

E-13 Associate Safeguarding Policy & Procedure (Employees & Independent Contractors)

Introduction and Purpose

upReach Charitable Company ('upReach') endeavours to promote the physical and mental safety and well-being of its Associates and upReach Employees (as each term is defined in this policy). upReach recognises its social, moral and legal obligations to safeguard the wellbeing and safety of all adults involved in any upReach activities. As such, this policy addresses the expectations, responsibilities, and safeguarding procedures with which we require upReach Employees and Independent Contractors to comply. This policy is designed to:

1. Promote the safety and wellbeing of Associates;
2. Empower Employees and Contractors to respond in a timely, effective and proportionate manner to any potential safeguarding issues; and
3. Ensure that upReach complies with applicable laws and regulations whilst incorporating and applying current industry best practices.

This policy is not a part of any Employee or Contractor's contract and does not vest any Employee or Contractor with any rights. upReach reserves the right to modify this policy at any time without notice.

Scope

1. **Applicability.** This policy applies to all upReach Employees and Contractors.
2. **Administration.** upReach's Designated Safeguarding Officer ('DSO') retains primary responsibility for implementing and updating this policy. The DSO's contact information can be found at the end of this document.
3. **Definitions.**
 - a. *Associate.* Any person who meets upReach's eligibility criteria, including completion of all onboarding steps, and has been accepted by upReach to participate in an upReach programme as a beneficiary. This definition includes Associates who are considered 'dormant' but excludes upReach Alumni.
 - b. *Contractor(s).* Any self-employed person providing goods or services to upReach through contract with upReach; also commonly referred to as an 'Independent Contractor.'
 - c. *Safeguarding.* For the purposes of this policy, the terms 'safeguarding' and 'to safeguard' describe the prevention methods and the precautionary approach to planning and procedures that is needed to protect adults from any potential harm.

- d. *Emergent Safeguarding Issue*. Any safeguarding issue that causes, or may cause, immediate or imminent threat of serious bodily injury, harm, or death.
- e. *Employee(s)*. Any person employed by upReach full-time or part-time through an employment contract.
- f. *Incident*. Any event or action that does, or may, result in a safeguarding concern or harm (including physical, mental, or emotional harm) to a person or a third party, or otherwise gives rise to a safeguarding issue or concern.
- g. *Designated Safeguarding Officer (DSO)*. The named individual(s) responsible for acting as the main source of support, advice and expertise for safeguarding at upReach.
- h. *Misconduct indicators*. Any actions or behaviours exhibited by an upReach Employee or Contractor which would indicate a potential safeguarding concern requiring action from upReach.

Policy

Employees and Contractors

Employees and Contractors are responsible for:

1. Understanding and implementing this policy and applicable procedures (including the procedure delineated in **Exhibit A**, attached to this policy);
2. Ensuring safeguarding issues or concerns – whether direct or indirect – are reported and acted upon in a timely manner;
3. Maintaining open lines of communication with the Designated Safeguarding Officer(s) regarding safeguarding issues;
4. Demonstrating appropriate behaviour with Associates including, without limitation:
 - a. Treating each Associate with respect and dignity;
 - b. Refraining from discriminating against Associates on the basis of age, gender, ethnicity, disability, religion, political beliefs, sexual orientation, socio-economic status, or race;
 - c. Maintaining appropriate professional boundaries in relationships with all Associates and refraining from instigating, engaging in, or continuing intimate or sexual relationships;
 - d. Taking reasonable steps to ensure the well-being of Associates;
 - e. Engaging with Associates in an open environment and avoiding private or unobserved situations whenever possible;
 - f. Taking reasonable and appropriate steps to protect the privacy and confidentiality of each Associate, including complying with applicable upReach

policies and regulations, such as the General Data Protection Regulation ('GDPR').

5. Refraining from engaging in, or otherwise displaying, 'misconduct indicators' as described below.

Misconduct Indicators (see definition above). upReach recognises the following non-exhaustive list of actions as indicators of potential safeguarding issues requiring action by upReach. If an Employee or Contractor is found to have engaged in any behaviours suggestive of Misconduct Indicators, this may result in disciplinary action for the Employee or Contractor concerned.

- a. Engaging in discriminatory behaviour against any person;
- b. Failing to maintain personal and professional boundaries with Associates, including engaging in intimate or sexual relationships with Associates;
- c. Using position or influence to intimidate, threaten, coerce, or undermine an Associate or other Employee or Contractor;
- d. Failing to enforce upReach policies or procedures with an Associate on the basis of favouritism or an inappropriate relationship with the Associate;
- e. Failing to report inappropriate Associate behaviour or safeguarding risks or concerns in accordance with this policy or training;
- f. Making comments or engaging in discussions, even in jest, that could be construed as abusive or sexually provocative, or which concern sensitive subject matter topics like politics or religion; and
- g. Encouraging or engaging in home visits, outings, or any other communications (including electronic communications) not expected or authorised as part of the professional relationship.

upReach Charitable Company

To ensure the safety of Associates, upReach shall:

1. Endeavour to ensure that appropriate training for Employees and Contractors is provided on an annual basis;
2. Maintain updated policies and procedures compliant with applicable laws, regulations, and best practice;
3. Maintain a safeguarding log and documentation system updated monthly or as needed;
4. Ensure direct and open lines of reporting for Employees and Contractors to Designated Safeguarding Officer(s);
5. Ensure direct and open lines of reporting to upReach trustees regarding safeguarding issues, including the designated safeguarding lead for the upReach trustees;

6. Appoint and maintain a Designated Safeguarding Officer and secondary or Backup Designated Safeguarding Officer to implement and ensure compliance with this policy, procedure, and applicable laws;
7. Engage in annual stress testing, audits, or both of upReach safeguarding policies and procedures; and
8. Engage in data protection to protect Associate data in line with other upReach policies and procedures, as well as applicable regulations.
9. Ensure that, where practicable and there is no risk of immediate harm to self or others, consent is obtained from Associates/relevant parties before a safeguarding concern is shared with DSO(s).

Enforcement

Any Employee or Contractor violating this policy may be subject to disciplinary action up to and including suspension or termination as well as:

1. Legal action against the Employee or Contractor;
2. Immediate dismissal;
3. Reporting to applicable authorities, including law enforcement.

References

1. A-02 upReach Privacy Notice & Use of Cookies
2. E-16 Associate Safeguarding Policy & Procedure (Volunteers)
3. Data Protection Act 1998
4. General Data Protection Regulation (EU)
5. General Data Protection Regulation (UK)
6. Human Rights Act 1998
7. The Care Act 2014
8. Mental Capacity Act 2005
9. Safeguarding Vulnerable Groups 2006

Contact Information

Position/Title	Responsible Party
Designated Safeguarding Officer ('DSO')	Hannah Stoddart
DSO Email	hannah.stoddart@upreach.org.uk
DSO Phone	07532814196
Backup Safeguarding Officer 1 ('BSO1')	Stephanie Lieber
BSO Email	stephanie.lieber@upreach.org.uk
BSO Phone	07397533195
Backup Safeguarding Officer 2 ('BSO2')	Safeguarding & Wellbeing FCLP Rotation (Sarah Gregory)
BSO2 Email	sarah.gregory@upreach.org.uk
BSO2 Phone	07514185985

I confirm that this Policy has been shared with upReach Employees and Contractors, and is freely accessible to all on the website upreach.org.uk.

Signed:



John Craven, upReach CEO

Date:

January 2021

EXHIBIT A**Safeguarding Procedure**

This procedure lays out the steps that upReach Employees and Contractors should follow when they become aware of a safeguarding alert. This procedure should be followed in conjunction with Exhibit B (Safeguarding Classification of Urgency Key) below and with Policy E-13 outlined above.

This procedure focuses on ensuring that Employees and Contractors are equipped to take appropriate action in the event of a safeguarding or wellbeing concern. In line with the principles of the 2005 Mental Capacity Act, we assume that adults have the capacity to make their own decisions on matters regarding their safety and how they choose to live. This safeguarding procedure therefore focuses on empowering individuals to manage their own wellbeing when this is appropriate, ensuring that upReach meets its duty of care through signposting to other resources and sources of support, especially those available at their University, and taking reasonable action to ensure the safety and wellbeing of Associates, Employees and Contractors while they engage with upReach activities.

Employees and Independent Contractors

Please see Exhibit B below for definitions and classifications.

upReach Employees and Contractors are responsible for following this procedure in the event of identifying a potential safeguarding concern. This concern could be an Associate wellbeing issue, as suggested in the non-exhaustive 'Examples of Precipitating Events' in Exhibit B below, or any breach of the Employee and Contractor responsibilities laid out in Policy E-13.

Emergent ('Red') Safeguarding Issue.

1. Employee or Contractor to contact 999 and report the issue;
2. Employee or Contractor to contact the Designated Safeguarding Officer via phone and then email to report the matter;
3. Employee or Contractor to complete the [Safeguarding Reporting Form](#) and submit to the Designated Safeguarding Officer within twenty-four (24) hours, or as soon as reasonably possible after the event.

Non-Emergent ('Amber' or 'Yellow') Safeguarding Issues.

1. Reporting party notes safeguarding concern and establishes need to report to upReach Designated Safeguarding Officer. Where practicable, the reporting party must first obtain consent to report from the Associate involved in the matter.
2. Once established:
 - a. Classify the safeguarding issue according to the following matrix (further delineated in **Exhibit B**):
 - i. Yellow;
 - ii. Amber

3. Reporting party to complete the [Safeguarding Reporting Form](#) and submit to the Designated Safeguarding Officer as soon as possible and no more than forty-eight (48) hours after the incident first occurs or the upReach Employee/Contractor becomes aware of the issue. If the reporting party deems it necessary, they should contact the Designated Safeguarding Officer by phone in order to flag the matter.
4. Coordinate with the Designated Safeguarding Officer regarding any follow-up actions or to provide additional information as needed (including notice of any changes that may warrant re-classification)

Designated Safeguarding Officer (or Back-up Designated Safeguarding Officer)

The Designated Safeguarding Officer upon receiving a report shall:

1. Assess the matter to affirm the reporting party's classification of urgency;
2. Affirm or re-classify the urgency of the matter;
3. Update the safeguarding log as denoted in the Classification of Urgency Key (See **Exhibit B** below) until resolved or downgraded;
4. Investigate and address the safeguarding issue in conjunction with the backup Designated Safeguarding Officer and, if applicable, report the safeguarding issue(s) to Chief Executive ('**CE**'), designated Trustee Safeguarding Lead, or both;
5. Determine an appropriate course of action to take, including signposting to any external sources of support such as university wellbeing services, and share this course of action with any relevant individuals;
6. Provide an update on outstanding safeguarding issues to Trustee Safeguarding Lead, in time for each Trustee Meeting; and
7. Organise, file, and maintain the safeguarding log, documentation, and files to ensure accuracy and consistency with the status of the matter.

EXHIBIT B**Safeguarding Classification of Urgency Key**

This document provides guidance on how upReach Employees and Contractors (including the Designated Safeguarding Officer) should categorise any safeguarding issues they encounter, and provides examples of events which may prompt concern and lead to a safeguarding alert being raised. It should be viewed in conjunction with Exhibit A (Safeguarding Procedure) and the Policy laid out above.

Safeguarding Classification of Urgency Key	
Red	Emergent. Imminent risk of serious bodily injury, harm, or death that requires immediate action or intervention. Necessitates immediate meeting (or as soon as feasibly possible but no more than twenty-four (24) hours after notice of the event) between the Chief Executive, Designated Safeguarding Officer, and Backup Safeguarding Officer ('Review Meeting'). The reporting party may attend the Review Meeting as needed or requested. Daily follow-up required until resolved or downgraded to a lesser category by the Designated Safeguarding Officer (or the Backup Designated Safeguarding Officer). Trustee Safeguarding Lead to be notified by Chief Executive at appropriate time.
Amber	Not emergent but urgent. No imminent risk of serious bodily injury, harm, or death but could result in significant harm. Requires weekly follow-up (or more as needed) until resolved or downgraded to a lesser category by the Designated Safeguarding Officer (or the Backup Designated Safeguarding Officer).
Yellow	Neither emergent nor urgent but worth noting for follow-up and documentation purposes. Requires follow-up on a monthly basis or as needed until resolved or downgraded to a lesser category by the Designated Safeguarding Officer (or the Backup Designated Safeguarding Officer).
Green	No longer considered a safeguarding issue or concern or otherwise retired as a safeguarding matter. Stays within the upReach safeguarding log until year-end. Items should only be added to this category by the Designated Safeguarding Officer (or the backup Designated Safeguarding Officer).

Examples of Precipitating Events in Each Category

Yellow	Amber	Red
<ul style="list-style-type: none"> ● Reports of current mental or physical health issues that are impacting engagement with the programme ● Physical injury sustained at an upReach event within the last six (6) months that is no longer an issue or is otherwise resolved ● Past physical, emotional or verbal abuse, bullying, threats, or the like occurring within the last six (6) months at an upReach event, or otherwise occurring between Associates, or between Associates and third parties 	<ul style="list-style-type: none"> ● Reports of suicidal ideations or other forms of self-harm (occurring within the last six (6) months) ● Reports of ongoing physical, emotional or verbal abuse that do not pose an immediate threat of harm to the person ● Physical injury at upReach event within the last three (3) months where the injury is unresolved ● An upReach Employee or Contractor engaging in/suspected of engaging in any 'Misconduct Indicators' as specified above ● Physical, emotional or verbal abuse, bullying, threats, or the like occurring at upReach events, between Associates, or between Associates and third parties within the last three (3) months 	<ul style="list-style-type: none"> ● Report(s) of suicidal ideation that is real and immediate ● Threats of serious bodily harm to self or others ● Reports of ongoing physical, emotional or verbal abuse that do pose a threat of immediate or imminent harm to the person

Actions Required in Each Category

Yellow	Amber	Red
<p>Lead: Reporting Party.</p> <ul style="list-style-type: none"> Reporting Party confirms that Associate involved consents to information being shared. Reporting Party completes the Safeguarding Reporting Form and submits to DSO within 48 hours of incident first occurring or upReach Employee/ Contractor becoming aware of the issue; DSO reviews Safeguarding Reporting Form within 48 hours of submission, logs in Safeguarding database, and confirms classification (or re-classifies); DSO follows up on a monthly basis or as appropriate with reporting party to assess whether further action required; DSO to report to Trustee Safeguarding Lead as appropriate, in line with scheduled Trustee Meeting updates; Reporting party to notify DSO of any changes to matter which may lead to its reclassification. 	<p>Lead: Designated Safeguarding Officer.</p> <ul style="list-style-type: none"> Reporting Party confirms that Associate involved consents to information being shared. Reporting Party escalates to DSO verbally or via email and then completes the Safeguarding Reporting Form and submits to DSO within 48 hours of incident first occurring or upReach Employee/ Contractor becoming aware of the issue; DSO reviews Safeguarding Reporting Form within 48 hours of submission, logs in Safeguarding database and confirms classification. DSO may work with reporting party to determine next steps; DSO to follow up on a weekly basis or as appropriate with reporting party until issue is resolved or downgraded; DSO to report to Trustee Safeguarding Lead as appropriate, in line with scheduled Trustee Meeting updates. If needed, DSO and CE may decide to report to Trustee Safeguarding Lead; Reporting party to notify DSO of any changes to matter which may lead to its reclassification. 	<p>Lead: Designated Safeguarding Officer.</p> <ul style="list-style-type: none"> Reporting party to contact appropriate emergency authorities; Reporting party to immediately contact DSO via phone; Reporting party to complete Safeguarding Reporting Form as soon as possible but no later than twenty-four (24) hours following event and submit to DSO; DSO, backup DSO, and CE to meet within twenty-four (24) hours for Review Meeting to assess the matter, Incident Reporting Form and Safeguarding Reporting Form and to discuss next steps; DSO to log in safeguarding database and take action as decided by Review Meeting participants; CE to report to Trustee Safeguarding Lead; DSO to report to Trustee Safeguarding Lead as appropriate, in line with scheduled Trustee Meeting updates; Reporting party to notify DSO of any changes to matter which may lead to its reclassification.