



# Hampshire Achieves

## Safeguarding & the Prevent Duty Procedures

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## Hampshire Achieves Safeguarding & the Prevent Duty Procedures

The contents of this policy are an integral part of the HA Quality Assurance Framework.

All Hampshire Achieves (HA) staff will adhere to [Hampshire County Council Safeguarding policy](#)

### 1.0 Policy Summary

The policy outlines Hampshire Achieves' (HA) commitment to safeguarding children, young people, and vulnerable adults across its educational provisions, including Secure & Specialist Education and partner providers.

### 2.0 Key Principles

- Safeguarding is a whole-organisation responsibility.
- All staff must read Part One of Keeping Children Safe in Education (KCSIE).
- HA aligns with Hampshire County Council's safeguarding frameworks and national legislation.
- A zero-tolerance approach to abuse, harassment, and radicalisation.
- Embedding British Values and Prevent Duty into all learning environments.

### 3.0 Strategic Responsibilities

- Protecting children from harm and promoting welfare.
- Ensuring effective safeguarding policies and procedures.
- Maintaining partnerships with safeguarding boards and external agencies.
- Providing regular training and updates for staff.

### 4.0 Legislative Framework

- Based on KCSIE 2024, Prevent Duty, Modern Slavery Act 2015, Human Rights Act 1998, and Equality Act 2010.
- Includes mandatory reporting for FGM and guidance on sexual violence and harassment.

### 5.0 Safeguarding Themes Covered

- Abuse (physical, emotional, sexual, neglect)
- Bullying and harassment
- Online safety
- Child sexual/criminal exploitation (CSE/CCE)
- Modern slavery
- Radicalisation and extremism
- SEND and LGBTQ+ vulnerabilities

### 6.0 Safeguarding and Prevent Processes for HA Referral and Reporting

- **Initial Concern:** Staff must report concerns to the Designated Safeguarding Lead (DSL) or Officer (DSO).
- **Assessment:** DSL assesses whether the threshold for significant harm is met.
- **Referral:** If harm is suspected, DSL will support contact to Children's Services (MASH) or police.

- **FGM Exception:** Mandatory direct reporting to police by the person discovering it.
- **Record Keeping:** All concerns, decisions, and rationale must be securely recorded.

### **Dealing with Concerns**

Staff must:

- Record concerns in writing.
- Notify their line manager.
- Contact DSL/DSO or MASH if DSL is unavailable.

Partner providers must:

- Align with HA policy.
- Report incidents to HA DSO within 24 hours.
- Include safeguarding data in contract monitoring.

### **Dealing with Allegations**

Against Staff

- Report immediately to DSO/Deputy.
- DSO contacts the Local Authority Designated Officer (LADO).
- No internal investigation until LADO advises.
- Staff may be removed from duties during investigation.

Peer-on-Peer Abuse

- Staff must maintain an attitude of “it could happen here.”
- All reports are taken seriously and investigated.
- Partner providers must follow guidance and report incidents.

### **Safer Recruitment**

- Enhanced DBS checks every 3 years.
- Online searches for shortlisted candidates.
- CVs accepted only with full application forms.
- Safer recruitment training for managers every 2 years.
- Partner providers must maintain a Single Central Record.

### **Induction and Training**

- All staff receive safeguarding induction.
- Annual safeguarding and Prevent training updates.
- CPD opportunities provided.
- Partner providers are responsible for staff training and policy awareness.

### **Information Sharing**

- Must be lawful, necessary, and recorded.
- Consent should be sought unless it increases risk.
- DSL must understand GDPR and Data Protection Act 2018.

Staff must record:

- What was shared
- With whom

- Why
- Date and rationale

### **Prevent Duty**

Staff must:

- Recognise signs of radicalisation.
- Refer concerns to DSL/DSO or police.
- Promote British Values.

Partner providers must:

- Complete Prevent Duty checklist.
- Include Prevent referrals in monthly safeguarding returns.

### **Monitoring and Quality Assurance**

- Annual safeguarding audit using HSCB tool.
- Partner providers submit safeguarding data monthly.
- Central Staff Record reviewed termly.
- Quality assurance framework for safeguarding practice required.

## **7.0 Monitoring, Review & Audit**

The contents of all policy and procedures will be monitored regularly by Hampshire Achieves PMG. Policies and procedures will be kept updated in accordance with any mid-year changes in the law, regulations, or changes to the Services' provision, with updates approved by PMG. All policy and procedures will be reviewed by Senior Managers to determine their effectiveness, and where any changes are required, these will be applied and ratified. A summary of all changes will be kept as part of the PMG meeting notes. In addition, a cycle of internal policy Feedback and Complaints Policy and Procedures 2025-2027 6 compliance/audits defined by Senior Managers will provide the assurance of the overall effectiveness of the Services ethos, policies, and procedures, and will confirm operational effectiveness, and compliance with our own quality assurance framework and any relevant laws or regulations.

## Appendix 1 Safeguarding and Prevent Processes Flowchart

