

West End Impact Safeguarding Policy

May 2026

Organisation Details

Organisation: West End Impact
Charity No.: 1153736
Address: 4-10 Heysham Road, Morecambe, LA3 1DG
Tel No: 01524 888929
Email address: info@westendimpact.org.uk
Safeguarding Lead: Michael Kohl
Safeguarding Deputy: Emma Wareing



We recognise that the welfare of children, young people and vulnerable adults is paramount and that all children, young people and vulnerable adults, regardless of age, disability, gender, gender reassignment, pregnancy, maternity, marriage/civil partnership, race, religion and/or sexual orientation (all defined as protected characteristics within the Equality Act 2010) have the right to equal protection from all types of harm or abuse. Working in partnership with children, young people, vulnerable adults and their family, support network, volunteers, trustees and staff is essential in promoting and embedding this policy. This policy is subject to the laws and guidance of England, Wales; it is also in-line with the Local Safeguarding Partnerships in England (previously LSCB).

Safeguarding Objective

It's the policy of West End Impact to safeguard the welfare of children, young people and vulnerable adults by protecting them from neglect and from physical, sexual and emotional harm. The Safeguarding Policy is for everyone involved at West End Impact and includes all volunteers, trustees and staff.

The Safeguarding policy underpins everything West End Impact does for our clients and all of those using our services. It offers guidance for anyone who has a concern about the welfare of a young person or adult at risk, and how to report a safeguarding allegation or disclosure.

This policy is informed by the Human Rights Act 1998 and the UN Convention on the rights of the child, 1992.

West End Impact's Responsibilities

- To ensure that all staff, trustees and volunteers are aware of this policy and are adequately trained
- To notify the appropriate agencies if abuse is suspected
- To cooperate with the appropriate agencies in safeguarding investigations
- To DBS check all staff, trustees, and those volunteers that have direct access to children, young people or adults at risk with the appropriate level of DBS checks (enhanced with/without barred list checks or basic)
- To ensure that DBS checks continue to be carried out as required by legislation
- To record any concerns raised appropriately, confidentially and meeting the requirements of GDPR

Underpinning Legislation

This list is not exhaustive.

- Children Act 2004
- Working Together to Safeguard Children 2023
- Health Safety and Welfare Act 1974
- Data Protection GDPR 2018
- Equality Act 2010
- Safeguarding Vulnerable Groups Act 2006
- The Care Act 2014
- Adult Safeguarding: Prevention and Protection in Partnership July 2015
- Mental Capacity Act (2005)
- Children and Families Act 2014
- Human Rights Act 1998
- UN Convention on the rights of the child, 1992
- Charities Act 2011, Charities (Protection and Social Investment) Act 2016
- Domestic Abuse Act 2021
- Modern Slavery Act 2015
- Online Safety Act 2023
- Terrorism Act 2000

In addition, we will ensure that our premises meet the requirements for disabled access, where possible, and are welcoming and inclusive.

Partner Agencies

The diversity of organisations and settings means there can be great variation in practice when it comes to safeguarding of children, young people and vulnerable adults.

We therefore have clear guidelines regarding our expectations of those with whom we work in partnership. We discuss with all partner agencies our safeguarding expectations and have a partnership agreement for safeguarding.

We expect all organisations using our premises as part of a letting agreement to have a Safeguarding Policy that conforms to all relevant UK laws and standard.

Safer Recruitment of Staff

West End Impact will ensure all staff will be appointed, trained, supported and supervised in accordance with government guidance on safe recruitment. This includes ensuring that:

- There is a written job description / person specification for the post
- Those applying have completed an application form and a self-declaration form
- Those short listed have been interviewed
- Safeguarding has been discussed at interview
- Written references have been obtained, and followed up where appropriate
- A disclosure and barring check is completed where necessary (we will comply with Code of Practice requirements concerning the fair treatment of applicants and the handling of information)
- Qualifications, where relevant, have been verified
- A suitable training programme is provided for the successful applicant
- The applicant has completed a probationary period
- The applicant has been given a copy of the organisation's Safeguarding Policy and knows how to report concerns.

Safeguarding training

West End Impact is committed to on-going safeguarding training and development opportunities for all staff, volunteers and trustees, developing a culture of awareness of safeguarding issues to help protect everyone. All our staff and trustees will receive induction training and undertake safeguarding training on a regular basis.

West End Impact will also ensure that children and adults with care and support needs are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.

Definition of Terms Used to Describe Clients

A **Child** is anyone below the age of 16

A **Young Person** is anyone aged 16 to 18

A **Vulnerable Adult** is:

- an adult who has needs for care and support
- an adult who is experiencing or at risk of abuse or neglect
- an adult who, as a result of their care and support needs, is unable to protect themselves from either the risk of, or experience of abuse or neglect

Definitions of Abuse

West End Impact recognises the four overarching types of abuse: Neglect and Physical, Emotional and Sexual Abuse.

Neglect is defined as the persistent failure to meet a child or vulnerable adult's basic physical and/or psychological needs, likely to result in the serious impairment of the child or vulnerable adult's health or development.

Examples of Neglect include:

Physical Neglect

Basic needs such as food, clothes and shelter not being met. Not being kept safe.

Emotional Neglect

This could be through ignoring, humiliating, intimidating or isolating an individual.

Medical Neglect

This could include inability to access appropriate medical care or dental care or ignoring medical recommendations

Educational Neglect

In children and young people this is where a parent or carer does not ensure that they are given an education

Signs of Neglect

- being smelly or dirty
- being hungry or not given money for food
- having unwashed clothes
- having the wrong clothing, such as no warm clothes in winter
- having frequent and untreated nappy rash in infants
- anaemia
- tiredness

- body issues, such as poor muscle tone or prominent joints
- medical or dental issues
- missed medical appointments, such as for vaccinations
- not given the correct medicines
- poor language or social skills
- living in an unsuitable home environment, such as having no heating
- showing signs of self-harm
- using drugs or alcohol.

This is not an exhaustive list.

Physical Abuse is defined as deliberately hurting a young person or vulnerable adult causing injuries such as bruises, broken bones, burns or cuts.

Signs of Physical Abuse

- bruises
- burns or scalds
- bite marks
- fractures or broken bones
- torn clothing
- fabricated illness
- respiratory problems
- vomiting, drowsiness or seizures

This is not an exhaustive list, and some of these signs may not point to abuse in all cases. For instance, bumps and bruises are not necessarily a sign of abuse.

Emotional Abuse is defined as continual emotional mistreatment of an individual. It's sometimes called psychological abuse. Emotional abuse can involve deliberately trying to scare, humiliate, isolate or ignore an individual.

Signs of Emotional Abuse

- humiliating or constantly criticising
- threatening, shouting at an individual or calling them names
- making the individual the subject of jokes, or using sarcasm to hurt an individual
- blaming and scapegoating
- making an individual perform degrading acts
- not recognising an person's own individuality or trying to control their lives
- pushing an individual too hard or not recognising their limitations
- exposing an individual to upsetting events or situations, like domestic abuse or drug taking
- failing to promote an individual's social development
- not allowing them to have friends
- persistently ignoring them
- manipulation

- never saying anything kind, expressing positive feelings or congratulating on successes
- never showing any emotions in interactions with a person, also known as emotional neglect.

This is not an exhaustive list.

Sexual Abuse

Contact Sexual Abuse is defined as involving touching activities where an abuser makes physical contact with a young person or unwanted physical contact with a vulnerable adult, including penetration.

Non-Contact Sexual Abuse is defined as non-touching activities, such as grooming, exploitation, persuading an individual to perform sexual acts over the internet or flashing.

Signs of Sexual Abuse

- Avoiding being alone with or frightened of people or a person they know.
- Language or sexual behaviour you wouldn't expect them to know.
- Having nightmares or bed-wetting.
- Alcohol or drug misuse.
- Self-harm.
- Changes in eating habits or developing an eating problem.
- Changes in their mood, feeling irritable and angry, or anything out of the ordinary
- Bruises.
- Bleeding, discharge, pains or soreness in their genital or anal area.
- Sexually transmitted infections.
- Pregnancy

This is not an exhaustive list.

Other Types of Abuse

West End Impact recognises that there are other types of abuse that our staff, volunteers and trustees should be aware of. These include:

- Financial Abuse – the misuse or theft of money or property
- Bullying
- Cyberbullying
- Online Abuse
- Criminal Exploitation and Gangs
- Female Genital Mutilation
- Domestic Abuse
- Radicalisation

Responding to concerns

- In the first instance, it is important to consider whether someone is in immediate danger or has been subject to a crime.
- Medical Treatment should always be sought where necessary via 111 or 999 in an emergency.
- Criminal Acts must be reported to the police. Dial 101 or 999 in an emergency.
- Always inform the Manager of West End Impact Michael / Tracy Kohl and / or the safeguarding lead of your concerns and any actions taken
- If in doubt whether to raise a safeguarding concern and require further advice and information, please contact the appropriate number below.

Being Approached with a Disclosure of Abuse

If a child, young person or vulnerable adult discloses abuse to you:

1. Allow them to speak without interruption and accept what they say
2. Be understanding and reassuring but do not give an opinion
3. Tell them that you will try to offer support but that you must pass this information on.
4. Tell the Safeguarding Lead or Deputy straight away
5. Write careful notes on what was said, using actual words where possible
6. Sign and Date your notes and pass to the Safeguarding Lead or Deputy
7. Do not investigate

If You Suspect Abuse

1. Report it to the Safeguarding Lead or Deputy immediately
2. Write careful notes on what you have witnessed, heard or been told
3. Sign and Date your notes and pass to the Safeguarding Lead or Deputy
4. Do not investigate

Do not discuss with parents or carers unless you are advised to do so.

Taking careful notes

West End Impact has an online accident & incident report form which guides you through some important questions. <https://tinyurl.com/yyxc7srd>



A more comprehensive form, especially if you are making a referral or are reporting a safeguarding concern can be found in Appendix 2.

If you are taking your own notes in paper form, ie with the form in Appendix 2 make sure you store them confidentially.

Golden Rules of Information sharing:

Protecting a child from such harm takes priority over protecting their privacy, or the privacy rights of the person(s) failing to protect them

- Wherever it is practicable and safe to do so, engage with the child and/or their carer(s), and explain who you intend to share information with, what information you will be sharing and why.
- You do not need consent to share personal information about a child and/or members of their family if a child is at risk or there is a perceived risk of harm
- Seek advice promptly whenever you are uncertain or do not fully understand how the legal framework supports information sharing in a particular case
- Take steps to protect the identities of any who might suffer harm if their details became known to an abuser or one of their associates.
- Only share relevant and accurate information with individuals or agencies/organisations that have a role in safeguarding the child and/or providing their family with support, and only share the information they need to support the provision of their services
- Record the reasons for your information sharing decision, irrespective of whether or not you decide to share information

Key Considerations for safeguarding procedures

Decision making around safeguarding can be complex.

Any incident may consist of several types of abuse which must be factored into decision making. Vulnerable adults may not see themselves at risk and refuse support, or it may be their actions are putting other members of the public or children at risk.

- What is the primary concern?
- What type of issue / abuse or neglect does it relate to.
- How long has the alleged safeguarding issue / abuse / neglect been occurring for?
- Is there a pattern of abuse / neglect?
- Have there been previous concerns relating to the adult / child at risk, e.g. Anti-social behaviour, hate crime incidents and concerns in relation to the person alleged to be causing harm?
- Are any other adults at risk?
- Is the situation monitored and by whom?
- Are other agencies involved, aware? If so who, do they need informing and what safeguarding input is already in place.
- Are the incidents increasing in frequency and/ or severity?
- Are there children present? If so, consider making a referral to Children's Social Care by contacting Lancashire's Customer Access

Whether an incident is low risk, and no harm occurs, medium risk or high risk, it is important to consider and document the views and actions of both the individual/s concerned and professionals. What effect did it have on the individual and any others involved? Actions taken must be person centred and outcome focused, and all must be recorded as per record keeping policy guidance.

How to Assess the level of risk of harm

Any concern / risk or abuse may be identified and classified as:

Low risk: No immediate or significant harm, isolated incident: **NOT SAFEGUARDING.**

Medium Risk: Some harm or risk of harm/ abuse: **POSSIBLE SAFEGUARDING.** Gather more information to inform decision making and next step.

Medium to High Risk: Some or significant harm or risk of harm: **SAFEGUARDING.**

Examples and further guidance for each of these classifications can be found for the different types of abuse at

<https://www.lancshiresafeguarding.org.uk/media/1453/V2-Guidance-for-Safeguarding-Concerns-final.pdf>

Whatever level of risk identified, the concerns, risks and appropriate actions necessary should be discussed with the individual involved, agreed upon and consented to wherever possible and acted upon in a timely manner and documented in the notes.

Please note immediate danger, the need for urgent risk, need for medical attention or a medium to high risk of significant risk of harm to a child overrides the need for informed consent

Where a medium to high risk of significant harm is identified, further enquiry and assessment may be necessary from Adult or Children's Social Care, the police and / or Mental Health Services.

https://lancashire-self.achieveservice.com/service/Lancashire_Safeguarding_Adults_Alert_Process?epp=professional

Guidance for making referrals and the online referral form for social care is available as a method of evidencing concerns, actions taken and the decision-making process. It is good practice to use this for every safeguarding concern.

See online safeguarding referral form and guidance for making a referral at Lancashire County Council Website

Adult Social Care; Report an Adult Safeguarding concern

<https://www.lancashire.gov.uk/health-and-social-care/adult-social-care/report-a-concern-about-an-adult/professional/danger/>

Children's Social Care; Report a child safeguarding concern

<https://www.lancashire.gov.uk/practitioners/supporting-children-and-families/safeguarding-children/requesting-support-from-childrens-services/>

Where a referral to adult or children's social care is deemed necessary the individual should be informed, where appropriate consent sought, and the referral logged via the appropriate duty officer at the appropriate customer care service (see Referral contact numbers below in Appendices 1) and followed up in writing within 24 hours of the incident being logged on the appropriate referral form.

Where concerns exist around mental capacity and psychological wellbeing referrals can be made to the Crisis Mental Health Team or Start team. (See Appendices 1 for further details).

Where the wellbeing and safety of a child is a matter of concern every effort should be made to seek the consent of the parents before a referral is made unless this disclosure, discussion and consent would put the child welfare more at risk or a parent's lack of consent could mean that a child may continue to be at a medium to high risk of significant harm.

Any need for referral should be acted upon in a timely manner. The appropriate agency contacted and the duty officer in social care informed of your concerns and the referral followed up in writing within 24 hours of the incident.

Allegations of Abuse Against Staff, Volunteers or Trustees

If an allegation of abuse is made about a member of staff, a volunteer or a trustee, West End Impact will immediately suspend them pending the outcome of any investigation by a statutory agency.

Your Responsibility

It is your responsibility to report a safeguarding issue immediately.

West End Impact are members of thirtyone:eight who are able to provide support on safeguarding issues. If you are in doubt you should contact the Safeguarding Lead or their Deputy, or you can call the thirtyone:eight helpline on 0303 003 11 11 for advice, help and guidance.

If the Safeguarding Lead or Deputy are unavailable, or if the report involves the Safeguarding Lead or Deputy, you should contact the trustee responsible for safeguarding, or contact thirtyone:eight for advice or do not hesitate to report the concern directly to the relevant agency.

Contact:

Children's Social Services

Tel: 0300 123 6720

Out of Hours: 0300 123 6722

Adult Social Services

Tel: 0300 123 6720

Police Protection Team

Tel: 0845 125 3545

thirtyone:eight helpline

Tel: 0303 003 11 11

Mental Health Start Team

01524550 541

Independent Sexual Violence Advisor [bfwh.idva.isva@nhs.net](mailto:bfw.h.idva.isva@nhs.net)

Independent Domestic Violence Adviser [bfwh.idva.isva@nhs.net](mailto:bfw.h.idva.isva@nhs.net)

If sexual assault (forensics and support) 01772 523344

If the child, young person or vulnerable adult has a physical injury, seek medical help.

If you feel that the person is in immediate danger, call the police on 999.

Who has access to the report?

The following people will be informed of a safeguarding disclosure:

- The Safeguarding Lead and Deputy (if appropriate)
- The Trustee with responsibility for Safeguarding (if appropriate)
- Designated Officer or LADO (Local Authority Designated Officer) if the allegation concerns someone working with a child or young person
- Social Services, the Police, DBS as appropriate

There is no requirement for statutory agencies to report the results of their investigations back to West End Impact.

Internal Reporting**Safeguarding Lead:**

Michael Kohl

Tel: 07960245017

Email: michael@westendimpact.org.uk

Deputy Safeguarding Lead:

Emma Wareing

Tel: 07733203235

Email: emma@westendimpact.org.uk

Trustee with responsibility for Safeguarding

Mary Gibson

Tel: 07786840606

Email: marygibson2001@gmail.com

This document will be reviewed every 12 months or if legislation changes.

Policy Accepted By

Name: Michael Kohl

Role: Safeguarding Lead

Date: 15/03/2023

Signature: 

On behalf of the management of West End Impact

Name: Darren Phillips

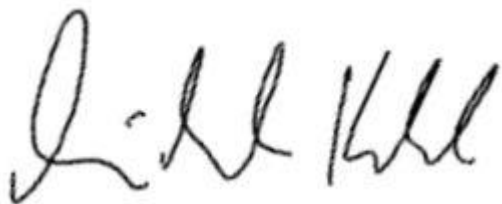
Role: Chair of Trustees

Date: 15/03/2023

Signature: 

On behalf of the trustees of West End Impact

Last checked and updated by Michael Kohl 24/06/2025



Appendix 1 – The Parish Nurse’s Project Safeguarding Policy and Procedure

Introduction, Aim and Purpose

These procedures define and outline how the Parish Nurses, working within West End Impact, will operate to safeguard children, young people, and adults at risk of abuse neglect or harm.

They do not replace but rather uphold and compliment the intentions and remit of West End Impact’s safeguarding policy.

As registered nurses providing health care support and provision within a registered charity Parish Nurses have a professional duty under the Nursing Midwifery Council (NMC) to prioritise people and always preserve safety. They are committed to the protecting the safety of everyone they meet through work both on and off site. This includes service users, their children and associates, volunteers, and staff. As nurses working with the homeless, those at risk of homelessness and the Gypsy and Romany community it is important that action is taken without delay if someone’s safety or public protection is at risk.

Responsibilities of Parish Nursing Care under the West End Impact Safeguarding Policy

West End Safeguarding policy highlights a commitment to stopping abuse where it is happening and preventing abuse where there is a risk that it may occur.

People who are homeless or at risk of such are additionally vulnerable to significant harm and abuse due to several mitigating circumstances.

The Parish Nurses role in promoting health and wellbeing and preventing harm in this group makes them ideally situated to identify harm, risk or abuse and respond effectively if concerns are raised. Protection of all who are at risk of harm, whether staff, service user or their associates is of utmost importance.

Best Practise Guidelines for the Parish Nurse Safeguarding Procedures

All suspicions and allegations of risk, abuse or neglect must be properly reported to the relevant internal and external authorities and dealt with swiftly and appropriately.

The local authority retains the responsibility for overseeing a safeguarding enquiry and ensuring that any investigation satisfies its duty under section 42 to decide what action (if any) is necessary to help and protect the individual and public and ensure actions are taken as necessary.

All procedures are underpinned by the principles of the Care Act (2014) and Mental Capacity Act (2005).

Nurses have a duty of care to always act in a person's best interests whilst upkeeping all relevant laws around the Mental Capacity Act (2005) and make sure that the rights and best interests of those who lack capacity are still at the centre of the decision-making process.

All incidents and referrals made must be recorded and reported using the procedures in the main policy body.

If further support and assessment is deemed necessary, then the parish nurse should explain why and involve and empower the individual concerned. Advise what actions are necessary, whom they need to contact, why and what information is required to share.

Document any concerns and actions taken in the patient's confidential record as outlined above.

Interagency collaboration and effective communication are central to the safeguarding of all individuals.

A Nurse's Professional Duty of Confidentiality must always be maintained, and safeguarding information only shared with other professionals and agencies when patient safety and public protection is at risk if such information were not shared. In cases like this informed consent for information sharing and referral should always be sought inclusive of explanation around the reason and the content to be shared, unless by seeking this consent the level of risk or significant harm would increase. (NMC Code of Conduct 2022, accessible online).

Appendix 2 - Lancashire Safeguarding Adults Board Safeguarding Concerns Checklist

Where abuse or neglect is suspected this checklist & referral form can aid professional judgement to ensure that your service is taking appropriate action. The completed form can also be used to refer your safeguarding concern to the Customer Access Service and, if appropriate, to notify the Care Quality Commission (CQC).

The CQC, Contracts or Commissioners may ask to see evidence of the actions that have been taken following a potential safeguarding concern. This form will help to ensure the correct level of information is available to assist with your decision making and provides a standardised approach to raising a safeguarding concern within Lancashire.

When raising a safeguarding concern completed forms should be sent to
ACSCustomer.Services@lancashire.gov.uk

Section 1 – Details of the Adult at Risk

The name of the individual	
Their Date of Birth	
Their Address & Post Code (Name of unit, if living in a care home)	
The GP Name and address	
Their medical diagnosis e.g. dementia or disability	
Does the individual have capacity regarding the safeguarding concern?	Yes: ☐ No: ☐
	Record details:
Has the safeguarding concern been discussed with the individual	Yes: ☐ No: ☐
	Record details:
Has the individual been asked what outcome they would like in relation to the safeguarding concern?	Yes: ☐ No: ☐
	Record details:
If the individual lacks capacity regarding the safeguarding concern, has their representative/advocate, been informed?	Yes: ☐ No: ☐

Section 2 – Details of the person reporting the concern

Name of person reporting the concern	
Name of the employee organisation	
Position in the organisation	
Relationship to the adult at risk	
The work Address & Post code (if different)	
The office telephone number	

Section 3 – Details of person(s) alleged to have caused harm (if appropriate)

Name(s)	
Date of Birth (if known)	
Address & Post Code	
The capacity that they know the adult at risk	

Section 4 – Summary of the incident, including details of the specific incident, dates and times (if known) and what has been put in place to prevent this occurring again

Details of the safeguarding concern(s) including dates and times.	
The impact on the individual	
Was this a foreseeable incident e.g. Had the same incident occurred previously?	Yes: ☐ No: ☐
	Record details:
If yes, was a risk assessment in place?	Yes: ☐ No: ☐
	Record details:
If a risk assessment was in place, was this followed?	Yes: ☐ No: ☐
	Record details:
Describe the steps that have been put in place to prevent this from occurring again. <i><u>Within this section, please include any immediate actions taken, further learning, changes to systems as well as any training or disciplinary action as appropriate.</u></i>	State the immediate actions you have taken: Additional information:
If a medication error has involved a controlled drug, this must be reported to www.cdreporting.co.uk	

Section 5 - Actions taken to protect the adult at risk from harm (if appropriate)

Has the relevant professional advice been sought if appropriate i.e. medical/Police?	Yes: ☐ No: ☐
If yes, what advice was given?	
Has this incident resulted in the need for treatment or additional support?	
Are there new risk assessment/strategies in place?	
Has any other additional support been put in place - supervision/observations etc?	
Details of referrals made to other agencies e.g. falls team, tissue viability or mental health services etc.	

Section 6 – Safeguarding Checklist Summary of actions taken and professional reasoning

Raise a safeguarding concern	Yes: ☐ No: ☐ Record details:
Inform Police	Yes: ☐ No: ☐ Record details (Include log number):
Referral to Disclosure and Barring Service	Yes: ☐ No: ☐ Record details:
Notify Care Quality Commission	Yes: ☐ No: ☐ Record details:
Seek further advice/guidance	Yes: ☐ No: ☐ Record details:
Actions put in place & learning shared	Yes: ☐ No: ☐ Record details:

Safeguarding Concerns Checklist Completed By:	
Position in the Organisation:	
Date of Completion:	

