate response, find out whether you are dealing with an allegation from a learner against a member of staff or a fellow learner, or another. Is this a disclosure from an individual alleging abuse to themselves or to another? Is it the reporting of a concern or suspicion? What, precisely, is alleged to have happened? Clearly understood detail is vital when reporting your concerns to a Designated Officer.

Do not lead or probe with questions. Remain calm and demonstrate interest and concern while questioning. Listen well. Inform the person sharing with you that concerns they have raised must be recorded and passed on so that possible abuse can be dealt with, and that this will be done on a limited “need to know” basis, with as few others as possible knowing the identity of the complainant and all in the chain of reporting will respect confidentiality.

Reassure that they have done the right thing in reporting their concerns and that you will do everything you possibly can to help. Do not make unrealistic promises. Ensure that testimony is passed to the Designated Officer so they can record on the Safeguarding Report Form, and that the complainant and subject of the complaint are treated in line with policy and guidance.

Reporting – All Staff

The following staff are trained Designated Safeguarding Officers:

- Shaun Blakemore (Lead)
- Andy Talbot (Deputy)

They have received training and support to ensure they carry out this role effectively. During both staff and learner inductions the Designated Safeguarding Officer will be identified and there are safeguarding policy statements displayed at each training centre to inform the learners.

Report your concerns to the Designated Safeguarding Officer in the first instance. Should this be inappropriate for whatever reason, you should not hold back from reporting, but do so to an alternative Designated Officer or to an Authorised Director.

Once you have reported concerns about the abuse to the Designated Safeguarding Officer it is their responsibility to take further action.

Recording – Designated Safeguarding Officer

Designated staff should record precisely what has been alleged, using the words of the complainant. Records should include accurate quotation. It should also, if felt appropriate, include factual observations about the observable physical and emotional state of the individual sharing their concerns with you.

Referral - Designated Safeguarding Officer

Only the Designated Officer should mount an investigation into suspicions of abuse. An investigation may include questioning staff or learners. Actions of these sorts carried out by someone other than the Designated Officer could be construed as unjustified interference which could jeopardise an investigation and any possible subsequent court case. An exception to this is where an allegation means it is inappropriate to involve the DSO, where the Whistle Blowing Policy will be applied.

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Annex 3 – Identifying Abuse

Annex 3

Physical Abuse - Signs & Symptoms

- Unexplained injuries – frequent visits to GP or Hospital
- Person exhibiting self harm
- Unexplained bruising (unusual patterns or areas)
- Unexplained fractures
- Unexplained burns (particularly in unlikely areas)
- Person appears frightened or behaves differently when in the presence of particular people
- Pinch or grip marks on upper arms
- Bite marks
- Person exhibits a change in usual behaviour

Sexual Abuse - Signs & Symptoms

- Pregnancy as a result of an act of abuse
- Person is very withdrawn or unusually subdued
- Person experiences pain, itching or bleeding in genital/anal area
- Bruising on inner thighs, upper arms or chest

Psychological Abuse - Signs & Symptoms

- Person has low esteem, is fearful, anxious, depressed or withdrawn.
- Obsessive or ritualistic behaviour
- Changes in personality
- Reluctant to give eye contact
- Self harming
- Person may suffer from insomnia or sleep excessively
- Sudden over-eating and weight gain
- Loss of appetite and weight loss
- Person becomes compliant

Financial Abuse - Signs & Symptoms

- Lack of money, even on benefit days
- Considerable debt and lack of money for basic living requirements
- Always asking to borrow money
- Someone expressing sudden/inappropriate interest in a person and their money
- Sudden or unexplained withdrawals from a bank account
- Bank books, credit cards cheque books are “lost”

Neglect – Signs and Symptoms

- Sudden or continuous weight loss
- Poor physical appearance or condition/body odour, dirty clothes
- Low mood
- Decaying teeth, overgrown toe nails
- A person may lack necessary aids like walking frames, hearing aids, spectacles
- Insufficient or inappropriate clothing

Discriminatory Abuse - Signs and Symptoms

- Withdrawn and anxious

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- Self loathing/self harm
- Defensive behaviour
- Loss of self confidence - becoming self critical
- Reluctance to socialise outside of own/known culture/caste
- Anger and aggression
- Feelings of heightened vulnerability
- Self neglect in appearance and diet

Domestic Abuse – Signs and Symptoms

- May be a combination of any of the above

Bullying/Cyberbullying

- Becomes withdrawn, anxious and lacking in confidence
- Stammers when talking
- Threatens suicide
- Feels ill in the morning and feels sick
- Unexplained cuts or bruises
- Becomes aggressive, disruptive or unreasonable
- Does not want to use the internet
- Nervous or jumpy when a cyber message is received

Drugs and Other Addictions

- Withdrawal symptoms such as cravings, moodiness, bad temper, poor focus, frustration, bitterness and resentment
- Financial difficulties
- Having problems with the law
- Dropping of interests and hobbies

Fabricated or Induced Illness

- Symptoms only appear when parent or carer are present
- Poor response to medication or other treatment
- Limiting of daily activities
- Excessive medical tests and procedures

Faith Abuse

- Pre-occupied thinking and anxiety
- Obsessive thinking, fear
- Lack of sleep and concentration
- Stomach aches, sweating and headaches
- Over use of control on people, groups and expression
- Pressure to attend church services

Forced Marriage

- Truancy/Absence
- Low motivation
- Lack of punctuality
- Self harm
- Depression and isolation
- Attempted suicide
- Eating disorders

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- Family disputes
- Domestic violence

Child Exploitation

- Absences from class, going missing for periods of time
- Health problems that may indicate a sexually transmitted infection
- Mood swings or changes in temperament
- Using drugs and alcohol
- Displaying inappropriate sexualised behaviours such as over familiarity with strangers, dressing in a sexualised manner or sexting
- Unexplained physical harm such as bruising and cigarette marks

Mental Health

- Recent social withdrawal and loss of interest in others
- Difficulty in performing familiar tasks
- Problems with concentration, memory or logical thought
- Heightened sensitivity to sights, sounds, smells or touch
- Loss of initiative or desire to participate in any activity
- Fear or suspiciousness of others
- Uncharacteristic, peculiar behaviour
- Dramatic sleep and appetite changes or deterioration in personal hygiene

Trafficking

- Unpaid or paid very little
- Works excessively long and unusual hours
- Owes a large debt and is unable to pay it off
- Recruited through false promises concerning the nature of their job/work conditions
- Poor mental Health or abnormal behaviour
- Lacks Healthcare
- Has few or no personal possessions

Teenage Relationship Abuse

- Changes in weight
- Anxious about who they can talk to, what they can wear or what they can do
- Have to check if they can do something
- Stop taking part in social activities or mixing with friends

Sexting

- Constantly checking mobile phone
- Showing signs of being anxious, getting easily upset

Gangs and Youth Violence

- Drug or alcohol abuse
- Decline in attendance and effort in classes/with work
- Change in friends
- Keeping late hours
- Having a lot of money or expensive items which can't be explained
- Change in clothing
- Use of hand signals to communicate with other members gang members

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- Gang tattoos

Female Genital Mutilation

- Having difficulty walking, sitting or standing
- Spending longer than normal in the bathroom or toilet
- Having unusual behaviour after an absence
- Being reluctant to undergo normal medical examinations

Radicalisation

- Changes in behaviour, becoming more withdrawn
- Extremist tattoos
- Changes in friends/social activities
- Suggesting that they are being discriminated against
- Trying to inflict own religious views on others
- Unexplained absence
- Viewing/sharing extremism websites or publications
- Evidence of homophobic, religion based or racist bullying

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Annex 4 – Dealing with Safeguarding Concerns – Additional Reminders for Staff

Annex 4

If you suspect abuse to have taken place, have witnessed it taking place or you have received a report of abuse you should respond by:

- Remaining calm and not showing shock or disbelief
- Demonstrate a sympathetic approach by acknowledging regret and concern that what has been reported has happened
- Ensure that any emergency action needed has been taken
- Confirm that the information given to you is treated seriously
- Record everything you have heard, suspected, or witnessed and pass on the information to the Designated Safeguarding Officer, unless you need to alert the emergency services (in which case you will pass on all information and your action when completed)
- Give those who have disclosed information to you information about what steps you will take with the information given
- Inform those who have disclosed information that you will feedback with the results of any action
- **If you suspect a crime as taken place you must contact the Police.**

When a Learner wants to confide in you - good practice

Do's

- Be accessible and receptive
- Listen carefully
- Take it seriously
- Reassure learner they are right to tell
- Negotiate getting help
- Find help quickly
- Make careful records of what was said immediately

Don'ts

- Jump to conclusions
- Try to get the learner to “disclose”
- Speculate or accuse anybody
- Make promises you cannot keep

- Understand your role. You are not expected to make decisions whether abuse is occurring or not, but you are expected to report your suspicions.
- Make yourself fully aware and familiar with the Safeguarding Policy and Procedures.
- Report and record suspicions immediately.
- Do not place yourself in a position where a learner may misunderstand your actions or intent.
- Do not make physical contact with any learner unless it is unavoidably necessary within the context of your professional duties.
- Do not swear, use sexual innuendo or sexual references.
- Do not isolate yourself from view if dealing with a learner e.g. providing first aid.
- Do not directly accuse any person of abuse.
- Do not disclose your concerns to any other person other than your Designated Officer or Director
- Maintain confidentiality at all times, but inform the learner who you will be informing.
- Any intervention should be done with extreme caution.
- Do not make any accusations.
- Where possible, two employees should be present if there is any contact with a member of the public suspected of acting inappropriately.
- Employees should monitor all activities which involve young people and vulnerable adults.

It is important to remember that, although a single event may create a serious risk to the person's well being; it is often the accumulation of events, each of which may appear small that causes serious harm.

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Annex 5 - Key Contacts & Websites

Annex 5

Organisation	Contacts
APT Health and Safety Training Solutions Ltd	Shaun Blakemore - Senior Designated Safeguarding Officer Andy Talbot - Deputy Designated Safeguarding Officer Confidential e-mail info@apthealthandsafety.co.uk/

Staffordshire County Council LADO

0800 1313 126

staffordshire.lado@staffordshire.gov.uk

Deaf Community SMS Text

07979031116

Police contact numbers

Non emergency: 101

Emergency: 999

Lead Designated Safeguarding Officer	Deputy Safeguarding Officer
Shaun Blakemore - 07824 363681	Andy Talbot - 07971074023
Shaun.Blakemore@apthealthandsafety.co.uk	Andy.talbot@apthealthandsafety.co.uk

Department for Education
DfE Tel: 02073407264
counter.extremism@education.gov.uk