SAFEGUARDING STATEMENT

Raleigh International is committed to ensuring the health, safety, welfare and development of all participants and personnel regardless of gender, age, stage of development, disability, sexual orientation, religion, culture or ethnicity. We expect participants and personnel to show respect for, and understanding of, all people’s rights and to conduct themselves in a way that reflects these principles.

This is a pro-active policy designed to prevent harm or injury to any participants or personnel and to ensure swift, decisive action to counteract any danger. We will:

- Treat all people with respect.
- Carefully recruit and select all personnel and participants in leadership positions.
- Respond to concerns and allegations appropriately.
- Share information about safeguarding concerns with agencies as required.
- Provide effective management for participants and personnel through supervision, support and training.

When there are concerns about the welfare of any person, all participants and personnel in our organisation are expected to share those concerns with the Lead for Safeguarding, or the Proxy for Safeguarding if concern is raised in country.

RELATED POLICIES AND PROCEDURES

This policy is to be read in conjunction with the following existing Raleigh International policies and procedures:

- International Resources Policy
- Volunteer Recruitment Policy
- Disclosure and Barring Service Policy
- Responding to Serious Sexual Assault Toolkit
- Staff Handbook including:
  - Conditions of employment
  - Confidentiality
  - Social Media
  - Disciplinary procedures
  - Grievance procedures
  - Whistleblowing procedures
  - Lone worker policy
  - Personal harassment policy and procedure
- Participant Code of Conduct:
  - Photography Guidance
- Participant Terms and Conditions
- Programme Equal Opportunities and Diversity Policy

INTRODUCTION

The procedures outlined in this policy are to assist Raleigh International participants and personnel to protect all persons by identifying clear instructions in accordance with the legislative framework. They include:

- Harm – what it is and how to recognise the signs
- Procedure for preventing harm
- Procedure for responding to the discovery and disclosure of harm and how to respond sensitively to persons who have been harmed
- Procedure for responding to allegations against staff

Legislation and government guidance makes increasingly clear the need for all adults to play a role in safeguarding. We are fully committed to complying with all UK Safeguard legislation and guidance including the Children Act of 1989 and 2004, Working Together to safeguard Children 2015 and Care Act 2014.
SCOPE OF THE POLICY

Definitions for the purpose of this policy:

Participant: Any person who is participating in Raleigh International activities in a volunteer capacity, regardless of role, age or nationality. This includes volunteer trainers, assessors and alumni presenters.

Personnel: Any person who is recruited into a paid position, regardless of location of work or nationality. For the purposes of this policy this includes Trustees. In the instance an in-country staff member reports or is implicated in a safeguarding concern, this will need to be reported to local authorities as below.

This policy applies to all Raleigh International participants and personnel, in any capacity, of any age, whether in the UK or overseas. It is essential that everyone who volunteers or works for Raleigh International is aware of their responsibilities under this policy and abides by it.

It is not within the scope of this policy to cover any person who is not a participant or personnel in a Raleigh International program. In the instance that a safeguarding concern is raised regarding someone who is outside the scope of this policy (e.g. a child within a community), concerns should be raised locally. Each country needs to ensure they are aware of the local authorities or (I)NGOs who can provide safeguarding support in the instance of a safeguarding incident. This information should be included on the Country Specific Safeguarding Response Plan. In some countries, it may be necessary to have a separate Safeguarding Response Plan for each district where volunteers are placed.

Vulnerable Adult: Broadly defined, a vulnerable adult is any person aged over 18 years “who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation”.1

Generally, in UK legislation and guidance the term Safeguarding generally applies to children (defined as under 18 years of age) and vulnerable adults (as defined above). However, Raleigh International recognises that vulnerability is a complex concept, and that people outside of these definitions could also be in a position where they are vulnerable, particularly in an unfamiliar environment. This safeguarding policy therefore applies to all persons involved in a Raleigh programme (children, those classed as vulnerable, and those who are not). The vulnerability of the victim (e.g., age/disability) along with any relevant legislation, will be assessed on a case by case basis when planning a response to a safeguarding incident or concern.

POLICY REVIEW

This Policy was approved by Raleigh’s SMT in August 2017. It was reviewed by Trustees in March 2018. It is reviewed annually by the Lead of Safeguarding.

THE ROLE OF THE LEAD, DEPUTY AND PROXY FOR SAFEGUARDING, AND TRUSTEES

The Lead for Safeguarding (Director of Safety & International Operational Support) is responsible for:

- monitoring and recording concerns

---

• making referrals to social care services without delay
• liaison with other agencies
• arranging training for all staff
• ensuring this policy is reviewed annually
• ensure it is implemented throughout the organisation and safeguarding training given
• ensure monitoring and recording procedures are implemented

A detailed process for the Lead to follow when a disclosure or concern is raised is included in the section “Responding To Disclosures Or Concerns” below.

The Deputy (Medical Coordination Manager) is responsible for supporting the Lead. Proxy (Country Operations Manager/Director of Operations) are to provide support if the harm is reported overseas and work with the Lead/Deputy to manage the disclosure or incident. If neither the Lead or Deputy are available, the Raleigh Head Office Duty Manager should be available to support or cover. In the instance where complaint or allegation is against the nominated lead, the matter will be referred to a member of the Senior Management Team.

Trustees have primary responsibility for safeguarding in their charity and the Charity Commission makes it clear that trustees need to take steps to safeguard and take responsibility for the participants and personnel with whom the charity works. This means:

• acting in their best interests
• taking all reasonable steps to prevent any harm to them
• assessing and managing risk
• putting safeguarding policies and procedures in place
• undertaking ongoing monitoring, and reviewing, to ensure that safeguards are being implemented and are effective
• responding appropriately to allegations of harm

PREVENTION OF HARM

Protecting people is not just about policing or investigating the possibility of harm, it is also about preventing it. Raleigh International has put in place procedures to ensure that:

• Any personnel or participants applying for jobs or volunteer roles with Raleigh International are checked for their suitability as per Raleigh’s Disclosure and Barring Service policy.
• All Raleigh International personnel and participants are trained in safeguarding
• Personnel follow the information within the Staff Handbook, and participants adhere to the Participant Code of Conduct with regard to their dealings with all people
• Both the policy and practice are reviewed regularly.

RECOGNISING THE SIGNS AND SYMPTOMS OF HARM

The Care and Support Statutory Guidance Issued under the Care Act 2014 provides guidance on recognising and responding to harm, and the National Society for the Prevention of Cruelty to Children (NSPCC) have provided broader categories of harm in 2017. The UK Government has released guidance on recognising and preventing radicalisation which is also covered in this policy. Harm may be the result of a deliberate or

2 Our Decision, Barring Service checks as part of managing safeguarding risk for the voluntary and community sector” 2014

accidental act, may occur through ignorance, can be carried out by someone with any or no relation to the victim, may occur once, or multiple times, may affect more than one person and can occur anywhere.6

Possible forms of harm7:
• Domestic
• Sexual
• Neglect
• Online
• Physical
• Emotional
• Sexual Exploitation
• Female Genital Mutilation
• Bullying and Cyberbullying
• Child trafficking
• Grooming
• Radicalisation
• Financial

Definitions of these harms are outlined in Appendix 1. There are many indicators, both physical and behavioural, of harm but as no person will demonstrate all signs simultaneously, and as none of the signs individually or in any combination conclusively indicate harm, it is often difficult to detect and is seldom clear-cut. Some indicators are included in Appendix 2.

Raleigh International’s personnel and participants interact with individuals over prolonged periods of time and it is important that all concerns of possible harm, however vague, are raised with the Lead, Deputy or Proxy (if in-country) for Safeguarding.

MENTAL CAPACITY

Raleigh International acknowledges the five key principles of the Mental Capacity Act 20058 by recognising that:

1. A person must be assumed to have capacity unless it is established that they lack capacity.
2. A person is not to be treated as unable to make a decision unless all practicable steps to help them to do so have been taken without success.
3. A person is not to be treated as unable to make a decision merely because they make an unwise decision.
4. An act done, or decision made, under this Act for or on behalf of a person who lacks capacity must be done, or made, in their best interests.
5. Before the act is done, or the decision is made, regard must be given to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person’s rights and freedom of action.

TREATING ALL PEOPLE WITH RESPECT

All personnel of Raleigh International and participants within its programs must endeavour to treat all people with respect, regardless of ability or culture. We ensure that all personnel read and acknowledge the Staff Handbook, and every participant reads and acknowledges Raleigh International’s Code of Conduct on commencement of their working or volunteering with the organisation.

---

8 Taken from The Mental Capacity Act 2005 http://www.legislation.gov.uk/ukpga/2005/9/section/1, accessed 17 April 2015, reviewed June 2017
SAFER RECRUITMENT

Raleigh International recruit personnel and participants, and has policies in place for each of these recruitment processes. Raleigh International ensures that all recruitment is carried out in a fair and transparent manner, and the required background checks are undertaken as per the Disclosure and Barring Service Policy for UK participants and the best appropriate checks for nationals of other countries.

INDUCTION AND TRAINING

Raleigh International ensures and emphasises that everyone in our organisation understands and knows how to share any concerns immediately with the Lead, Deputy or Proxy (if overseas) for Safeguarding. We do this by training all personnel and participants during their induction. This could be staff induction, country induction or volunteer/VM/TL induction. This process is delivered and documented differently depending on whether the applicant is personnel or a participant.

Raleigh International has determined that there are three tiers of Safeguarding training required for personnel and volunteers within our organisation, based on the amount of face-to-face interaction personnel has with participants, existing reporting structures and an individual’s role within the organisation. Staff training will be run annually by the Safeguarding Team for all staff members, signed off and recorded.

If a staff member is being inducted in RHO, the staff member will receive training delivered by the Medical Coordination Manager as part of the Medical Team Induction and if any further training is required, this will be delivered ad hoc by the Director of SIOS or the Medical Coordination Manager in person or by skype. This applies for volunteer and associate assessors and trainers, and trustees.

All volunteers will receive training during their in-country induction periods. Host home families and project partners will be provided with training/information by in country staff, prior to any volunteers arriving in their communities.

Tier one - Lead, Deputy and Proxies for Safeguarding in-country and individuals on the RHO Duty Manager Rota:

- Due to the nature of the level of responsibility within the organisation, this cohort of personnel requires high level training, and is also responsible for providing lower tier training.
- Training includes:
  - How to recognise behavioural/physical indicators of harm, how to respond to a disclosure of harm and manage (not investigate) the disclosure and how to escalate concerns outside the organisation
  - Discussion with the Lead or Deputy for Safeguarding to ensure clear understanding of all aspects of the Safeguarding Policy and actions to follow a reported disclosure or suspicion of harm
- A register must be signed (see Appendix 6-8) to confirm understanding of the policy and procedures

Tier two – Trustees, RHO trainers, assessors and associates, TL/VM, Deputy Operations Managers, other in country roles as determined by country staff:

- Personnel on this tier have regular or prolonged face-to-face contact with participants, and as such are likely to witness indicators of harm. Trustees are included in this level for training purposes.
- Training includes:
  - How to recognise behavioural/physical indicators of harm, and respond to a disclosure of harm and how to escalate concerns within the organisation
- A register must be signed (see Appendix 6-8) to confirm understanding of the policy and procedures

Tier three - all other Raleigh International staff (including country staff), participants, all residents over 18 of a host home, project partners:

- Personnel on this tier have minimal face-to-face contact with participants, however it is possible that a safeguarding disclosure may be made to them.
- Training includes:
How to respond to a disclosure of harm and escalate concerns within the organisation

A register must be signed (see Appendix 6-8) to confirm understanding of the policy and procedures

CONFIDENTIALITY

Raleigh International has guidelines surrounding confidentiality for both personnel and participants which are covered during relevant inductions.

As part of this, Raleigh International recognises the principle that the welfare of any personnel and participants overrides obligations of confidentiality that may be held to others. When joining Raleigh, personnel and participants are consenting to us sharing their information in this way. Individual cases will only be shared or discussed on a "need to know" basis, and where possible will be anonymised. All media enquiries will be handled by the Communications Manager at RHO or another appropriately trained and briefed member of the RHO communications team.

In cases of disclosure of harm by any person, all Raleigh International personnel and participants are obliged to share the information with the Lead, Deputy or Proxy (if overseas) for Safeguarding who may have to refer any concerns to social care services or the police in an emergency.

RESPONDING TO DISCLOSURES OR CONCERNS

Immediate Response to A Person Disclosing Harm

Personnel and participants to whom a disclosure is made should:

- Ensure the person is safe
- Stay calm
- Listen carefully to what is said without interrupting
- Allow the person to continue at their own pace
- Explain that it is likely that the information will need to be shared with others - do not promise to keep confidence or secrets, or say you will not tell anyone else. Every effort should be made to ensure that confidentiality is maintained for all concerned when an allegation has been made and is being investigated
- Ask questions for clarification only and avoid asking questions that suggest a particular answer.
- Tell them what you will do next and with whom the information will be shared. All information, however seemingly insignificant, about any situation that gives rise for concern that a person might be suffering harm must be passed on.

Reporting process

- If in doubt, call the Lead for Safeguarding, or the RHO Duty Manager as per reporting guidance tables below.
- Any in country participant or personnel who has received Tier Two or Three training, should escalate their concerns to the Proxy in their country, who will then contact and liaise with the Safeguarding Team in RHO.
- Comprehensive notes should be made using the Incident Report Form (see Appendix 3) or the Safeguarding Flag Form (Appendix 4). See reporting guidance tables below for more information. The Proxy in country may have to transcribe information verbally transmitted if it is not possible for the person raising the concern to complete and transmit the form in person (eg they have no internet access).
- The report should be clear and factual since any information may be valuable to professionals investigating the incident and may, at some time in the future, be used as evidence in court. It should include the ages of the people involved (where known), and any known vulnerability risk factors (e.g. disability, mental health problems, pregnancy)
- Any medical professional receiving a disclosure should consider informing their medical indemnity provider. Volunteer medics should contact RHO medical support team for advice regarding this.
- It is not the responsibility of Raleigh International personnel or participants to investigate or decide whether a person is being harmed or has been harmed in the past. This is a task for professional Safeguarding agencies; the Lead for Safeguarding may refer concerns to such agencies. It is important that everyone
in the organisation is aware that the person who first encounters a case of alleged or suspected harm is not responsible for deciding whether or not harm has occurred.

- In the case of disclosures that relate to cases of historical harm, even though it may appear to the person hearing the disclosure that there is no risk of ongoing harm to either the person making the disclosure or a third party, they should always record their concern for the Lead or Deputy of Safeguarding to take a decision on whether there is a need to take further action.
- The Incident Report Form or Safeguarding Flag Form should be emailed to safeguarding@raleighinternational.org. If the concern is raised by a volunteer/associate assessor or trainer, the information should be passed on confidentially to the Event Lead, who will need to contact the Safeguarding Team. If the Lead for Safeguarding is not available, contact must be made with the Deputy for Safeguarding or the RHO Duty Manager. The Lead for Safeguarding will then initiate the procedure for dealing with allegations of harm.
- If the incident occurs in the UK, it is up to the Lead for Safeguarding to ascertain our statutory obligations, and contact the necessary professional services e.g. social services, police, or signpost individuals to relevant services
- If the incident occurs in-country, the Lead, Deputy and Proxy for Safeguarding will collaborate to determine the best course of action.
- In the instance where the concern is related to the Lead for Safeguarding, the concern will be managed by another SMT member at RHO. If the concern is related to a Proxy for Safeguarding, it will be managed by the Proxy’s line manager in consultation with the Lead for Safeguarding.

A concern regarding suspected or likely harm may become apparent by:
- First hand observations and concerns
- Being told by another person that they have concerns about a person
- A person discloses they have been harmed
- A harmer discloses they have harmed

A concern may also be raised relating to:
- Domestic violence incidents
- Mental Health issues
- Substance and Alcohol abuse incidents
Mental health and substance abuse issues will however usually be dealt with by a medical response, rather than by Safeguarding.
Internally reporting a concern in the UK

- A judgement needs to be made at an early stage as to whether the incident warrants a full, immediate Safeguarding response. This is the product of subjectivity and should be confirmed with the Lead or Deputy for Safeguarding if there is any doubt. The following is a guide, but not definitive.
- If the urgency is **Red**, please phone the incident through, then email paperwork when the person is safe.
- If the urgency is **Amber**, please email and it will be picked up by safeguarding in UK waking hours (8am-8pm).
- If in doubt, contact the Lead / Deputy for Safeguarding or the RHO Duty Manager:

<table>
<thead>
<tr>
<th>Report to</th>
<th>Reporting urgency</th>
<th>Examples of incident</th>
<th>Required action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety / RHO Duty Manager</td>
<td>Immediate regardless of time</td>
<td>- Serious physical assault or serious psychological harm.</td>
<td>Report to RHO Duty Manager by phone or in person</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- One off incidents of minor physical assault or minor psychological harm.</td>
<td>Complete ‘Safeguarding Incident Record Form’ including full details and share with Lead and Deputy for Safeguarding,</td>
</tr>
<tr>
<td></td>
<td>In UK waking hours (8am-8pm)</td>
<td>- Disclosure of historical harm where there is no immediate concern of ongoing harm</td>
<td>ASAP communication to Lead or Deputy of Safeguarding (or RHO Duty Manager if not available). Can be via email or in person.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Threat of, or actual minor self-harm (pinching, scratching, pulling hair)</td>
<td>Complete Safeguarding Flag Form and share with Lead and Deputy for Safeguarding.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Sexual harassment or sexual assault (as defined in the Sexual Assault Toolkit)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Issues picked up on training, assessment or any other context that point to evidence of harm in home life.</td>
<td></td>
</tr>
<tr>
<td>Safeguarding only</td>
<td>Immediate regardless of time</td>
<td>- Rape or Serious sexual assault (as defined in the Sexual Assault Toolkit)</td>
<td>Immediate communication to Lead or Deputy for safeguarding if in hours, or RHO Duty Manager out of hours.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Threat of, or actual serious self-harm (leaving a mark or requiring medical treatment)</td>
<td>Complete ‘Safeguarding Incident Record Form’ including full details and share with Lead and Deputy for Safeguarding.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Threat of suicide</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Any issue that requires immediate confidential response to prevent further harm to any individual</td>
<td></td>
</tr>
</tbody>
</table>

- Email contact for safeguarding: safeguarding@raleighinternational.org
- RHO Duty manager phone: +44 203 598 0650
- NB in any case where there is an aspect of physical or mental health to the case raleighmedicsupport@raleighinternational.org should also be included in any emails.
Internally reporting a concern outside the UK

- A judgement needs be made at an early stage as to whether the incident warrants a full, immediate Safeguarding response. This is the product of subjectivity and should be confirmed with the Lead or Deputy for Safeguarding if there is any doubt. The following is a guide, but not definitive.
- If the urgency is Red, please phone the incident through, then email paperwork when the person is safe.
- If the urgency is Amber, please email ‘safeguarding’ and it will be picked up in UK waking hours (8am-8pm).
- If in doubt, contact the Lead / Deputy for Safeguarding or the RHO Duty Manager.

<table>
<thead>
<tr>
<th>Report to</th>
<th>Reporting urgency</th>
<th>Examples of incident</th>
<th>Required action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safeguarding only</td>
<td>Immediate</td>
<td>• Rape or Serious sexual assault (as defined in the Sexual Assault Toolkit)</td>
<td>• Immediate communication to Lead or Deputy of Safeguarding (or RHO Duty Manager if not available)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Threat of, or actual serious self-harm (leaving a mark +/- requiring medical treatment)</td>
<td>• Online increp only includes time, date and location of incident</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Threat of suicide</td>
<td>• Safeguarding Incident report form includes full details and only shared with Lead and Deputy for Safeguarding</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Any issue that requires immediate confidential response to prevent further harm to any individual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>In UK waking hours (8am-8pm)</td>
<td>• Disclosure of historical harm where there is no immediate concern of ongoing harm</td>
<td>• Online increp only includes time, date and location of incident</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Threat of, or actual minor self-harm (pinching, scratching, pulling hair)</td>
<td>• Complete Safeguarding Flag Form and share with Lead and Deputy for Safeguarding</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Sexual harassment or sexual assault (as defined in the Sexual Assault Toolkit)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Issues picked up during induction, placement or any other context that point to evidence of harm in home life.</td>
<td></td>
</tr>
<tr>
<td>Safety / RHO Duty Manager</td>
<td>Immediate</td>
<td>• Serious physical assault or serious psychological harm.</td>
<td>• Immediately report to safety / RHO Duty Manager</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Details on increp – anonymised if necessary to preserve identity in country</td>
</tr>
<tr>
<td></td>
<td>In UK waking hours (8am-8pm)</td>
<td>• One off incidents of minor physical assault or minor psychological harm.</td>
<td>• Report to safety / RHO Duty Manager</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Details on increp – anonymised if necessary to preserve identity in country</td>
</tr>
</tbody>
</table>

- Email contact for safeguarding: safeguarding@raleighinternational.org
- Duty manager phone: +44 203 598 0650
- NB in any case where there is an aspect of physical or mental health to the case raleighmedicsupport@raleighinternational.org should also be included in any emails.
Lead for Safeguarding response when alerted to cases of allegation or disclosure of harm

1. Receive information, directly or indirectly, from any participants or personnel regarding safeguarding concerns, and maintain accurate records of them
2. Assess the information promptly and carefully, clarifying or obtaining more information about the matter as appropriate (although no direct investigation with the person should take place)
3. Consult initially with a statutory safeguarding agency such as the local social services department or health board, to test out any doubts or uncertainty about the concerns as soon as possible. This can be done directly or by authorising proxy if concern is raised in country.
4. Investigate breaches of the Code of Conduct and take appropriate action, or assist in country staff to do the same.
5. Oversee any investigations.
6. Act promptly to protect the reputation of Raleigh International, in consultation with members of the Senior Management Team, invoking disciplinary action in accordance with the procedure.
7. In conjunction with the CEO of Raleigh International, inform the Charity Commission in the instance where there is an allegation or suspicion of a serious incident that poses a serious risk to the charity’s work, beneficiaries or reputation.

The Proxy for Safeguarding is responsible for:

- Fulfilling steps 1 and 2 of the above responsibilities
- Contacting the Lead for Safeguarding of the RHO Duty Manager immediately (including out of hours)
- Step 3 through 6 can be undertaken by the proxy but only in conjunction with the Lead for Safeguarding.

GRIEVANCE, WHISTLEBLOWER & DISCIPLINARY PROCEDURES

Raleigh International has procedures regarding disciplinary, whistleblower and grievance matters in the Staff Handbook. These are applicable to any concerns around safeguarding.

Where a complaint has been made against a Raleigh International personnel or participant, the situation will be reported to the Lead for Safeguarding and managed as appropriate. In the instance where the concern raised involves the Lead for Safeguarding, the matter will be managed by SMT.

It is the responsibility of the Lead for Safeguarding to ensure that these procedures are rigorously adhered to. In the case that the Lead is implicated, the matter should be reported to another member of the Senior Management Team and managed as appropriate.

If the investigation is regarding an overseas participant, or occurred overseas, the concern will be reported to a proxy, and managed as appropriate, with support of the Lead for Safeguarding. In the instance that the concern involves the Proxy for Safeguarding, the concern will be managed by their line manager with support from the Lead for Safeguarding.

With regards to disciplinary and grievance procedures, no steps will be taken until the concern has been fully discussed and a strategy agreed with the Lead for Safeguarding, social care services and/or the police. Any investigation will override the need to implement any such procedures.

SUPPORTING PERSONNEL AND PARTICIPANTS

Raleigh International will:

- ensure that personnel or participants reporting suspected harm are appropriately advised and supported.
- provide support to personnel and participants accused of harm in conjunction with the relevant line manager, to assist staff and volunteers who have been victims of malicious or false harm claims to reintegrate into their team/voluntary activities.
RECORD KEEPING
All records will be securely kept in a locked cabinet/drawer in the Lead for Safeguarding’s desk. Only the Lead and/or Deputy for Safeguarding will have access and records will only be kept as long as necessary. If the concern is raised overseas, the Proxy will keep any related documentation in a secure location for as long as necessary. Templates for reporting safeguarding concerns are included as Appendix 3 and 4 of this document.

Normally these records will be passed to social care services, relevant authorities or agencies if overseas, as soon as possible. All records should be written by the person with the concern within 24 hours on incident sheets, and will be factual and non-judgmental.

It is helpful to record any known details of the adult involved e.g. name, address, date of birth etc. It is equally important to record the reasons for making the decision not to refer to social care services, or relevant authorities if overseas. Always sign, date and time these records.

Appendices available on request