**SAFEGUARDING POLICY & PROCEDURES**

**POLICY**

The trustees of Dorchester Municipal Charities (DMC) consider abuse in all its forms to be unacceptable, whomever it is directed towards. Our residents’ wellbeing is at the heart of our work and this policy is designed to safeguard DMC’s residents and their visitors from abuse. DMC does not work directly with children but a procedure is listed for dealing with concerns about the welfare of visiting children. Staff, volunteers, trustees, professional visitors and contractors are protected by different policies and procedures.

* DMC is committed to enabling residents to live free from harm and the following procedures assist in this commitment
* Any resident who feels they are experiencing abuse in any form should report this immediately to the Warden or Clerk to the Trustees.
* DMC trustees and staff endeavour to respect the dignity, privacy, independence and individuality of residents in their implementation of these procedures
* DMC is committed to the six principles of safeguarding: Empowerment, Prevention, Proportionality, Partnership, Accountability and Protection.
* DMC works in partnership with local agencies such as health and social care colleagues, to prevent, detect and report abuse.
* DMC may share personal information with local authorities in relation to safeguarding issues, according to the DMC Privacy Notice
* DMC engages fully with local Multi-Agency Public Protection arrangements (MAPPA) and Multi-Agency Risk Assessment Conference (MARAC) as required (see Glossary at appendix 4)
* This policy should be used in conjunction with the current Multi-Agency Procedures for the Protection of Adults with Care and Support Needs in Dorset, Bournemouth, Christchurch and Poole, a copy of which is held in the office alongside this policy.
* The Chairman of the Welfare Group acts as DMC’s designated safeguarding lead.
* Failure to follow this policy and related procedures will be dealt with by the Trustees as a very serious matter.

**WHO IS AN ADULT AT RISK?**

Under local safeguarding procedures, an adult is considered at risk if he or she meets the following criteria:

* Has care and support needs ie needs some assistance to help maintain independence, or is a carer AND
* Is experiencing or at risk of abuse or neglect AND
* As a result of those care and support needs is unable to protect themselves from either the risk or the experience of abuse or neglect.

**WHAT IS HARM?**

Harm can take place anywhere and harmful acts may be crimes. For the purposes of this policy, harm is defined as:

* a single act or repeated acts
* An act of neglect or a failure to act
* Multiple acts eg financial harm and neglect
* Self neglect

The impact on the person and the harm or risk of harm is key in safeguarding vulnerable adults, rather than intent.

**CATEGORIES OF HARM**

|  |  |
| --- | --- |
| Physical abuse | Domestic violence and abuse |
| Psychological abuse | Financial or material abuse |
| Sexual abuse | Sexual exploitation |
| Neglect and acts of omission | Self-neglect and hoarding |
| Modern slavery | Discriminatory abuse |
| Internet/cyberbullying | Organisational abuse |
| Forced marriage | Exploitation by radicalisation |
| Cuckooing | Homelessness\* |

Please see Glossary at Appendix 5 for further details about these categories.

**PREVENT DUTY**

DMC staff and trustees are provided with information about the need to prevent people from being drawn into terrorism, in accordance with the Counter-Terrorism and Security Act 2015 and government guidance. Referrals are undertaken as necessary. Further information is available in the Safeguarding folder in the office or at <https://www.dorsetcouncil.gov.uk/your-community/community-safety/prevent.aspx> or <https://www.gov.uk/government/publications/prevent-duty-guidance/revised-prevent-duty-guidance-for-england-and-wales>

**PREVENTING HARM**

1. **Disclosure and Barring Service (DBS) checks**

The charity carries out DBS checks where appropriate. Following the Safeguarding Vulnerable Groups Act 2006, only those people undertaking ‘regulated activities’ on a regular basis and their Manager are eligible for an Enhanced DBS check. DBS checks are carried out as follows:

Warden, Financial Clerk, General Manager: Enhanced DBS check

Cleaner, Trustees: Basic DBS check

Please see Staff Recruitment Policy & Procedures and Trustee Recruitment Policy & Procedures for further information.

DMC will pay for DBS checks and their portability.

DMC accepts checks undertaken by other organisations.

1. **Staff training**

Staff undertake safeguarding adults training at regular intervals, if appropriate to their role (see list at 1. Above). Children’s safeguarding training is not undertaken by DMC staff but information is held in a Safeguarding Children folder in the office.

**3. Preventing personal gain from vulnerable people**

* The Charity has policies in place to prevent Trustees, Staff and Volunteers from exploiting the resources of residents. These include the Financial Policy and Anti-Bribery Policy.
* The Warden is a trained Scam Champion and information about the latest scams is provided to residents in regular newsletters.

**HISTORIC ABUSE**

If there is a historic allegation of abuse and the adult is no longer at risk, this will be reported to the appropriate authorities such as Adult Social Care, Police, Children’s’ Social Care.

**SELF NEGLECT AND HOARDING**

**Self-neglect** is described as:

* lack of self-care: neglect of personal hygiene, nutrition, hydration and/or health, thereby endangering safety and wellbeing, and/or
* lack of care of one’s environment: squalor and hoarding, and/or
* refusal of services that would mitigate risk of harm*.*

**Hoarding** can be described as collecting and being unable to discard excessive quantities of goods or objects.

Concerns about an individual who is thought to be self-neglecting/hoarding may not fall into the remit of a safeguarding investigation. However safeguarding procedures will be appropriate if:

* a carer is responsible for the neglect or hoarding
* there is a serious concern about the extent to which someone is harming themselves through self-neglect
* the person lacks mental capacity to make decisions about their welfare

DMC seeks to engage with people who self-neglect and/or hoard and help them find ways to manage this behaviour, using the agency guidance listed in the Self-neglect and Hoarding folder in the office. The procedure below lists the steps to take when concerns are raised.

DMC engages fully with Multi-Agency Risk Assessment Meetings (MARM) as appropriate.

Further information can be found in the Self-Neglect and Hoarding folder in the office which contains guidance and information.

**PROCEDURES**

**RAISING A CONCERN**

1. **Trustees, volunteers and staff**

If a trustee, volunteer or member of staff witnesses harm to one of our residents or harm is disclosed by one of our residents, they should take the following steps promptly. A flowchart of this information is available at Appendix 2:

* Ensure the person is immediately safe. This could mean contacting the emergency services such as police or ambulance to report the incident and get urgent assistance (see Appendix 1 for contact details)
* Listen carefully and calmly to what the person is saying
* Establish the basic facts; do not ask lots of questions
* Reassure the person that they will be involved in decisions about what will happen
* Do not be judgemental or jump to conclusions
* Assume the person has mental capacity. If in doubt a mental capacity assessment may be required. Information on mental capacity is located in this safeguarding folder.
* Ask the person’s permission to raise a concern. If they decline and risks are significant or other adults or children may be at risk, you may have to override their wishes
* Do not promise that you will keep the information confidential or secret. Explain you will need to tell another person but you will only tell people who need to know so they can help
* Do not discuss the concern with the person alleged to have caused harm.
* Written record – record a chronological record of what was seen or you have been told and ask any other witnesses to do the same. Include the following in the written record (see Appendix 4. Copies of the proforma are available with this policy):
	+ Date and time of disclosure or incident
	+ Who was involved and any witnesses
	+ Exactly what happened, in the person’s own words, keep it factual
	+ The views and wishes of the resident including consent to report the concern
	+ The appearance and behaviour of the resident
	+ Any injuries observed
	+ Any actions and decisions taken at this point
	+ Any other relevant information – eg previous incidents that have caused you concern.
	+ Ensure your writing is neat and the record can be photocopied
	+ Print your name on the record and date and sign it.
	+ Store the record in a safe place until needed.
* Inform the General Manager of the situation as soon as possible. If the General Manager is not available or the concern involves the General Manager, please contact the local safeguarding team direct (see Appendix 1) and inform the Safeguarding Lead or a member of the Welfare Group of the situation as soon as possible.
* See Steps to Safeguarding Summary Flowchart at Appendix 3 for brief information about the safeguarding process.
1. **Residents**

Information about abuse is displayed on-site.

Residents are encouraged to speak to DMC staff or trustees if they are concerned about one of our residents and to contact the police on 999 if a crime is being committed or someone needs medical assistance.

**WHEN A CRIME IS SUSPECTED**

If a trustee, volunteer or member of staff suspects that a crime may have been committed:

* Inform the police. **In an emergency, call 999**. Otherwise, contact Dorset Police Multi Agency Safeguarding Hub (see list of important numbers at Appendix 1)
* Provide clear and accurate information about the situation
* Try not to disturb the scene as forensic evidence may be required
* Ask the police for help to preserve evidence if eg physical or sexual assault has occurred
* If in doubt ask the police for advice
* Report the concern to the Safeguarding Adults contact point at the County Council (see Appendix 1)

**DOMESTIC VIOLENCE / ABUSE**

If trustees, volunteers or staff suspect that someone is experiencing or is at risk of domestic violence or abuse, they will:

* Follow the steps listed here for Raising a Concern
* Read the Safe Lives Risk Identification Checklist Guidance (copies are available in the Domestic Violence / Abuse folder in the office) to determine whether this is a high risk case
* Complete the Safe Lives Risk Information Checklist (copies available as above)
* The result of this checklist will determine whether a referral is required to the Multi-agency Risk Assessment Conference (MARAC). These meetings are held in Dorset every 3 weeks.
* If indicated, consider making a referral to MARAC using the MARAC Referral Form (copies available as above). This may need to be done via the Safeguarding Team due to the need for a secure email to be sent to the Police. The MARAC Flowchart (copy available as above) explains the referral process.
* If a referral is not necessary, consider referring to a specialist domestic violence and abuse support service (copies available as above)
* Advise General Manager & Clerk to the Trustees of action taken, for DMC records.

**SELF NEGLECT AND HOARDING**

If trustees, volunteers or staff suspect that someone is self-neglecting or hoarding, they will:

* Ensure they are familiar with the guidance and toolkit held in the office.
* Complete the ‘Professionals checklist for establishing if a concern meets the criteria of self-neglect’ and take the necessary steps listed. Discuss the results with their Manager or a member of the Welfare Group.
* Information will be shared appropriately and securely only with those who need to see it and only in the best interest of the adult concerned. Further information is available in the toolkit available in the DMC office.
* In cases of hoarding, use the ‘clutter tool’ and ‘Professionals guidance questions’ then complete the ‘Practitioner’s hoarding assessment’ and ‘Self-neglect and hoarding assessment tool’, available in the office. Discuss the results with a Manager, Safeguarding Lead or a member of the Welfare Group.
* Take appropriate action to support the resident as identified in the various assessments.
* A Multi-agency Risk Meeting (MARM) may be arranged if required.

**SAFEGUARDING CHILDREN**

Trustees and staff are aware that if children are in regular contact with someone who is being harmed or neglected, they too could be at risk. If trustees or staff are concerned about the welfare of a child visiting DMC they will:

* Phone the Police or ambulance immediately on 999 if a crime is being committed or a child is in need of medical assistance.
* Follow the guidance in the Pan-Dorset Inter-Agency Safeguarding Children’s Procedures the duty to refer (a copy is held in the office with this document). Further information is available at <https://pandorsetscb.proceduresonline.com/>
* Consider making a referral to Children’s social care using the referral guidance in the safeguarding folder (see appendix 1 for number).

**ALLEGATIONS AGAINST STAFF, VOLUNTEERS OR TRUSTEES**

1. **Employees**

Allegations against employees will be dealt with in accordance with the Disciplinary Policy and Procedure or Whistleblowing Procedure.

1. **Volunteers or trustees**

Allegations against volunteers or trustees will be dealt with in accordance with the Serious Incident Reporting Policy & Procedures.

**THE ROLE OF THE GENERAL MANAGER**

If the General Manager considers harm has taken place (s)he will:

* Report the concern to the Police if a crime has been committed – discuss risk management and forensic considerations
* Report the concern to the local safeguarding team who will decide on the most appropriate course of action.
* Arrange immediate safeguarding actions as recommended by the safeguarding team
* Utilise Disciplinary Policy & Procedures if a member of staff is suspected.
* Any offence defined by regulations must be reported to the Disclosure and Barring Service whether or not the employee’s employment is terminated.
* If the person causing harm is also an adult at risk, attend to needs but do not discuss alleged harm
* Support employees and keep them informed on a need to know basis
* Record the concern and actions taken in DMC records.
* This information will be shared with the Welfare Group.
* The Welfare Group will decide whether the Charity Commission should be informed of the incident, according to the guidance set out in their Strategy for dealing with safeguarding issues in charities.

**BIBLIOGRAPHY**

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The Charity Commission, *Charities: how to protect vulnerable groups including children,* <https://www.gov.uk/guidance/charities-how-to-protect-vulnerable-groups-including-children> accessed 25/6/2020

The Charity Commission, Safeguarding and protecting people for charities and trustees,

<https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees> accessed 26/6/2020

Department of Health, *Regulated activity (adults): The definition of ‘regulated activity’ (adults) as defined by the Safeguarding Vulnerable Groups Act 2006 from 10th September 2012,* 2011

National Almshouse Association*, Model Policy: Safeguarding* July 2019

APPENDIX 1

**USEFUL CONTACTS**

**DMC Safeguarding Lead** Chairman of the Welfare Group,

reporting to DMC Chairman

**Emergency** (Police / Medical)Phone: 999

**Dorset Police** Phone: 101

* to report a crime or safeguarding incident requiring immediate safeguarding

Multi-Agency Safeguarding HubPhone: 01202 222229

(MASH) Email (preferred): mash@dorset.pnn.police.uk

**Medical / NHS non-emergency** Phone: 111

* For medical help or advice that is not life threatening
* You do not know who to contact

**Dorset Council Adults**  Phone: 01305 221016

* Office hours Email: adultaccess@dorsetcouncil.gov.uk
* Evenings/weekends Phone: 01035 858250

**Children’s Advice & Duty Service** Phone: 228558 (Professionals) Phone: 228866 (Families/public)

**Contact information on this page is checked annually.**

Date of last check: *28 June 2021*

APPENDIX 2

**DMC SAFEGUARDING PROCEDURE – FLOWCHART**

If a trustee, volunteer or member of staff witnesses harm to one of our residents or harm is disclosed by a resident, they should take the following steps promptly.

If the concern is about the *welfare of a child*, contact emergency services if urgent and follow the Safeguarding Children Partnership Procedures

If the issue is one of *hoarding or self-neglect* issues, please see the guidance and toolkit held in the office.

Is the person safe?

YES

NO

Phone emergency services

(see Appendix 1 for contact details)

* Listen carefully and calmly to what the person is saying
* Establish the basic facts; do not ask lots of questions
* Reassure the person that they will be involved in decisions about what will happen
* Do not be judgemental or jump to conclusions

Does the person have mental capacity?

Assume YES

NO or NOT SURE

A mental capacity assessment may be required (information in Safeguarding folder)

YES

* Ask the person’s permission to raise a concern. You may need to override their wishes if there are significant risks or other adults/children may be at risk
* Do not promise that you will keep information confidential or secret. Explain you will need to tell another person but only people who need to know so they can help
* Write a chronological record of what was seen or you have been told (proforma in Safeguarding folder)
* DO NOT discuss with the person alleged to have caused harm
* Inform the General Manager / Safeguarding Lead / Safeguarding Team asap

Does the concern involve domestic violence/abuse?

YES

Take action listed in Domestic Violence/Abuse folder in the office

NO

Await Safeguarding Team response

APPENDIX 3

**STEPS TO SAFEGUARDING – SUMMARY FLOWCHART**



APPENDIX 4

**CONFIDENTIAL**

**WRITTEN RECORD OF A SAFEGUARDING INCIDENT**

* Please use this document in conjunction with the Safeguarding Policy & Procedures.
* Record a chronological record of what was seen or you have been told and ask any witnesses to do the same.
* DO NOT discuss the concern with the person alleged to have caused harm

|  |  |
| --- | --- |
| Name of adult at risk |  |
| Date / time of disclosure or incident |  |
| Factual account of what happened (in the person’s own words)Please use additional sheets if necessary |
| Views and wishes of the resident including consent to report the concernPlease use additional sheets if necessary |
| Appearance and behaviour of the resident |
| Record of any injuries |
| Any actions and decisions taken at this point |
| Other relevant information (e.g. previous incidents that have caused concern) |
| Have you used any additional sheets? | YES / NO (delete as applicable)If Yes, please attach them to this form |
| Name of person completing this form |  |
| Signature of person completing form |  |
| Date this form was completed |  |

**Action to be taken after completion of this form:**

1. Attach any additional sheets to the form
2. Keep this form and any additional sheets in a safe place until required
3. Inform the General Manager of the situation as soon as possible or
4. Contact the local safeguarding team direct if the General Manager is not available or the concern is about the General Manager
5. Inform the DMC Safeguarding Lead (Chairman of the Welfare Group) or a member of the Welfare Group of the situation as soon as possible
6. See DMC flowchart, Raising a Concern, at Appendix 2, for a brief description of the DMC safeguarding procedures
7. See Steps to Safeguarding Summary Flowchart at Appendix 3 of the Safeguarding Policy & Procedures, for brief information about the general safeguarding process.

APPENDIX 5

**GLOSSARY**

**CATEGORIES OF HARM**

**Coercive Behaviour:** Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

**Controlling Behaviour:** Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

**Cuckooing** – refers to the relatively recent identification of a new type of controlling and coercive criminal activity. This involves gangs using adults at risk (and children and young people) to move, store and deliver drugs.

**Discriminatory abuse:** including forms of harassment, slurs or similar treatment because of race, gender and gender identity, age, disability, sexual orientation or religion.

**Domestic violence and abuse:** Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial, emotional.

**Exploitation by radicalisation:** The Home Office leads on the anti-terrorism PREVENT strategy, of which CHANNEL is part (refer to www.gov.uk for information). This aims to stop people becoming terrorists or supporting extremism. All local organisations have a role to play in safeguarding people who meet the criteria.

Contact should be made with Dorset Police regarding any individuals identified who present concern regarding violent extremism.

**Financial or material abuse:** including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

**Forced Marriage:** Although forcing someone into a marriage and/or luring someone overseas for the purpose of marriage is a criminal offence the civil route and the use of

**Forced Marriage Protection Orders** is still available. These can be used as an alternative to entering the criminal justice system. It may be that perpetrators will automatically be prosecuted where it is overwhelmingly in the public interest to do so, however victims should be able to choose how they want to be assisted

**Homelessness:** Homelessness does not necessarily make people at risk and it is therefore not a defined category of harm. However circumstances such as homelessness may exacerbate other conditions and impact negatively upon individual’s ability to care for their health and to protect themselves.

**Human Trafficking:** The definition of human trafficking is the illegal movement of people through forced, fraud or deception with the intention of exploiting them, typically for the purposes of forced labour or sexual exploitation. Men, women and children are forced into a situation through the use (or threat) of violence, deception or coercion. Victims may enter the UK legally, on forged documentation or secretly under forced hiding, or they may even be a UK citizen living in the UK who is then trafficked within the country however it should not be confused with people smuggling, where the person has the freedom of movement upon arrival in the UK. There is no ‘typical’ victim of human trafficking and modern slavery. Victims can be men, women and children of all ages, ethnicities, nationalities and backgrounds. It can however be more prevalent amongst the most vulnerable members of society, and within minority or socially excluded groups.

**Internet/cyberbullying:** can be defined as the use of technology, and particularly mobile phones and the internet, to deliberately hurt, upset, harass or embarrass someone else. It can be an extension of face-to-face bullying, with the technology offering the bully another route for harassing their victim, or can be simply without motive.

Cyberbullying can occur using practically any form of connected media, from nasty text and image messages using mobile phones, to unkind blog and social networking posts, or emails and instant messages, to malicious websites created solely for the purpose of intimidating an individual or virtual abuse during an online multiplayer game.

**Modern Slavery:** Modern Slavery includes; human trafficking, forced labour and debt bondage, sexual exploitation, criminal exploitation, domestic servitude, descent-based slavery, child labour, slavery in supply chains, and forced and early marriage.

**Neglect and acts of omission:** includes ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, equipment, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

**Organisational abuse:** including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in a person’s own home. This may be a one off incident or on-going ill-treatment. It can refer to neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

**Physical abuse:** including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.

**Psychological abuse:** including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

**Self–neglect and hoarding:** This includes a broad spectrum of behaviour. The Care Act 2014 statutory guidance defines self neglect as: “a wide range of behaviour neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding”. Self neglect is recognised as the failure or unwillingness by an individual to meet their own basic care needs required to maintain health. See Multi-Agency procedures appendix 2 for further information.

**Sexual abuse:** including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting or does not have the mental capacity to consent.

**Sexual exploitation:** Any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. It may be very important in specific cases to be clear about the context in which concerns about sexual exploitation arise.

**DBS: DISCLOSURE AND BARRING SERVICE**

DBS is a non-departmental public body of the Home Office of the United Kingdom. It supports organisations in the public, private and voluntary sectors to make safer recruitment decisions by identifying candidates who may be unsuitable for certain work, especially those that involve children or adults, and provides wider access to criminal record information through its disclosure service for England and Wales.

**MAPPA: MULTI-AGENCY PUBLIC PROTECTION ARRANGEMENTS**

Statutory arrangements for managing sexual and violent offenders.

**MARAC: MULTI-AGENCY RISK ASSESSMENT CONFERENCE**

The multi-agency forum of organisations that manage high-risk cases of domestic abuse, stalking and ‘honour’- based violence.

**MARM: MULTI-AGENCY RISK ASSESSMENT MEETINGS**

A multi-agency meeting convened to manage the risks in self-neglect or hoarding cases.

**PREVENT**

The PREVENT strategy is part of the overall counter-terrorism strategy, CONTEST. The aim of the Prevent strategy is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism. In the Act this has simply been expressed as the need to “prevent people from being drawn into terrorism”.

Further information can be found at<https://www.gov.uk/government/publications/prevent-duty-guidance/revised-prevent-duty-guidance-for-england-and-wales>

**SIX PRINCIPLES OF SAFEGUARDING**

**Empowerment:** People should be supported and encouraged to make their own decisions and give informed consent

**Prevention**: It is better to take action before harm occurs rather than waiting until it does occur

**Proportionate**: The response should be the least intrusive and the most appropriate to the risk presented

**Partnership:** Services should work with their communities to produce local solutions; engage with local communities to prevent, detect and reporting abuse

**Accountability**: Safeguarding practice should be transparent and of a quality worthy of scrutiny ie the courts, peer review.