

MANAGING SAFEGUARDING ALLEGATIONS AGAINST STAFF POLICY

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| Policy Folder & Policy Number | Safeguarding |
| Version: | V. 2.0 |
| Ratified by: | Governing Bodies meeting in common |
| Date ratified: | 30/05/2019 |
| Name of originator/author: | Designated Nurse Safeguarding Children |
| Name of responsible committee | Quality & Safety Committees |
| Date approved by Committee: | 14 th March 2019 |
| Date issued: | 1 st June 2019 |
| Review date: | 30 th May 2021 |
| Date of first issue | April 2013 |
| Target audience: | All CCG staff, lay members and independent Contractors (including those GPs who are not directly employed by the CCGs). |

CONSULTATION SCHEDULE

| Name and Title of Individual | Groups consulted | Date Consulted |
|------------------------------|------------------|----------------|
| Director of Quality & Safety | Internal | 23/08/18 |
| | | |

APPROVALS & RATIFICATION SCHEDULE

| Name of Committee approving Policy | Date |
|---|-----------------------------|
| Quality & Safety Committees (meeting in common) | 14 th March 2019 |
| Governing Bodies (meeting in common) | 30 th March 2019 |
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VERSION CONTROL

| Version | Version/Description of amendments | Date | Author/amended by |
|---------|--|----------|---|
| 1 | New Policy | 01.04.13 | Designated Nurse Safeguarding Children |
| 2 | Reflects the alignment of the six CCG in Staffordshire & Stoke on Trent | 14.03.19 | Designated Nurse Safeguarding Children |
| 3 | | | |
| 4 | | | |

Impact Assessments – available on request

| | Stage | Complete | Comments |
|----------------------------|-------|----------|----------|
| Equality Impact Assessment | | | N/A |
| Quality Impact Assessment | | | N/A |
| Privacy Impact Assessment | | | N/A |

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| Explanation of acronyms used in this report: | |
|---|---|
| Acronym | Explanation |
| CCG | Clinical Commissioning Group |
| CIC | Confidential Individual Counselling |
| DBS | Disclosure and Barring Service |
| DNSC | Designated Nurse Safeguarding Children |
| DNSA | Designated Nurse Safeguarding Adults |
| GMC | General Medical Council |
| GP | General Practitioner (Independent Contractor and non-employed) |
| HR | Human Resources |
| LADO | Local Authority Designated Officer |
| LASAM | Local Authority Safeguarding Adult Manager |
| LSCB | Local Safeguarding Children Board |
| MAPPA | Multi-Agency Public Protection Arrangements |
| MARAC | Multi-Agency Risk Assessment Conference |
| MASH | Multi Agency Safeguarding Hub |
| NMC | Nursing and Midwifery Council |
| SI | Serious Incident |
| SSCB | Staffordshire Safeguarding Children Board |
| SOTSCB | Stoke-on-Trent Safeguarding Children Board |
| SSASPB | The Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership |

1.0 INTRODUCTION

- 1.1 This policy relates to situations where an allegation is made that a child/young person/vulnerable adult at risk of abuse are suffering or likely to suffer significant harm from an employee, paid and unpaid professional (eg; GP's; Lay Members) working in all Staffordshire and Stoke-on Trent CCGs or that an employee, paid and unpaid professional's behaviour indicates unsuitability to work with children or vulnerable adults. This policy will provide guidance to all staff working in the CCGs and specifically those in a managerial / executive position and those working in Human Resources.

The Government has laid down an expected response to any allegations of abuse by members of staff that all statutory organisations must follow. This is described in the statutory part of '*Working Together to Safeguard Children*' 2018 as follows:-

NHS organisations, including Clinical Commissioning Groups should have in place arrangements that reflect the importance of safeguarding and promoting the welfare of children, including policies that make a clear distinction between an allegation, a concern about the quality of care or practice or a complaint.

An allegation may relate to a person who works with children who has:

- *Behaved in a way that has harmed a child, or may have harmed a child.*
- *Possibly committed criminal offence against or related to a child; or*
- *Behaved towards a child or children in a way that indicates they may pose a risk of harm to children.*

The *Care Act, 2014*, formalised the expectations on Local Safeguarding Adult Boards to establish and agree a framework and process for how allegations against people working with adults with care and support needs (i.e. those in a position of trust) should be notified and responded to. Types, patterns and different circumstances of abuse and neglect should be considered within the categories identified in the *Care Act, 2014* i.e. physical abuse, domestic violence, sexual abuse, psychological abuse, financial or material abuse, modern slavery, discriminatory abuse, organisational abuse, neglect and acts of omission and self-neglect. These include concerns relating to inappropriate relationship(s) between members of staff and adults in their care, e.g.

- Having a sexual relationship with an adult in a position of trust even if the relationship appears consensual.
- The sending of inappropriate text/email messages or images.
- Possession of indecent photographs/pseudo-photographs of vulnerable adults.

This policy should be read alongside the Local Safeguarding Children Board's guidance for Staffordshire and Stoke-on-Trent and the Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership:

Staffordshire Safeguarding Children Board:

<https://www.staffsscb.org.uk/Professionals/Procedures/Section-Four/Section-Four-Docs/Section-4A--Allegations-of-Abuse-against-a-Person-who-works-with-Children.pdf>

Stoke-on-Trent Safeguarding Children Board:

http://webapps.stoke.gov.uk/uploadedfiles/D01_LADO_Procedure_June_2016.pdf

The Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership:

<https://www.ssaspb.org.uk/Professionals/WM-Adult-PoT-Framework-v1.0.pdf>

- 1.2 The **purpose** of this policy is to provide guidance in the event of an allegation of child / adult abuse being made against a member of staff, (including those GPs and Lay Members who are not directly employed by the CCGs but who offer support and guidance) and a framework for managing cases where allegations are made. The key principles are also applicable to all services commissioned by the CCG's.
- 1.3 Managers may become aware of an allegation by report/complaint from a member of the public, another organisation, another member of staff, GP, Lay Member or by observation/supervision of the staff member themselves.
- 1.4 The allegations would constitute inappropriate conduct whilst on duty or abuse toward a child/adult.
- 1.5 Allegations may require consideration from the following inter-related perspectives:
- Child Protection enquiries by Children's Social Care
 - Adult Protection enquiries by Adult's Social Care.
 - Criminal investigations by the Police (Section 47)
 - Staff disciplinary procedures (including suspension)
 - Complaints procedures
- 1.6 On occasion allegations within a social context such as abuse towards a child or a member of their own family or through social networks may have an impact on their ability to practice. These incidents should also be considered under this policy.
- 1.7 Procedures for managing allegations against people who work with children and / or adults are contained on the Staffordshire / Stoke-on-Trent Local Safeguarding Children Boards Procedures websites www.staffscb.org.uk / www.safeguardingchildren.stoke.gov.uk and the Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership website www.ssaspb.org.uk.
- 1.8 **This policy applies to all staff in the CCG's**, including those GPs and Lay Members who are not directly employed by the CCGs, regardless of role and responsibility.

2.0 DEFINITIONS

- 2.1 Child - As defined in the Children Act (1989; 2004) is any person under the age of 18 years or 21 years if disabled or in Local Authority Care.
- 2.2 Safeguarding Children – Categories of Abuse are:
- Neglect
 - Sexual
 - Emotional
 - Physical
- 2.3 Adult – An adult at risk of abuse or neglect is a person aged 18 years or older who is or may be in need of support and services by reason of mental or other disability, age or illness and, because of those needs, is or may be unable to take care of him / herself, or unable to protect him / herself against significant harm or exploitation.

2.4 Safeguarding Adults – Categories of Abuse are:

- Neglect
- Sexual
- Emotional
- Physical
- Discrimination
- Institutional
- Financial
- Unauthorised deprivation of liberty

2.5 Allegations against Staff (including independent contractors, non-employed GPs and Lay Members):

Any allegation against staff should be considered when there is an allegation or concern that an employee has:

- Behaved in a way that has harmed a child or may have harmed and/or adult.
- Possibly committed a criminal offence against, or related to a child/adult.
- Behaved in a way that indicates that he/she is unsuitable to work with children and or adults.
- Been subject to Multi-Agency Risk Assessment Conference (MARAC).
- Been subject to Multi-Agency Public Protection Arrangements (MAPPA).
- Allegations which occur outside of the work place but which may have an impact upon a child or adult's well-being or safety.

Please note, this is not an exhaustive list and advice must be sought from the Executive Safeguarding Lead /Designated Professionals for the CCGs.

3.0 INTERNAL PROCEDURES

3.1 Prevention:

All managers must ensure that the safe recruitment policies are followed and the appropriate references and Disclosure and Barring Service (DBS) checks are completed. The recruitment procedure can be accessed through your individual CCG Human Resources departments.

DBS web link as follows: <https://www.gov.uk/disclosure-barring-service-check/overview>

- 3.1.1 All staff working within the Human Resource (HR) Department must attend training with regard to the DBS process and the LADO process (HR staff can access in house training or access specialist training via the LSCB web site at www.staffsscb.org.uk / www.safeguardingchildren.stoke.gov.uk).

3.2 Process in the event of an allegation:

An allegation against a member of staff, GP or Lay Member may arise from a number of sources:

- From another member of staff, GP or Lay Member
- From another agency

- Direct sharing of information from the Local Authority Designated Officer (LADO) / Local Authority Safeguarding Adult Manager
- In a complaint from a parent, carer or other member of the public
- From the child or adult involved

3.2.1 In-Hours Procedure:

- The manager receiving the allegation will immediately notify the CCG's Executive Lead for Safeguarding (Director of Nursing & Quality). This will be the Deputy Director of Nursing and Quality during the Director's absence.
The Executive Lead should take advice from the Human Resources (HR) Team.
- If the manager receiving the allegation is unable to contact the Executive Officer, they should immediately notify the Designated Nurse for Safeguarding Children / Adults who will also inform the HR Team.
- The Designated professionals can be contacted via the CCG's Safeguarding Team Support Officer:

Children - 01782 401010
Adults - 01785 854328

3.2.2 Out of Hours Procedure:

In the unlikely event an incident / issue is raised out of hours involving an allegation of child / adult abuse against a CCG employee, GP or Lay Member, the Senior Manager (silver) on call will be expected to make a decision on the urgency of action required. This may require escalation to the Executive Officer (Gold) on call, particularly in the event of a serious allegation requiring a legal response and / or media interest. In most cases this will be communicated to the Executive Safeguarding Lead, HR and the Designated Professionals on the next working day.

4.0 MANAGING THE ALLEGATION

- 4.1 The person receiving the allegation must treat the allegation seriously and keep an open mind. If the allegation is validated and there is cause to suspect that a child / adult has suffered or likely to suffer significant harm, processes outlined in this policy will be adhered to. Staff should be aware that where concerns are validated further steps may be taken as part of the disciplinary process which may include dismissal. If a case is unsubstantiated, the CCG's employee will be supported by their Line Manager and further discussion will involve the Designated Professional and Executive Safeguarding Lead, who will consider what further action, if any, should be taken and seek advice from HR as necessary.
- 4.2 Where the allegation is received by a CCG employee, they should notify their immediate line manager who will notify the DNSC/DNSA, depending on the nature of the concern. Non-employed GPs and Lay Members should notify the Executive Safeguarding Lead and the DNSC / DNSA. **It is important to remember that for any adult where there may be a concern related to abuse, they may also be a parent / carer of children and therefore it could be pertinent to report to either the Adult or Children Safeguarding Designated Nurses.**
- 4.3 If the allegation is made against a senior Executive / Manager, the DNSC / DNSA should be informed. They will decide whether the incident should be highlighted as a potential

Serious Incident (SI) and the most appropriate Executive Director / Accountable Officer will be notified, as appropriate. *Serious incidents* are events in health care where the potential for learning is so great, or the consequences to patients, families and carers, staff or organisations are so significant, that they warrant using additional resources to mount a comprehensive response. Serious incidents can extend beyond incidents which affect patients directly and include incidents which may indirectly impact patient safety or an organisation's ability to deliver ongoing healthcare. The occurrence of a serious incident demonstrates weaknesses in a system or process that need to be addressed to prevent future incidents leading to avoidable death or serious harm to patients or staff, future incidents of abuse to patients or staff, or future significant reputational damage to the organisations involved. Serious incidents therefore require investigation in order to identify the factors that contributed towards the incident occurring and the fundamental issues (or root causes) that underpinned these. Serious incidents can be isolated, single events or multiple linked or unlinked events signalling systemic failures within a commissioning or health system (*Serious Incident Framework; NHSE 2015*).

4.4 **Where the allegation concerns harm or risk of harm to Children:**

Immediate consideration should be given as to whether the allegation is so serious that it be reported to the police and/or children's social care via the MASH. In other cases, 'Working Together to Safeguard Children' (2018) states that the LADO must be informed within one working day of the allegation/concern being raised.

The Designated Professional will notify the Local Authority Designated Officer (LADO) **within 24 hours** for an 'Initial Discussion' which will allow the LADO to advise on next steps and how the matter should be investigated or progressed. The LADO will also advise whether or not a Child Protection referral should be made.

The Staffordshire LADO for all new referrals is located within the First Response Team and be contacted directly on 0800 1313 126.

The Stoke-on-Trent LADO for all new referrals is located within the Safeguarding Referral Team (SRT) and be contacted directly on 01782 235100.

Staffordshire Police via the MASH or 101

The Designated Nurse for Safeguarding Children should attend all strategy meetings arranged in connection with each incident.

4.5 All referrals must be put in writing to Children's Social Care / Adult Social Care (as appropriate) by the referrer **within 24 hours**. Please refer to the Safeguarding Children / Safeguarding Adult Policies on the CCG intranet:

<https://sesandspccg.nhs.uk/news-and-information/publications/policy-and-procedures/safeguarding>

4.6 **Where the allegation concerns harm or risk of harm to Adults:**

Some allegations are so serious as to require immediate referral to the police and/or adult social care.

The Designated Nurse for Safeguarding Adults will notify the Local Authority Safeguarding Adult Manager (LASAM) within 24 hours for an 'Initial Discussion' which will allow the LASAM to advise on next steps and how the matter should be investigated or progressed. The LASAM will discuss with the Police / Designated Nurse Safeguarding Adults and CCG relevant line manager for the CCG employee, or in the case of non-employed GPs and Lay Members, the Executive Safeguarding Lead, regarding investigation and next steps.

**The Staffordshire LASAM for all new referrals can be contacted on 01785 895216
Adult Social Care safeguarding referral Staffordshire - 0345 604 2886
The Stoke-on-Trent LASAM for all new referrals can be contacted on 01782 232396
Adult Social Care safeguarding referral Stoke-on-Trent- 0800 561 0015
Staffordshire Police via the MASH or 101**

The Designated Nurse for Safeguarding Adults should attend all strategy meetings arranged in connection with each incident.

4.7 **Strategy Meeting Agenda**

The strategy / planning meeting will consider:

- The safety of the child/young person/vulnerable adult at risk of abuse is of paramount importance.
- Review what action has already been undertaken so far.
- Decide the in-house investigation strategy to be undertaken. Police and/or Social Care should be consulted when they are involved in any on-going investigation and/or criminal proceedings are pending.
- A decision to be made if a referral is required to the Professional Regulatory Body should the member of staff be a registered professional such as the General Medical Council (GMC) for Doctors, or the Nursing and Midwifery Council (NMC) for Nurses.
- Decide how to present the allegation to the relevant staff member concerned and how to manage the investigatory process.
- Advice should be sought from HR with regards to appropriate policy and process.
- The CCG employee's Line Manager should provide appropriate support to the staff member who the allegations are against if this is appropriate. If the Line Manager is unable to provide support due to a potential conflict of interest, another appropriate person should be appointed. Further support could be considered from Occupational Health and advice should be sought from the HR Team. The Head of Communications and Engagement Manager should be made aware that an allegation has been received in the event that they receive media enquiries however all steps will be taken to ensure confidentiality.
- Decide the frequency and format of review meetings which need to be set up to manage the on-going investigation and the various actions required.

4.8 Any formal investigation process and any potential disciplinary action will be conducted in line with the organisation's Disciplinary Policy. Advice and guidance from HR will be as per the Disciplinary Policy. The staff member will have the right to be accompanied as outlined in the Disciplinary Policy. Refer to the CCG's Disciplinary Policy on the staff intranet.

4.9 The CCG's will consider the implications for an employee or individual providing a service to the CCG's, of the outcome of any investigations by the Police or Children's / Adults Social Care.

4.10 The CCG's employee's Line Manager will be responsible for offering staff support including a referral to Occupational Health and will advise on contact with professional organisations.

4.11 The Executive Safeguarding Lead will manage any media interest with the appropriate

involvement of the Head of Communications and Engagement and will liaise with other agencies as and when necessary.

- 4.12 The Executive Safeguarding Lead will inform the Accountable Officer and will ensure the Accountable Officer is kept informed of all developments and decisions made.
- 4.13 The Executive Safeguarding Lead and Designated Professionals will be available for police liaison and to support staff through any criminal investigation representing the CCG's if there are issues of vicarious liability. Advice can be sought from HR as necessary.
- 4.14 The Executive Safeguarding Lead alongside the CCG employee's Line Manager will also be responsible for managing any resignations, dismissals or disciplinary measures. Decisions will be made in conjunction with advice and guidance provided by the HR Team. The CCG will pursue any investigation or disciplinary procedures until the case is concluded even if the staff member has resigned and left the organisation. It should be noted that in these circumstances the CCG is not obliged to accept a proffered resignation.
- 4.15 All CCG employees involved with the management of the allegations are to ensure that they act in a fair and consistent manner and adhere to the CCG's diversity, inclusion, anti-bullying and harassment principles.
- 4.16 The Executive Safeguarding Lead has the responsibility to consider any impact the incident may have on the staff group or if there has been any collusion by colleagues or managers and take appropriate action.
- 4.17 The CCG employee's Line Manager will facilitate the return to work of the member of staff on conclusion of the investigation if dismissal is not deemed necessary. Where it is decided at the end of the investigation that an allegation is unfounded the staff member will be offered ongoing support.
- 4.18 The Local Authority Designated Officer (LADO) / Local Authority Safeguarding Adult Manager will be updated by the Designated Professional on the conclusion of any internal investigation.
- 4.19 It is the responsibility of the CCG employee's Line Manager to keep contemporaneous and complete records and that these are kept confidential in the personal file. This will be the Executive Safeguarding Lead for non-employed GPs and Lay Members.

5.0 CONFIDENTIALITY

The CCG's will maintain confidentiality and guard against publicity whilst an allegation is being investigated. Information will be restricted at all times to those who have a need to know in order to protect children / adults, deal with enquiries, manage related disciplinary and performance processes.

6.0 ROLE OF THE DESIGNATED PROFESSIONALS

- 6.1 On notification of the allegation the DNSC/ DNSA will:

- Liaise with the Executive Safeguarding Lead, CCG employee's Line Manager and a member of the HR Team to plan the CCG response.
- For children - Contact the Children's Social Care/ LADO for advice/information if appropriate. Make a safeguarding children referral as directed, according to the CCG Safeguarding Children Policy.
- For adults – Contact Adult Social Care / Local Authority Safeguarding Adult Manager for advice / information if appropriate. Make a safeguarding adult referral as directed, according to the CCG Safeguarding Adult Policy.
- DNSC / DNSA to attend all strategy meetings as appropriate. The Designated HR Team member to attend and advise on appropriate process and policy in regard to investigation and disciplinary process.
- Ensure that all the appropriate CCG Line Manager is aware of the plan of action from the strategy meetings and that all actions are implemented.
- Ensure that support and protection for the child/adult by an appropriate person/service has been organised in conjunction with Children's/Adult's Social Care.
- Notify the Executive Safeguarding Lead of all progress regarding the investigation.
- Keep detailed records, compiled reports maintaining confidentiality at all times.
- Incidents requiring referral to the regulatory bodies, CQC, NHSE and DBS, should be discussed with the Executive Safeguarding Lead and a decision made regarding who and when this task is completed.
- Review any lessons learned and implement policies or practice change if necessary.

7.0 COMPLAINTS AGAINST STAFF WHO ARE NO LONGER EMPLOYED BY THE CCG

- 7.1 When complaints are received against staff once they have left the CCG but which took place whilst employed by the CCG, the CCG has the responsibility to follow the procedure to its conclusion and to notify any new employers/agencies of the allegations and findings.

8.0 REFERRAL TO REGULATORY BODIES

Following the outcome of the inquiry, consideration will need to be taken whether to refer an employee to a regulatory body e.g. General Medical Council, Nursing and Midwifery Council and Health Professions Council as required. This decision will be made in conjunction with HR.

9.0 INFORMING THE CARE QUALITY COMMISSION

The Care Quality Commission (CQC) is the independent regulator of health and social care services. The CQC has a range of statutory enforcement actions to use where care does not meet the essential standards of quality and safety across the health economy. The CCG's would also be able to apply contract sanctions. The CQC will ensure that it responds to child /adult safeguarding issues in accordance with the regulatory framework requirements working with commissioners and providers to respond to all child / adult safeguarding issues in accordance with local policy and procedures. The decision to inform the CQC will be made in conjunction with the Executive Safeguarding Lead and Designated Professionals.

10.0 REFERENCES

Care Act 2014:

http://www.legislation.gov.uk/ukpga/2014/23/pdfs/ukpga_20140023_en.pdf

CCG Safeguarding Children & Young People Policy:

CCG Safeguarding Adult Policy:

<https://sesandspccg.nhs.uk/news-and-information/publications/policy-and-procedures/safeguarding>

Serious Incident Framework, Supporting learning to prevent recurrence (NHSE 2015).

<https://www.england.nhs.uk/wp-content/uploads/2015/04/serious-incident-framework-upd.pdf>

Staffordshire Safeguarding Children Board:

<https://www.staffsscb.org.uk/Professionals/Procedures/Section-Four/Section-Four-Docs/Section-4A-Managing-Allegations-of-Abuse-against-a-Person-who-works-with-Children.pdf>

Stoke On Trent Safeguarding Children Board:

http://webapps.stoke.gov.uk/uploadedfiles/D01_LADO_Procedure_June_2016.pdf

The Staffordshire and Stoke On Trent Adult Safeguarding Partnership:

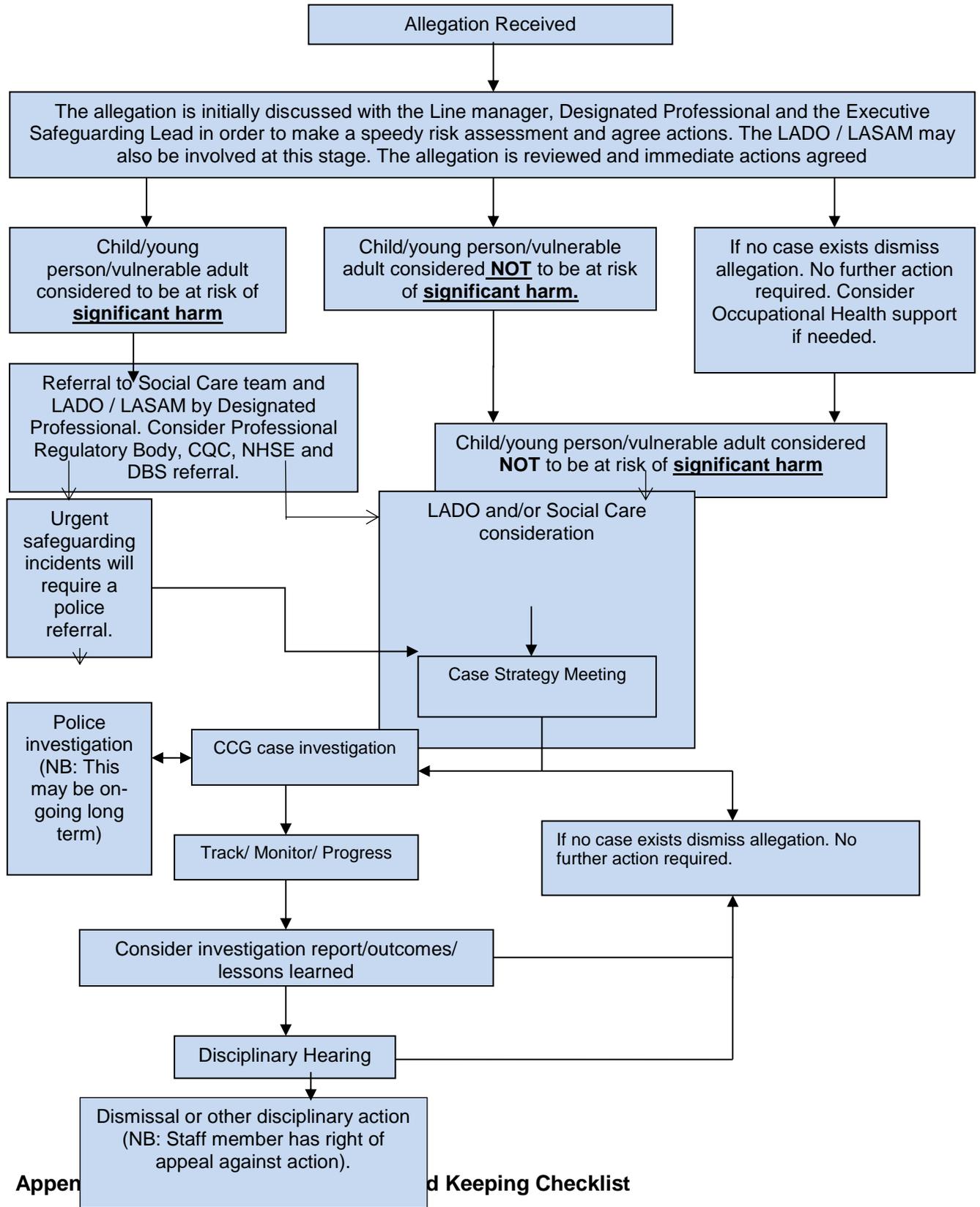
<https://www.ssaspb.org.uk/Professionals/WM-Adult-PoT-Framework-v1.0.pdf>

Working Together to Safeguard Children DCSF 2018:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/729914/Working_Together_to_Safeguard_Children-2018.pdf

Appendix 1

Process Flow Chart



Appendix 1

and Keeping Checklist

The Designated Professional, Executive Safeguarding Lead and / or employee's Line Manager will have the responsibility for ensuring that records are kept throughout the investigation of the allegation/concern. This checklist reflects the information needed, but this is not exhaustive:-

- The nature of the allegation/concern.
- Who was spoken to and when as part of the process and what statements/notes were taken.
- Local Authority Safeguarding Team / LADO / Local Authority Safeguarding Adult Manager / Police referrals made.
- What records were seen and reviewed.
- Why specific decisions/actions were taken, including suspension and any actions taken under the CCG Disciplinary Procedure.
- Professional regulatory body action, including CQC, NHSE and DBS referrals.
- What alternatives to actions were explored.
- Minutes and actions of all meetings that take place.
- The above information will be held securely by the CCG Safeguarding Team and the employee's personnel file in line with current record retention regulation.

IF YOU HAVE AN URGENT SAFEGUARDING CONCERN REGARDING A CHILD OR VULNERABLE ADULT YOU SHOULD REFER USING THE RELEVANT CONTACTS BELOW:

- **SAFEGUARDING CHILDREN** (First Response Team) **0800 1313 126**
(in hours)
 - (Mon-Thurs 0830 – 1700hrs and Fri 0830 – 1630hrs) Email:
firstr@staffordshire.gov.uk
 - Outside these hours Tel 0845 6042 886 or email:
eds.team.manager@staffordshire.gov.uk
 - **SAFEGUARDING ADULTS** (Staffordshire County Council Social Care & Health)
0345 604 2719
 - **TO MAKE A REFERRAL** you can either telephone or download a referral form using the following links:
 - **FOR A CHILD:** <https://www.staffsscb.org.uk/Concerned-about-a-Child/Concerned-about-a-child.aspx>
 - **FOR AN ADULT:** <https://www.ssaspb.org.uk/Reporting-Abuse/Reporting-Abuse.aspx>
- If you use email to contact the Safeguarding Leads, County Council or First Response Teams, do not include any patient data.***

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| Designated Nurse for Safeguarding Children (South & East) 01785 854241 / 07976 584377 | Designated Nurse for Safeguarding Adults (South & East) 01785 895546 / 07800 521569 |
| Designated Nurse for Safeguarding Children (North & Stoke-On-Trent) 01782 401004 / 07715 807135 | Designated Nurse for Safeguarding Adults (North & Stoke-On-Trent) 01782 401029 / 07715 807134 |
| Safeguarding Children Support Officer <i>SASCCG.SafeguardingChildren@nhs.net</i> 01782 401010 | Safeguarding Adult Support Officer <i>SASCCG.safeguardingadults@nhs.net</i> 01785 854328 |