

## Oxfordshire Breastfeeding Support Safeguarding Policy

### Abbreviations used in this policy

<b>OBS</b>	Oxfordshire Breastfeeding Support	<a href="http://www.oxbreastfeedingsupport.org/">http://www.oxbreastfeedingsupport.org/</a>
<b>OSCB</b>	Oxfordshire Safeguarding Children Board	<a href="http://www.oscb.org.uk">http://www.oscb.org.uk</a>
<b>DSL</b>	Designated Safeguarding Lead	Person with lead responsibility for safeguarding within an organisation
<b>LADO</b>	Local Authority Designated Officer	<a href="https://www.oscb.org.uk/practitioners-volunteers/schools-safeguarding-team/">https://www.oscb.org.uk/practitioners-volunteers/schools-safeguarding-team/</a>
<b>MASH</b>	Multi-agency Safeguarding Hub	<a href="https://www.oxfordshire.gov.uk/cms/content/multi-agency-safeguarding-hub">https://www.oxfordshire.gov.uk/cms/content/multi-agency-safeguarding-hub</a>
<b>LCSS</b>	Locality and Community Support Service	<a href="https://www.oscb.org.uk/practitioners-volunteers/locality-and-community-support-service-early-help/">https://www.oscb.org.uk/practitioners-volunteers/locality-and-community-support-service-early-help/</a>

### 1. Principles

#### Oxfordshire Breastfeeding Support recognises that:

- The welfare of the child or adult at risk is paramount.
- All children and adults at risk, regardless of age, ability, gender, racial heritage, religious or spiritual beliefs, sexual orientation and /or identity, have the right to equal protection from harm or abuse.
- Babies are the most vulnerable group in society, and some (for example due to prematurity or additional health needs) are more vulnerable than others.
- We use a child-centred approach, treating babies as individuals, entitled to dignity and respect.
- An adult at risk is defined as any person aged 18 years and over who is or may be in need of community care services by reason of mental health issues, learning or physical disability, sensory impairment, age or illness and who is or may be unable to take care of him/herself or unable to protect him/herself against significant harm or serious exploitation. Types of abuse include: physical, domestic, psychological, financial and material, discriminatory, organisational, FGM and modern slavery. Neglect can include neglect by others and of self.
- Working in partnership with parents, carers and other agencies to provide a

coordinated approach is essential in promoting the welfare of children and adults at risk.

- We aim to minimise the risk of abuse by being sensitive to cultural, gender and individual needs in our service delivery.
- Safeguarding children and adults at risk is everybody's responsibility. OBS facilitators, trustees, volunteers and those who observe OBS sessions (e.g. students and health professionals) have a full and active part to play in protecting children and adults at risk from harm.

## **2. Framework**

This policy has been developed in accordance with the principles established by the Children Act 1989 and in line with the following:

- [United Nations Convention on the Rights of the Child 1989](#)
- [Children Act 2004](#)
- [Equality Act 2010](#)
- [Working Together to Safeguard Children 2018](#)
- [Framework for the Assessment of Children in Need and their Families 2000](#)
- [What to do if you are worried a Child is being Abused 2015](#)
- [Oxfordshire Safeguarding Children Board](#) guidelines
- [The Care Act 2014](#)

## **3. Scope**

This policy applies to all facilitators, cover facilitators, trustees, volunteers, students and other observers, and anyone in a position of trust.

## **4. Aims**

- To ensure that all facilitators, trustees and volunteers have been checked as to their suitability and have received safeguarding training appropriate to their role.
- To raise awareness of all facilitators, trustees and volunteers of the need to safeguard children and adults at risk and of their responsibilities in identifying and reporting possible cases of abuse/neglect.
- To set out procedures which will be followed by all facilitators, trustees and volunteers in cases of suspected abuse/neglect.

## **5. Safer Recruitment**

- All facilitators, trustees and volunteers will be checked for suitability prior to recruitment. This will include a DBS check and two references.
- All facilitators, trustees and volunteers will have training appropriate to their role:

- All facilitators will have a minimum of OSCB Generalist Safeguarding training plus one additional training (Advanced Safeguarding or DSL).
  - OBS will have two Designated Safeguarding Leads, with OSCB DSL training.
  - At least one of the DSLs will have LADO Safer Recruitment training.
  - For volunteers and trustees, the minimum level of training is the OSCB online course “introduction to safeguarding” (or equivalent level Department of Health or Education approved training for volunteers or trustees who also work in healthcare or education).
  - Volunteers and trustees must complete OSCB Generalist Safeguarding training.
- All training will be regularly updated in accordance with OSCB recommendations.
- OBS will have a Designated Safeguarding Trustee with responsibility in relation to the Whistleblowing policy (see section 10, below).
- New facilitators, trustees and volunteers will be made aware of this policy, the procedures for protection of children and adults at risk and the name and contact details of the DSLs and Designated Safeguarding Trustee, prior to beginning work/volunteering for OBS.

## **6. Responsibilities**

All facilitators, trustees and volunteers will follow Oxfordshire Safeguarding Children Board Procedures/Local Authority guidance in all cases of abuse, or suspected abuse. These can be found at <http://www.oscb.org.uk/professionals/>

- If there are concerns within an in-person session or other OBS service about the welfare of a child or adult, the session facilitator must be informed within the session or as soon as possible afterwards.
- The session facilitator will consult with a DSL (if the facilitator is not a DSL).
- The DSL will consult with and/or refer to the LCSS and/or MASH, as appropriate.
- Detailed and accurate written records of concerns about a child or adult at risk (using OBS’s “Record of Concern” form) will be kept even if there is no need to make an immediate referral.
- All such records will be kept confidentially and securely.
- All records of concern (whether or not a referral is made) will be shared with the relevant health visiting or midwifery team as soon as possible: by the next working day if a referral is made or within 3 working days if a referral is not made.
- Information about safeguarding concerns will be shared with other OBS facilitators, volunteers and trustees, and other agencies and professionals, on a need-to-know basis.

## **7. Confidentiality**

- OBS recognises that all matters relating to protection of children and adults

at risk are confidential.

- However, all facilitators and volunteers must be aware that they have a responsibility to share information in order to safeguard children and adults at risk.
- All facilitators and volunteers must be aware that they cannot promise to keep secrets that might compromise the safety or well being of a child or adult at risk.
- OBS will always undertake to share the intention to make a safeguarding referral in respect of a child with their parents /carers, unless to do so could put them at greater risk of harm, or impede a criminal investigation. In the case of an adult at risk, the adult in question will be informed of the intention to make a referral, unless to do so could put them at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with the LCSS/MASH.
- OBS will take no names consultations with the LCSS/MASH to discuss concerns we may have, but we understand that if they then ask for a name we will disclose those details and it will become a referral.

## **8. Supporting facilitators, trustees and volunteers**

- We recognise that OBS facilitators, trustees and volunteers who have become involved with a child or adult at risk who has suffered harm, or appears to be likely to suffer harm, may find the situation stressful and upsetting.
- The DSLs and Safeguarding Trustee will be available to give both practical and emotional support to facilitators, trustees and volunteers regarding any safeguarding matter.

## **9. Protecting facilitators and volunteers**

- No facilitator or volunteer should pick up or hold a baby/child without a specific request or permission from parents/carers.
- Facilitators and volunteers should take all reasonable steps to avoid being alone with a child (other than their own child or another volunteer's child, by agreement with the other volunteer) during an in-person session.

## **10. Whistleblowing**

- If a facilitator, trustee or volunteer has a concern or complaint about the attitude or action of another facilitator, trustee or volunteer, this should be discussed as soon as possible with one of the DSLs.
- If the concern relates to one of the DSLs, it should be reported as soon as possible to the other DSL, or (if the DSL is not available) to the Designated Safeguarding Trustee. Contact details can be found in section 11, below.
- The identity of anyone raising a concern or complaint about the attitude or

action of another facilitator, trustee or volunteer will not be shared or detailed in the resulting investigation, unless specifically requested by the complainant.

## **11. Allegations against others working with children**

All allegations or concerns about abuse by someone who works with children, in a paid or unpaid capacity, must be reported to the Local Authority Designated Officer (LADO) and Safeguarding team on 01865 810603.

## **12. Contact details**

OBS Designated Safeguarding Leads Contact Details can be found on the [OBS Safeguarding webpage](#).

## **Monitoring and Review**

This policy will be publicly available on the OBS website.

**Oxfordshire Breastfeeding Support**  
**Date policy adopted: July 2021**  
**Date for review: July 2022**

Appendix

## CHILD PROTECTION RECORD Report of a Concern

<b>Name of person completing this form:</b>	<b>OBS role of person completing this form:</b>
<b>Drop-In location:</b>	<b>Date &amp; time of contact:</b>
<b>Child's Name:</b>	
<b>Date of birth &amp; age:</b>	<b>Address:</b>
<b>Parent/carer's name:</b>	
<b>Name &amp; location of GP/Health Visitor:</b>	
<b>Details of concern:</b> <i>(Use body map if appropriate)</i>	

**Details of any referrals made**

**(Include agency, name of staff member, date & time, contact details, whether family is aware of referral):**

**Date form completed:**

**Signed :**

**TO BE COMPLETED BY OBS SAFEGUARDING LEAD**

**Outcome:**

**Form sent to Health Visiting team for information sharing purposes (date, time, address):**

**Acknowledgement of receipt (date, time):**

**Name of Safeguarding Lead:**

**Signed:**