NAPA Safeguarding Children and Adults at Risk Policy

Owner	Finance and Operations Manager	**Approval**	CEO on behalf of the NAPA Trustees
Version	1.0	**Effective date**	30 September 2026
Evaluate	Annual	**Review**	30 September 2029

Emergency: If anyone is in immediate danger, call 999. Designated Safeguarding Lead: Chief Executive. Deputy Designated Safeguarding Lead: Finance and Operations Manager. Communications safeguarding deputy: Communications and Marketing Manager for communications-specific matters.

Purpose

NAPA is committed to protecting from harm everyone who comes into contact with the charity through its work. This policy explains how NAPA will: prevent abuse, neglect and exploitation; recognise and respond to safeguarding concerns; support safe reporting and information sharing; manage allegations involving NAPA representatives; make referrals to appropriate authorities; and provide effective trustee oversight. Safeguarding is everyone's responsibility.

Scope

This policy applies to: trustees; employees; volunteers; contractors, consultants, associates and trainers; placement workers and agency workers; partner organisations when acting on NAPA's behalf; and anyone otherwise representing NAPA. It applies to NAPA's work conducted: in person; online or by telephone; through training, events, visits and conferences; through the Support Line or other advice services; in members' or partner organisations' premises; during travel and social activities connected with NAPA; and through email, messaging, social media or other digital systems.

Who NAPA safeguards

For this policy: a child is anyone under the age of 18; an adult at risk is an adult who has needs for care and support, is experiencing or at risk of abuse or neglect, and because of those needs may be unable to protect themselves from the abuse or neglect or its risk.

NAPA's safeguarding responsibilities also extend to employees, volunteers and others who may be harmed through their contact with the charity.

NAPA operates across the UK. The applicable statutory authority and legal framework will depend on where the person at risk is located. Referrals must therefore be made to the police, local authority or other safeguarding body responsible for that location.

Safeguarding principles

NAPA will: put the welfare and safety of the person at risk first; listen to and respect the person's wishes, feelings and circumstances; act promptly and proportionately; take concerns seriously without attempting to determine guilt prematurely; promote choice, control and informed involvement; share information lawfully and only as necessary; avoid discrimination and make reasonable adjustments; work with statutory and specialist agencies; maintain secure, accurate records; learn from concerns, incidents and near misses; and ensure trustee oversight and accountability.

NAPA does not investigate whether criminal abuse occurred. That is the role of the police and relevant statutory authorities.

Forms of abuse and harm

Safeguarding concerns may include: physical abuse; sexual abuse or exploitation; psychological or emotional abuse; financial or material abuse; neglect or acts of omission; self-neglect; discriminatory abuse; organisational or institutional abuse; domestic abuse; modern slavery and human trafficking; online abuse, grooming or exploitation; coercive or controlling behaviour; bullying or harassment; radicalisation; abuse by another person receiving care; misuse of medication; improper restraint or restriction; deprivation of liberty; unsafe practice; and conduct that places a child or adult at risk of harm.

A concern may arise from something seen, heard, disclosed, reported or identified through a pattern of behaviour.

Roles and responsibilities

6.1 Board of Trustees – The Board retains ultimate responsibility for safeguarding governance. It will: approve and review this policy; appoint a suitably trained Board safeguarding lead; ensure adequate resources, training and reporting systems; oversee safeguarding risks and serious incidents; receive appropriately anonymised safeguarding reports; ensure lessons and actions are implemented; review the effectiveness of safeguarding arrangements at least annually; and ensure required reports are made to regulators.

6.2 Designated Safeguarding Lead – The Designated Safeguarding Lead will: receive and assess concerns; ensure immediate safety measures are considered; seek specialist or statutory advice; make or coordinate external referrals; maintain a secure safeguarding record; support the person raising the concern; coordinate

allegations involving staff or volunteers; consider DBS and regulatory reporting; report material matters to the CEO, Chair and Board as appropriate; support training and risk assessment; and monitor actions through to closure.

6.3 Deputy Designated Safeguarding Lead – The Deputy will act where the Designated Safeguarding Lead is absent, unavailable or implicated.

6.4 Managers – Managers must: create an environment in which concerns can be raised; respond calmly and promptly; immediately pass safeguarding information to the Designated Safeguarding Lead; avoid conducting their own investigation; implement protective measures; and maintain confidentiality.

6.5 Everyone representing NAPA – Everyone covered by this policy must: remain alert to signs of abuse and unsafe practice; report concerns immediately; cooperate with safeguarding processes; complete required training; follow professional boundaries and the Code of Conduct; and never assume someone else has reported a concern.

Immediate action

If a person is in immediate danger or requires urgent medical assistance: Call 999. Take reasonable action to keep the person and yourself safe. Do not confront the person alleged to have caused harm. Preserve evidence where it is safe to do so. Notify the Designated Safeguarding Lead or Deputy as soon as possible. Make a factual written record.

Where a crime may have been committed but there is no immediate emergency, contact the police on 101 where appropriate and seek advice from the Designated Safeguarding Lead.

Responding to a disclosure

When someone discloses possible abuse or neglect: listen calmly and take them seriously; allow them to speak in their own words; reassure them that they were right to tell someone; explain that information may need to be shared to help keep people safe; do not promise secrecy; ask only open questions needed to clarify immediate safety; do not ask leading or investigative questions; do not confront the alleged person responsible; do not attempt mediation; preserve relevant messages, documents or physical evidence; record what was said as accurately as possible; and report immediately.

Internal reporting routes

A safeguarding concern must be reported immediately, and normally on the same working day, directly to: the Designated Safeguarding Lead; or the Deputy Designated Safeguarding Lead. A person does not need to report through their line manager first. If the concern involves the Chief Executive as Designated Safeguarding Lead, report it

directly to the Chair. If the concern involves both the Chief Executive and Chair, report it to the Vice-Chair or another unconflicted trustee appointed by the Board. If the concern involves the Chief Executive, report it directly to the Chair. If the concern involves the Chair, report it to the Vice-Chair or another unconflicted trustee appointed by the Board.

If internal reporting is unsafe, inappropriate or likely to cause harmful delay, any person may contact the police, local authority safeguarding service or another appropriate statutory agency directly.

Recording a concern

The person receiving or reporting the concern must record: the date, time and place; the identities and contact details of relevant people, where known; what was seen, heard or disclosed; the person's exact words where possible; observed injuries, behaviour or circumstances; immediate safety action taken; who was contacted and when; the person's wishes concerning information sharing; reasons for any decision to share without consent; and their own name, role and signature or secure electronic confirmation. Records must distinguish fact, observation, allegation and professional opinion. The record must be sent securely to the Designated Safeguarding Lead and must not be retained in an informal personal file.

Consent, capacity and information sharing

Where appropriate, NAPA will explain what information it proposes to share, with whom and why, and will seek the person's consent. Information may be shared without consent where this is necessary and proportionate, including where: a child is at risk; a person is in immediate danger; another person may be at risk; a serious crime may have been committed; the person may lack capacity to make the relevant decision; coercion or undue influence may affect the decision; a legal or regulatory duty applies; or the public interest in preventing serious harm outweighs the confidentiality interest. Only relevant and necessary information will be shared. The reasons for sharing or not sharing will be recorded.

A mental-capacity assessment or best-interests decision will be undertaken only by an appropriately authorised person and under the applicable jurisdiction's law.

External referrals

The Designated Safeguarding Lead will determine and document whether referral or notification is required to: emergency services; the police; the responsible local authority child or adult safeguarding service; a local authority designated officer or equivalent service concerning allegations against adults working with children; the Disclosure and Barring Service; a professional regulator; the Charity Commission; the

Office of the Scottish Charity Regulator; an employment agency; a funder, commissioner or insurer; or another relevant body.

Statutory referrals must not be delayed while NAPA completes an internal process.
Allegations involving staff, volunteers or representatives

An allegation that a NAPA representative has harmed, may have harmed or may pose a risk to a child or adult at risk must be reported immediately to the Designated Safeguarding Lead.

NAPA will: protect the person at risk; seek advice from the relevant statutory authority; preserve evidence; consider appropriate interim measures; avoid alerting the subject of an allegation where this could compromise safety or an external investigation; coordinate safeguarding, employment and disciplinary processes; ensure the allegation is investigated by the appropriate authority or an impartial investigator; provide appropriate support to all affected people; and record decisions and outcomes.

Suspension is a neutral protective measure, not a finding of guilt, and will be used only where reasonable and proportionate.

DBS referrals

Where NAPA is a regulated activity provider, it will make a referral to the Disclosure and Barring Service when the statutory conditions are met, including where a person has been removed, or would have been removed had they not resigned or otherwise left, from regulated activity because they harmed or may pose a risk of harm to a child or vulnerable adult.

A referral to another agency does not replace a mandatory DBS referral.

NAPA will also consider whether a discretionary referral is appropriate where the legal duty is not met but relevant safeguarding information should be provided.

Safer recruitment and role management

NAPA will: assess the safeguarding risk of every role; use clear role descriptions and selection criteria; verify identity, references, qualifications and work history as appropriate; undertake only legally eligible DBS checks at the correct level; assess disclosed information fairly and proportionately; provide safeguarding induction before unsupervised activity; establish professional boundaries and supervision; review suitability where a role changes; and manage allegations and low-level concerns consistently.

No DBS check will be requested unless NAPA is legally entitled to obtain it.

Code of behaviour

People representing NAPA must: maintain appropriate professional boundaries; use approved communication channels; avoid favouritism, exploitative relationships and inappropriate gifts; obtain proper consent for images or recordings; avoid being alone with a child or adult at risk unless authorised and risk assessed; never use degrading, sexualised, threatening or discriminatory language; never exchange personal contact information without an approved reason; report boundary concerns and unsafe practice; and comply with NAPA's digital, social-media and data-protection requirements.

Training

Safeguarding training will be proportionate to the role. At minimum: all staff, trustees and relevant volunteers will receive safeguarding induction; refresher training will normally occur at least annually; the Designated Safeguarding Lead and Deputy will receive advanced role-specific training; trustees will receive safeguarding-governance training; and training completion will be recorded and monitored.

Confidentiality, records and retention

Safeguarding records will be: stored separately from general personnel or service records where appropriate; encrypted or kept in locked storage; accessible only to authorised people; retained under an approved retention schedule; shared only where necessary and lawful; and securely destroyed when retention is no longer required. Safeguarding information must never be entered into an unapproved AI tool or personal account.

Support and protection

NAPA will consider appropriate support for: the child or adult concerned; family or carers where appropriate; the person who made the report; witnesses; employees or volunteers affected by the process; and the subject of an allegation, without compromising safety or investigation. No person will suffer retaliation for raising a genuine safeguarding concern.

Serious incidents and learning

The Designated Safeguarding Lead and CEO will consider every material safeguarding matter under NAPA's Serious Incident Reporting Policy. Following an incident, NAPA will consider: immediate and underlying causes; whether policies were followed; whether risks or controls require revision; training or supervision needs; regulatory reporting; communication with affected people; and actions required to prevent recurrence.