

APPENDIX 1

STAFF GUIDANCE

These Guidance Notes are intended to supplement and give practical examples of how to implement the Guidance on organising activities for children or adults in vulnerable circumstances (Protected Persons) (the “Guidance”) and should be read alongside that Guidance.

Specific advice is given on the following areas:-

- 1 Staffing
- 2 Behaviour around Protected Persons
- 3 Abuse – Recognising and Reporting
- 4 Involvement of External Organisations.
- 5 Disclosure and Barring Service (DBS) and guidance on checks.
- 6 Roles of DSO, USO and SO.

1 Staffing

- 1.1 In respect of all Activities, a Risk Assessment should be completed in accordance with paragraph 5 of the Guidance and the Guidance on completing Risk Assessments at Appendix 4. A factor for consideration in the Risk Assessment process will be appropriate staffing. In addition to ensuring that appropriate staff are recruited or selected for the Activity in accordance with paragraph 6 of the Guidance, the following considerations should be taken into account.
- 1.2 Staffing considerations for risk assessments (examples):
 - 1.2.1 Lack of supervision by a second member of staff or risk of Protected Person being left on 1:1 basis with individual adult e.g. transport.
 - 1.2.2 Inadequate ratio of adults:children.
 - 1.2.3 Age/disability profile of Protected Person requiring extra supervision.
 - 1.2.4 Assumption of sole caring/training/control/influential position of responsibility.
 - 1.2.5 Inadequate male:female ratio of supervisors.
 - 1.2.6 Residential element.
 - 1.2.7 Involvement of physical contact with Protected Person.
 - 1.2.8 Inadequacy of appropriate changing facilities.
 - 1.2.9 High duration/frequency of activity/contact.
 - 1.2.10 Inadequate training/reporting system.
 - 1.2.11 Improper conduct.

1.2.12 False allegations.

1.3 Safety measures to be put in place (examples):

- 1.3.1 Ensure suitable Staff:Participant ratio and male:female ratio.
- 1.3.2 Ensure all Staff undertaking Regulated Activity or having significant contact with Protected Persons are DBS checked in accordance with paragraph 6.2 of the Guidance, as appropriate.
- 1.3.3 Ensure all Staff are familiar with policies/procedures e.g. anti bullying policy, equal opportunities policy, policies for recruiting and vetting staff etc.
- 1.3.4 Staff to be aware of procedure for reporting suspected abuse (see 3 below).
- 1.3.5 Avoid 1:1 contact wherever possible.
- 1.3.6 Obtain all necessary consent forms e.g. photographic, medication etc.
- 1.3.7 Consider obtaining general permission from the Child to share information with parent/guardian being clear to the Child that where they do not want to give this permission, the limits to confidentiality in relation to issues that may be about harm to themselves or others.
- 1.3.8 Ensure training and safe working practices established.
- 1.3.9 Enforce standards in agreed Codes of Conduct.

1.4 Consideration should be given to the age, needs, competence and abilities of the Protected Persons; the experience of Staff both in general and on specific activities; the duration and nature of the activity and the locations involved, including the requirements of any other organisation involved or to be visited,

in assessing an appropriate Staff:Protected Person ratio. Generally, the younger the age of the Child, the higher the ratio of Staff should be.

- 1.4.1 Staffing ratios should take account of the above factors but as a general guide for routine activities you should consider guidance provided by NSPCC at

<https://learning.nspcc.org.uk/research-resources/briefings/recommended-adult-child-ratios-working-with-children>.

- 1.4.2 As part of the Risk Assessment, the Organiser of the Activity must assess the risk and determine safe supervision levels on an individual basis, including in relation to adults in vulnerable circumstances.

2 Behaviour around Protected Persons

- 2.1 Staff should take steps to ensure that they do not put themselves in a position where an allegation of abuse may be made. The following steps should be followed. This is not intended to be an exhaustive list.
- 2.2 Staff should avoid 1:1 contact with Protected Persons whenever possible even where an Enhanced DBS check has been obtained. Only staff with Enhanced DBS checks should consider engaging in individual meetings where absolutely necessary. 1:1 contact must be avoided completely in the absence of an Enhanced DBS check.
- 2.3 Where individual meetings take place these should be in public spaces or, at least as openly as possible with any doors left partly open and other members of staff should be aware of 1:1 meetings. If possible, all Activities with Protected Persons should have more than one adult present or be at least within hearing or sight of others.

- 2.4 Staff should not engage in any unnecessary physical contact with a Protected Person as this may be misinterpreted. Where physical contact is unavoidable e.g. for physical support or during sport, the purpose of that contact should be made clear.
- 2.4.1 staff required to administer first aid (normally a trained first aider) should ensure, where reasonably practicable, that another member of staff is present.
- 2.5 Staff should avoid 1:1 car journeys.
- 2.6 Contact with a Protected Person should remain within the Activity and arrangements should not be made to contact or meet the Protected Person outside the Activity. Inappropriate behaviour can also occur via social media, telephone, internet, text and email. Staff should not give personal contact details except where necessary for reasons of safety.
- 2.7 Protected Persons should always be treated with respect, fairness and equality.
- 2.8 Feedback given by Staff should be constructive and not negative.
- 2.9 Unacceptable behaviour on the part of the Protected Person or against the Protected Person by other participants or Staff should be challenged appropriately.
- 2.10 Staff should never:
- 2.10.1 engage in any physical touching (save in circumstances set out at 2.4 above);
- 2.10.2 take part in rough or sexually provocative physical games;
- 2.10.3 share a bedroom with a Protected Person;
- 2.10.4 enter a Protected Person's room whilst they are present unless necessary as a result of an emergency;

- 2.10.5 take a Protected Person to the toilet unless necessary for their safety or wellbeing and always with another adult present/aware and only if they have an appropriate level of DBS check;
 - 2.10.6 allow inappropriate use of language without challenge or make jokes which may be regarded as offensive such as religious, sexist, racist or abusive comments;
 - 2.10.7 make any sexually suggestive comments within earshot of a Protected Person;
 - 2.10.8 deter a Protected Person involved in an Activity from making allegations or allow any allegations to go unreported. All allegations must be reported **immediately** in accordance with the procedures outlined at section 3 below;
 - 2.10.9 provide a Protected Person with inappropriate substances (including alcohol);
 - 2.10.10 take any photograph or other image of a child before obtaining consent in accordance with the procedure at paragraph 5.4.1.4 of the Guidance.
- 2.11 Staff should always respect a Protected Person's right to personal privacy BUT never give assurances as to absolute confidentiality. Where it is believed that informing a third party would be in the best interest of the Protected Person, confidentiality may not be possible and this should be explained at the outset of a relevant conversation.
- 2.12 For your own protection, report to the Organiser of the Activity if you feel a Protected Person has a crush on you. Ensure it is recorded and appropriate action taken. Avoid any personal relationships with a Protected Person.
- 2.13 Staff should ensure that Protected Persons have suitable clothing for the proposed Activity and that such clothing complies with local safety rules regarding clothing/footwear in any workshop/laboratory environment.

Appropriate changing facilities should be provided, taking account of the above points, where appropriate.

- 2.14 Where any Activity or off campus visits are proposed an appropriate Risk Assessment should be carried out in accordance with the guidance on completing a Risk Assessment of an Activity for Protected Persons at Appendix 4; a register maintained and an appropriate Staff:Protected Persons ratio determined.
- 2.15 Where the Activity has a residential element, staff should consider appropriate instructions to Protected Persons to lock their doors and windows.
- 2.16 Staff should always be aware of fire regulations and evacuation procedures together with other emergency contact procedures. These should be relayed to the Protected Person in an appropriate and accessible form of communication.
- 2.17 Staff should report incidents including those which could have resulted in health and safety issues and “near misses”, appropriately.
- 2.18 Staff should report any suspicion of possession of alcohol, drugs or weapons to University Security and contact the police, where appropriate.
- 2.19 The Incident Report Form D at Appendix 2 may be utilised for non-emergency incidents.
- 2.20 Individual Incident Report Forms should be stored centrally and securely within the School/Service and managed in line with Data Protection Act requirements and the University Policy on Data Protection <https://dataprotection.leeds.ac.uk>.
- 2.21 Where it becomes necessary to open a file in respect of a Protected Person, that file should be stored as in 2.20 above.

3 Abuse

- 3.1 Abuse can and does occur both within family and institutional or community settings. Staff should always be vigilant for any possible signs of abuse. The NSPCC document [<https://www.nspcc.org.uk/keeping-children-safe/spotting-signs-child-abuse/>] provides guidance on definitions and signs of child abuse.
- 3.2 Staff should take seriously any complaint or offer of information from a Protected Person and immediately seek advice and report in accordance with the Guidance. It is the responsibility of all Staff to act on concerns in order to safeguard the welfare of a Protected Person.
- 3.3 Staff should be aware that abuse can occur in different ways e.g. physical, sexual, neglect and emotional abuse. It can also take place via social media, internet, text, email and phone.
- 3.4 In the event of an allegation of abuse, the member of staff receiving any information is required to:
 - 3.4.1 take the information seriously and show support;
 - 3.4.2 listen carefully, calmly and non-judgementally, without interrupting or talking over the individual and then immediately afterwards make a comprehensive factual record of dates, times, places, the nature of the allegation and what was said and done in the person's own words without making suppositions, ensuring that such notes are kept safely;
 - 3.4.3 offer reassurance but not assurances of confidentiality;
 - 3.4.4 explain necessity to pass on such information to the University DSO;
 - 3.4.5 explain what will happen next and how the Protected Person will be kept informed;

- 3.4.6 refrain from discussing any information with anyone other than the Organiser of the Activity and as advised by the DSO/USO;
 - 3.4.7 report the information to the Organiser of the Activity and obtain assurances that they will pass the information on to the DSO/USO as set out at paragraph 10 of the Guidance.
- 3.5 Staff should not make any judgements or commence investigations as to whether or not an abuse has taken place. Ultimately, that decision lies with Social Services and/or the Police. Staff should not make referrals directly (save as set out in Appendix 5) but rather via the Organiser of the Activity and the DSO. Staff should **immediately** record and report, to the Organiser of the Activity:-
- 3.5.1 accidental injury to a Protected Person;
 - 3.5.2 the necessity to physically restrain a Protected Person to prevent harm to themselves or another;
 - 3.5.3 receipt of a report of potential abuse from a Protected Person;
 - 3.5.4 suspicious marks or injuries on a Protected Person which are unlikely to have occurred accidentally or which have an inconsistent explanation;
 - 3.5.5 concerns that an inappropriate relationship may be developing either between a member of staff and a Protected Person or between two Protected Persons;
 - 3.5.6 concerns that a Protected Person is becoming attracted to you or a colleague;
 - 3.5.7 suspicious changes in behaviour of the Protected Person;
 - 3.5.8 concerns that a Protected Person has misunderstood or misinterpreted an act.

- 3.5.9 inappropriate sexually explicit behaviour or awareness;
 - 3.5.10 concerns about a Protected Person's disregard for their own personal welfare.
- 3.6 Allegations against Staff;
- 3.6.1 any allegation received must be reported immediately to the Organiser of the Activity who will report it to the DSO in accordance with paragraph 8 of the Guidance to ensure that appropriate action is taken;
 - 3.6.2 In the event that the complaint is about the Organiser of the Activity, a direct report should be made to the DSO by the member of staff in receipt of the complaint;
 - 3.6.3 the DSO in conjunction with the USO should consult Social Services for guidance on establishing whether the allegation requires further investigation by Social Services and/or the Police by way of a referral;
 - 3.6.4 An internal investigation may lead to formal action being taken under the following procedures:
 - 3.6.4.1 For Academic and Related Staff: Statute VII, Part III (Discipline, Dismissal and Removal from office).
 - 3.6.4.2 For Support staff: The Procedure Agreement between the University of Leeds, UNISON and Unite, Section G, Disciplinary Procedures.
 - 3.6.4.3 For persons such as volunteers not covered by the above, an appropriate process will be considered.

- 3.6.5 The DSO will liaise with the appropriate SO (see paragraph 10.3.3 Guidance) to determine whether a referral should be made to the DBS in accordance with paragraph 9 of the Guidance.
- 3.7 Where a member of staff has a concern about an incident which may have occurred outside the University, the matter should be immediately reported to the Organiser of the Activity who will report it to the DSO in accordance with paragraph 8 of the Guidance.
- 3.8 All reports received by the Organiser of the Activity should be passed on **immediately** to the DSO or, in his absence, the USO.
- 3.9 The Incident Report Form D at Appendix 2 may be utilised.
- 3.10 Storage of Incident Report forms and/or individual files should be carried out in accordance with paragraphs 2.20 and 2.21 above.
- 3.11 All reports received by the DSO or the USO will be treated seriously and immediately acted upon in accordance with section 6 below.

4 Involvement of External Organisations

- 4.1 Where it is proposed that an external organisation will engage in any Activity to which paragraph 6.1 of the Guidance relates, they will be required to produce a declaration stating that their staff are appropriately trained and have the appropriate checks to permit them to work with Protected Persons and that the organisation has an appropriate policy relating to the protection of Protected Persons. Best practice will be to ensure that all of such organisation's staff are DBS checked but, if not, the organiser of the Activity must ensure that this is taken into account when allocating tasks and in conducting the Risk Assessment.

- 4.2 A Code of Conduct should be agreed with any individual employed by the external organisation in accordance with Form B at Appendix 2.
- 4.3 Any allegations of abuse by an employee from that external organisation must be referred to the DSO in accordance with paragraph 8 of the Guidance.
- 4.4 In respect of Activities involving schools, where members of staff of that school are involved in the Activity, it is expected that the school will complete its own risk assessment which should then be assessed by the Organiser of the Activity to ensure compatibility with the University's Risk Assessment.

5 Disclosure and Barring Service (DBS) and guidance on checks

- 5.1 The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. They are responsible for processing requests for criminal records checks; deciding whether it is appropriate for a person to be placed on or removed from a barred list and placing or removing people from the DBS children's barred list and adults' barred list for England, Wales and Northern Ireland. It replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA). Its equivalent agencies are Disclosure Scotland and Access Northern Ireland. The DBS work with the police, who provide information that is held locally or on the police national computer. They also work with the Department for Education who owns the safeguarding policy for children; the Department of Health who owns the safeguarding policy for vulnerable groups; TATA Consultancy Services (TCS), a private sector partner that operates an administration infrastructure and call centre for their disclosure service and registered bodies (organisations such as ourselves) that have registered with the DBS checking service to process, check and submit disclosure applications, validate information provided by the applicant, and establish the identity of the applicant.
- 5.2 Guidance on DBS is at https://assets.publishing.service.gov.uk/media/6229db7e8fa8f526d45ab5a6/Quick_Guide_to_DBS_Checks.pdf

5.2.1 Information on types of checks, volunteer applications, overseas applications, DBS Code of Practice and security features:
<https://www.gov.uk/government/collections/dbs-checks-detailed-guidance>

5.2.2 DBS criminal record checks are currently processed via the paper application form route, in some parts of the University. However, the University has recently begun to use an electronic criminal record checking system which is in the process of being rolled out across the University. Once the changes have been fully implemented, this Guidance will be revised to reflect this. In the meantime, any queries about criminal record checking should be directed to the current countersignatory/disclosure manager in your School/Service.



- 5.3 Whenever it is envisaged (as identified in the risk assessment process) that Staff (whether existing Staff or a new appointment), are to undertake a “Regulated Activity” (see 5.10 below) or roles involving significant contact with Protected Persons, a criminal record check of appropriate level and type must be obtained, together with a Declaration of Suitability to Work with Protected Persons (Appendix 2C before any Activity is undertaken. Any role holder carrying out ‘Regulated Activity’ must also have an appropriate barred list check.
- 5.4 Those within the pre-September 2012 definition of “Regulated Activity” will remain eligible for enhanced DBS checks (but without a check of the barred lists), whether or not they fall within the post-September definition.
- 5.5 Students undertaking certain programmes will be eligible for criminal record checks in accordance with the requirements of their Schools and any relevant external professional body’s requirements.
- 5.6 Where relevant, appropriate checks should be made with overseas authorities to ensure continuity. For example, for UK nationals who have spent time of six months or more overseas within the last five years, and those who are

non-UK nationals, in addition to the UK checks, a suitable check will also be required for each country of residence.

- 5.7 The DBS countersignatory/disclosure manager for your Faculty/Service can offer advice regarding when it is necessary to carry out appropriate checks, the appropriate level and type and can support you with this process.
- 5.8 All persons requiring a criminal record check must present specific and original documentation, in person, to the relevant Countersignatory/disclosure manager or authorised ID checkers.
 - 5.8.1 The minimum age of an individual for whom a DBS check can be applied is 16.
 - 5.8.2 If your Faculty/Service does not have a DBS countersignatory/disclosure manager you should contact the University Lead Countersignatory/disclosure manager (see paragraph 10 Guidance).
- 5.9 Regulated Activities are the activities that the DBS can bar people from doing. It is a criminal offence to knowingly allow a barred person to work in Regulated Activity. It is also a criminal offence for a barred person to seek work, or work in, activities from which they are barred.
- 5.10 What is Regulated Activity?
 - 5.10.1 The Term “Regulated Activity” has a very technical definition. (See respective links below in relation to children and adults)
 - 5.10.2 “Regulated Activity” in relation to children (as defined in Schedule 4 of the SVGA as amended by the PFA) is work which must not be undertaken by a barred person and for which the University may obtain an enhanced DBS check and check of the relevant barred lists. In summary, the definition of Regulated Activity relating to

children comprises only

5.10.2.1 specific activities:

5.10.2.1.1 unsupervised teaching, training, instruction
of under 18s; or

5.10.2.1.2 care for or supervision of under 18s; or

5.10.2.1.3 provision of advice/guidance on well-being;
or

5.10.2.1.4 moderating a public interactive
communication service used wholly/mainly
by children; or

5.10.2.1.5 driving a vehicle only for children.

5.10.2.2 Regulated Activity in relation to children will not include any form of teaching, training or instruction that is, on a regular basis, subject to the day-to-day adequate supervision by another person who is engaged in a Regulated Activity relating to children. (An exception is PGCE Students, who are subject to a barred list check even if they are supervised on placement.) “Adequate Supervision” is defined in accordance with the statutory guidance issued by HM Government.

5.10.2.2.1 An exception is activity merely incidental to activity with adults (unplanned attendance by children).

5.10.2.3 Work for a limited range of establishments (specified places) with opportunity for contact with children: for example, schools, childcare premises, children's homes. In specified places, it is not Regulated Activity if volunteering, under day to day supervision of another person engaging in Regulated Activity. Nor is it Regulated Activity where a person is contracted (or volunteers) to provide occasional or temporary services. However, please note, those contracted, or volunteering to provide occasional or temporary teaching, training or supervision of children in a specified place would be in Regulated Activity (e.g. locum or supply teaching).

5.10.2.3.1 Work under 5.10.2.2 or 5.10.2.3 is Regulated Activity only if done regularly. "Regularly" is defined in accordance with the factual note by HM Government. In summary, it is work carried out by the same person frequently (once a week or more), or intensively (on 4 or more days in a 30 day period) **and is Regulated Activity even if only carried out once between 2am-6am with opportunity for face-to-face contact.**

5.10.2.4 Relevant personal care, for example, washing, feeding, toileting or dressing; or healthcare by or supervised by a professional;

5.10.2.5 Registered childminding; and foster-carers:

5.10.2.5.1 for work under 5.10.2.4 or 5.10.2.5, there is no requirement that it is performed regularly for it to qualify as Regulated Activity.

5.10.2.5.2 Regular day-to-day management or supervision of those engaged in Regulated Activity will also amount to Regulated Activity eg some Line Managers.

5.10.2.6 Regulated Activity relating to adults no longer labels adults as “vulnerable”. Instead, the definition identifies the activities which, if any adult requires them, lead to that adult being considered vulnerable at that particular time. Regulated Activity relating to adults is defined in accordance with the factual note by HM Government. Briefly, there are six clearly defined categories: healthcare; personal care; social work; assistance with general household matters such as cash, bills or shopping; assistance with the conduct of the adult’s own affairs; and conveying adults who need it because of their age, illness or disability to and from places where they will receive healthcare or relevant personal care or social work.

5.10.2.7 First aid by designated staff first aiders is not Regulated Activity.

5.11 What is significant contact?

5.11.1 As described above, Regulated Activity for Children comprises specific activities and work in ‘specified places’. A specific level of frequency is required for most (but not all) of these, in order for that work/activity to be classed as Regulated Activity, and for which the University is then

entitled to an Enhanced check, plus a check of the relevant barred list.

5.11.1.1 However, legislation also defines 'Work with Children' which was changed recently to expand the range of circumstances for which Enhanced checks can be sought but *without* a check of the children's barred list.

5.11.1.2 Enhanced only checks can now be sought for those activities prescribed under Regulated Activity, but which are not Regulated Activity because they only take place infrequently. For example, someone providing cover for a children's swimming instructor. The nature of this 'cover' role, would mean that it could be infrequent and is therefore, unlikely to be regulated activity. However, risk assessment may still identify the need for an Enhanced level check and this is now possible, but without the entitlement to check the barred list.

5.11.1.3 This 'infrequency' provision applies also to the pre-September 2012 definition of Regulated Activity in relation to children. The infrequency provision relates only to work with children only, not adults. This is one example of what the University may define as significant contact.

5.11.2 Significant contact for both children and adults in vulnerable circumstances may include roles that used to be regulated activity but are no longer regulated activity, because they were removed by the Protection of Freedoms Act.

5.12 Other levels of check

5.12.1 There is also provision for standard level checks for employment or other work which is concerned with the provision of health services and which is of such a kind as to enable the holder of that employment or the person engaged in that work to have

access to persons in receipt of such services in the course of their normal duties. For example, a researcher with access to patients but who is not providing Healthcare or other types of Regulated Activity, and has no direct bearing on the quality of care. Such research may be through focus groups or qualitative interviews.

- 5.12.2 Basic level checks, revealing only 'unspent' criminal records, may also be obtained where deemed necessary through risk assessment. For example, for cleaners in halls of residence housing under 18 year olds.

5.13 Guidance on Disclosure

- 5.13.1 Criminal Record checks: Guidance for employers:
<https://www.gov.uk/guidance/dbs-check-requests-guidance-for-employers>
- 5.13.2 Filtering of criminal convictions for disclosure:
<https://www.gov.uk/government/collections/dbs-filtering-guidance>
- 5.13.3 Filtering:
<https://www.gov.uk/government/collections/dbs-filtering-guidance>
- 5.13.4 Eligibility:
<https://www.gov.uk/government/collections/dbs-eligibility-guidance>
- 5.13.5 Eligibility: Pre September 2012 for children:
<https://www.gov.uk/government/collections/dbs-eligibility-guidance>
- 5.13.6 Eligibility: Pre September 2012 for vulnerable adults:
<https://www.gov.uk/government/collections/dbs-eligibility-guidance>
- 5.13.7 Overseas criminal record checking:
<https://www.gov.uk/government/publications/criminal-records-checks-for-overseas-applicants>

- 5.13.8 Safer recruiting:
https://assets.publishing.service.gov.uk/media/6194ddb28fa8f5037ffaa0a6/Safeguarding_Charter_-_Final.pdf
- 5.13.9 Completing the application form:
<https://www.gov.uk/government/publications/dbs-application-forms-guide-for-applicants>
- 5.13.10 Application form guide: Countersignatories:
<https://www.gov.uk/government/publications/dbs-application-forms-countersignatories-guide>
- 5.13.11 Application form guide: Applicants:
<https://www.gov.uk/government/publications/dbs-application-forms-guide-for-applicants>
- 5.13.12 Identity checking guidelines:
<https://www.gov.uk/government/publications/dbs-identity-checking-guidelines>
- 5.13.13 DBS Update Service: employer guide:
<https://www.gov.uk/government/publications/dbs-update-service-employer-guide/dbs-update-service-employer-guide>
- 5.13.14 DBS Update Service: applicant guide:
<https://www.gov.uk/government/publications/dbs-update-service-guide-for-applicants>

5.14 Guidance on Barring

- 5.14.1 Referrals to DBS: Guide for employers:
<https://www.gov.uk/government/collections/dbs-referrals-guidance--2>

- 5.14.2 Referrals to DBS: Prescribed Information:
<https://www.gov.uk/government/publications/dbs-referrals-prescribed-information>
- 5.14.3 Referrals to DBS: Personnel Suppliers:
<https://assets.publishing.service.gov.uk/media/5a7b13cde5274a34770e9455/referral-instructions-personnel.pdf>
- 5.14.4 Referrals to DBS: FAQs:
<https://assets.publishing.service.gov.uk/media/5a7b51f6ed915d3ed90639f8/dbs-referral-faq.pdf>
- 5.14.5 Referrals to DBS: Form and Guidance:
<https://www.gov.uk/government/publications/dbs-referral-and-barring-decision-making-process/dbs-referrals-guide-referral-and-decision-making-process>
- 5.14.6 Barred lists:
<https://www.gov.uk/government/collections/dbs-referrals-guidance--2>

6 Roles of DSO, USO and SO

- 6.1 In accordance with paragraph 3 of the Guidance on organising activities for children or adults in vulnerable circumstances, the DSO will:
 - 6.1.1 be accountable for the University safeguarding children, young persons and adults in vulnerable circumstances policy (the Policy) and procedures;
 - 6.1.2 ensure that the Policy and Guidance are given priority at a senior level within the University of Leeds;
 - 6.1.3 ensure that arrangements are in place within the University of Leeds to ensure compliance with the duties arising under the Policy and Guidance;
 - 6.1.4 liaise with the University's Human Resources Department and the Support Officers to promote safe recruitment, training and reporting

procedures as required by DBS, in line with the Policy and Guidance;

- 6.1.5 ensure that funding and Human Resources are available to allow the requirements of the Policy and Guidance to be fulfilled;
- 6.1.6 ensure that guidance is in place for records to be stored and shared appropriately in accordance with the Data Protection Act requirements;
- 6.1.7 encourage creation of links with Social Services departments and the Police where appropriate;
- 6.1.8 ensure that the position of University Safeguarding Officer (USO) has clear operational responsibilities and accountabilities together with access to appropriate advice and guidance;
- 6.1.9 ensure that monitoring review systems are in place to incorporate relevant guidance and legislation and ongoing effectiveness of the Policy and Guidance;
- 6.1.10 liaise with the USO to ensure that any reported allegations/disclosures of abuse are referred to the relevant investigating agency;
- 6.1.11 liaise with the SO at paragraph 10.3.3 of the Guidance to ensure that the legal obligation to refer individuals to DBS referred to in paragraph 9 of the Guidance is met, including the obligation to report information on any member of staff/student it is believed has behaved in a way that has harmed, or may have harmed a Protected Person; possibly committed a criminal offence against or related to a Protected Person or behaved towards a Protected Person in a way which indicates that they are unsuited to undertake Regulated Activity.

- 6.2 In accordance with paragraph 3 of the Guidance and paragraph 6.1.8 above, the DSO may delegate appropriate operational powers to the University

Safeguarding Officer (USO) as indicated below, who will have the following roles:

- 6.2.1 to advise the DSO on the process of referring cases of suspected abuse or allegations thereof to the relevant investigating agencies and implementing those referrals;
- 6.2.2 to act as a source of support, advice and expertise to Staff in Schools and Services;
- 6.2.3 to liaise with the DSO in respect of issues arising and ongoing investigations;
- 6.2.4 to be appropriately trained to identify signs of abuse and be able to advise when it is appropriate to make a referral;
- 6.2.5 to make referrals to outside agencies as set out in Appendix 6 in cases of suspected abuse where agreed by the DSO;
- 6.2.6 to advise and assist in the operation of the Policy and the Guidance;
- 6.2.7 to have access to resources as deemed appropriate by the DSO and attend relevant or refresher training courses;
- 6.2.8 to liaise with the Support Officers (see below) and the DSO to contribute to the development of a framework to enable operational requirements of the Policy and Guidance to be met;
- 6.2.9 to be involved in organising appropriate training of Staff;
- 6.2.10 to provide a link with external agencies as appropriate e.g. Social Services, schools, parents etc;
- 6.2.11 to keep detailed, accurate and secure written records of referrals, concerns and incidents reported.

6.3 In order to support the roles and in the absence of the DSO and the USO, a network of Support Officers (SO) with specific expertise has been set up as detailed in paragraph 10 of the Guidance. The roles of the Support Officers will be to:

6.3.1 act as source of support, advice and expertise in the areas indicated in paragraph 10 of the Guidance to the officers detailed in paragraphs 6.1 and 6.2 above and to Staff in Schools and Services;

6.3.2 liaise with the DSO and USO in relation to implementation, operation and training arising from the Policy and Guidance.