

Supplementary guidance:

inspecting safeguarding in
post-16 provision

Spring 2024

This guidance is also available in Welsh.

The purpose of Estyn is to inspect quality and standards in education and training in Wales. Estyn is responsible for inspecting:

- ▲ nursery schools and settings that are maintained by, or receive funding from, local authorities
- ▲ primary schools
- ▲ secondary schools
- ▲ all-age schools
- ▲ special schools
- ▲ pupil referral units
- ▲ independent schools
- ▲ further education
- ▲ independent specialist colleges
- ▲ adult community learning
- ▲ local authority education services for children and young people
- ▲ teacher education and training
- ▲ Welsh for adults
- ▲ work-based learning
- ▲ learning in the justice sector

We also:

- ▲ report to Senedd Cymru and provide advice on quality and standards in education and training in Wales to the Welsh Government and others
- ▲ make public good practice based on inspection evidence

Every possible care has been taken to ensure that the information in this document is accurate at the time of going to press. Any enquiries or comments regarding this document/publication should be addressed to:

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What is the purpose?

This provides further guidance for inspectors to use for reference during inspection alongside the sector guidance for inspection, to support specific lines of enquiry.

For whom is it intended?

Post-16 providers, including further education colleges, independent specialist colleges, adult learning in the community, the justice sector and work-based learning providers.

From when should the guidance be used? January 2024

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Supplementary guidance

Our inspection guidance explains what we inspect and how we inspect. However, we also produce supplementary guidance to help inspectors to consider specific aspects of education and training further.

The supplementary guidance documents set out some key principles, considerations and resources for inspectors. They relate to all sectors that we inspect, unless they state that they are for a specific sector. They expand on certain aspects of education/training (e.g. the inspection of literacy) or on ways of conducting inspections (e.g. the use of learning walks) or specific inspection arrangements.

The supplementary guidance documents do not aim to be comprehensive. Inspectors are not required to work through them exhaustively when covering any specific aspect on an inspection. However, inspectors may find them useful when responding to specific emerging questions that arise during inspections or when they wish to reflect or investigate further.

The supplementary guidance documents may help providers gain an understanding of our inspection arrangements. They may also be helpful to providers in evaluating specific aspects of their own provision.

Our inspection work is based on the following principles:

- Inspectors will approach inspection with a positive mindset to ensure it is the best possible professional learning experience for the staff in each provider
- Inspectors will take a learner-focused approach to inspection
- Inspectors will always focus strongly on the quality of teaching and learning
- Inspectors will seek out well-considered innovative practice
- Inspectors will tailor the inspection activities according to the circumstances in each provider as far as possible
- Inspectors will be agile and responsive to emerging findings and will use the increased range of inspection tools and approaches available
- Inspectors will consider everything in the inspection framework, but will only report on the key strengths and weaknesses within each provider

Introduction

This supplementary guidance aims to support inspectors as necessary in evaluating providers' safeguarding arrangements when carrying out inspections.

In all aspects of our work, the needs interests and well-being of children, young people and vulnerable adults must be put above the needs and interests of all others. Hence, our Safeguarding Policy and the guidance contained within it must have priority over all other policies and advice. Through this guidance and through appropriate training we will raise the awareness and understanding of our staff to potential abuse, neglect and unsafe professional practice both within settings we inspect and within other settings we visit.

The supplementary guidance should be used for reference during inspection alongside our Policy and Procedures for Safeguarding.

This guidance does not cover how inspectors should deal with allegations in respect of safeguarding received during an inspection. Inspectors must be familiar with our Policy and Procedures for Safeguarding (see above), which covers children, young people and vulnerable adults. All inspectors should be aware of what to do in the event of receiving allegations in relation to safeguarding, and the requisite actions are outlined in this document.

Further advice and guidance

Inspectors who need advice or guidance should initially contact the sector lead for safeguarding. They may also contact one of Estyn's safeguarding officers. You also need to inform the relevant assistant director .

- Dyfrig.Ellis@estyn.gov.wales
- Andrea.davies@estyn.gov.wales
- Liz.Counsell@estyn.gov.wales
- Delyth.gray@estyn.gov.wales

Answers to frequently asked questions (FAQs) about evaluating a provider's arrangements for safeguarding can be found at:

<https://www.estyn.gov.wales/inspection/safeguarding-0>

In the event of concerns or queries in relation to receiving safeguarding allegations, the following telephone numbers are available:

A member of our Lead Officer safeguarding team: 02920 446482 (also available out of office hours)

Our main office (during office hours): 02920 446446

Definition of safeguarding

All post-16 providers have statutory duties to operate in a way that takes into account the need to safeguard and promote the welfare of children. The arrangements that providers have in place need to ensure that:

- reasonable measures are taken to minimise risks of harm to children's welfare
- appropriate actions are taken to address concerns about the welfare of a child or children, working to agreed local policies and procedures in full partnership with other local agencies

Safeguarding and promoting the welfare of children is concerned with:

- protecting children from abuse and neglect, or harm
- preventing impairment of their health or development
- ensuring that they receive safe and effective care

This is to enable children to have optimum life chances.

Important legislation and guidance in this area:

- All Wales safeguarding procedures 2019
- Anti-racist Wales action plan 2023
- Education workforce council main functions regulations 2015
- Independent inquiry into child sexual abuse
- Independent special post-16 institutions guidance
- Keeping learners safe 2022
- Managing risk of radicalisation in your education setting 2023
- Peer-on-peer sexual harassment among 16 to 18-year-old learners in further education
- Prevent duty guidance: for further education institution in England and Wales (2023)
- Procedures for reporting misconduct and incompetence in the education workforce in Wales (gov.wales) (2015)
- Protection of freedoms act 2012
- Reducing restrictive practices 2022
- Safe and effective intervention- use of reasonable force and searching for weapons
- Safeguarding children in education: handling allegations of abuse against teachers and other staff
- Safe learning communities 2019 (Work-based learning only)
- Social services and well-being (Wales) act 2014
- Statutory guidance issued under section 29 of the Counter-Terrorism and Security Act 2015
- Supporting learners with healthcare needs
- Welsh Government Health and Safety Code of Practice for Contracted Provision

This list is not exhaustive.

It is important to note that providers should refer to Welsh legislation and guidance only within their policies unless there is a specific reason to do otherwise. For example, where UK wide legislation applies, such as in relation to the Prevent duty.

Safeguarding vulnerable adults

The definition of a ‘Vulnerable Adult’ is set out in section 126 of the Social Services and Well-being (Wales) Act 2014.

- (1) An “adult at risk”, for the purposes of this Part, is an adult who—
- (a) is experiencing or is at risk of abuse or neglect
 - (b) has needs for care and support (whether or not the authority is meeting any of those needs)
 - (c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it

“Abuse” in this context is defined in the All Wales Safeguarding Procedures as “physical, sexual, psychological, emotional or finance abuse (and includes abuse taking place in any setting, whether in a private dwelling, an institution or any other place. “

Essentially, all vulnerable adults have the right to be protected from abuse and neglect, the right to receive proper care and be supported in seeking help in the event that they have been abused.

Preventing radicalisation and extremism

From 1 July 2015, providers must have ‘due regard to the need to prevent people from being drawn into terrorism’. This is set out in Section 26 of the Counter-Terrorism and Security Act 2015 and the accompanying Prevent duty guidance under section 29 of the Act. The aim of this legislation is to stop people becoming terrorists or supporting terrorism.

The Prevent duty requires specified authorities such as education, health, local authorities, police and criminal justice agencies (prisons and probation) to help prevent the risk of people becoming terrorists or supporting terrorism. It sits alongside long-established safeguarding duties on professionals to protect people from a range of other harms, such as substance abuse, involvement in gangs, and physical and sexual exploitation. The duty helps to ensure that people who are susceptible to radicalisation are supported as they would be under safeguarding processes.

The context of the provider will affect the extent to which inspectors will need to consider the provider’s work in this area. However, every provider must comply with the duty and inspectors should satisfy themselves that the provider is aware of the duty and acting appropriately.

Leaders should demonstrate an understanding of the local context and risk, the most appropriate type of Prevent activity for them to be involved in, and the nature of their primary responsibilities and functions. Staff should understand that a person’s susceptibility to radicalisation may be linked to their vulnerability. A person can be

vulnerable if they need special care, support or protection because of age, disability, risk of abuse or neglect.

Expectations on providers include:

- Maintaining appropriate partnerships and effective partnership working eg with the police, local Prevent leads and local authorities
- Having due regard to the need to prevent people from becoming terrorists or supporting terrorism
- Appointing a designated person in a leadership position who is responsible for overseeing Prevent delivery
- Ensuring staff (and, where appropriate, learners) understand the risks of radicalisation
- Building and promoting capabilities to deal with radicalisation concerns
- Promoting the importance of Prevent and the role all staff play in countering terrorism
- Demonstrating that they understand and manage risk and share information as required
- Conducting a risk assessment (formats may differ across sectors, leaders should ensure that they consult the most recent guidance for their sector in developing this)
- Ensuring staff are appropriately trained in this area
- Reducing permissive environments
- Monitoring and assurance of training, risk assessments and management concerns

This list is not exhaustive.

Further, the provider should ensure that all staff are appropriately trained in this area. Free online training is available on the UK government website. There are three levels of training for awareness, referrals or multi-agency panels, dependant on the role of each member of staff.

Providers should ensure that they have appropriate policies, procedures and risk assessments in place in this area to safeguard learners.

What is a child?

The Welsh Assembly Government (2007) document 'Safeguarding children: working together under the Children Act 2004' explains that a child is anyone who has not yet reached their 18th birthday. 'Children' therefore means 'children and young people' throughout that document. The fact that a child has become sixteen years of age is living independently or is in further education, or is a member of the armed forces, or is in hospital, or in prison or a young offenders institution does not change their status or their entitlement to services or protection under the Children Act 1989.

Everyone who works in education shares the duty to help keep children and young people safe. When inspecting a provider's safeguarding arrangements inspectors should consider how effective the provider is in the following:

- creating and maintaining a safe environment for children and young people
- identifying where there are child welfare concerns and taking action to address these, where appropriate, in partnership with other agencies
- the development of children's understanding, awareness, and resilience through the curriculum

Achieving this objective requires systems designed to:

- prevent unsuitable people from working with children and young people
- promote safe practice and challenge poor and unsafe practice within the provision
- identify instances in which there are grounds for concern about a child's welfare arising from home, community, the provider or employer, and initiate or take appropriate action to keep them safe
- contribute to effective partnership working between all those involved with providing services for children and young people

In all instances, the inspection framework looks beyond a tick list of compliance and instead evaluates a provider's approach to safeguarding, and the degree to which this promotes and supports a culture of safety and well-being within the provider community.

Child protection is a part of safeguarding and promoting welfare. This refers to the activity, which is undertaken to protect specific children who are suffering or are at risk of suffering significant harm as a result of abuse or neglect.

***Please note that child protection is not relevant in all areas of Post-16 education as some providers educate adults only.**

Safeguarding is protecting children and adults from abuse or neglect and educating those around them to recognise the signs and danger. It also encompasses issues such as:

- the safe recruitment, supervision, training and management of staff
- how staff manage learners' behaviour, including withdrawal provision and the use of restraint

- how well the provider monitors learner attendance and engagement with the provision, which is able to identify quickly unexplained medical conditions, unusual absences, and disappearances
- learner health and safety and well-being, on and off-site
- developing learners' knowledge and understanding of emotionally damaging or unsafe behaviours, for example grooming, harassment, discrimination, bullying and extremism
- bullying, including cyberbullying
- the provider's record keeping procedures
- arrangements for meeting the needs of children with medical conditions
- first aid and the management of medicines
- relationships and sexuality education
- promoting healthy relationships
- child sexual exploitation
- forced marriage
- preventing radicalisation and exploitation
- trafficking
- signposting victims of abuse to appropriate help and support
- mandatory reporting duty for female genital mutilation
- drugs and substance misuse
- peer on peer sexual harassment
- online safety

The Welsh and UK Governments have issued specific statutory requirements about many of these issues. There may also be other safeguarding issues that are specific to the local area or population.

Where there are statutory requirements, providers should already have in place policies and procedures that satisfy those and comply with any guidance issued by the Welsh Government. Similarly, arrangements about matters on which the Government has issued guidance should be evidenced by policies and procedures that are in accordance with that guidance or achieve the same effect.

Our inspection arrangements

Safeguarding aspects within the framework

Inspectors will consider the provider's approach to safeguarding and the degree to which this promotes and supports a culture of safety and well-being within the provider community, whether on-site, off-site or online. This includes considering the effectiveness of the provider's own evaluation of its safeguarding arrangements.

Inspectors should consider the provider's record-keeping processes for attendance and absences from provision (this may include absences for all or part of the working day). They should consider how well the provider addresses persistent absenteeism, for example, through partnerships with social care services, health services, youth services, Youth Offending Services or the police.

The team should focus on how the provider uses information to monitor and support learners' well-being and progress.

Inspectors should evaluate how well staff and governors/directors understand and implement the provider's safeguarding policies and procedures, for example in the following areas:

- the recording and management of incidents of bullying
- child protection
- safe recruitment of staff and volunteers
- first aid
- welfare of learners with medical conditions or personal care needs
- welfare of learners on vocational placements
- safety on educational visits
- site security, where appropriate to the nature of provision
- the management of learner discipline including physical intervention and restraint
- the management of transport including traffic on the provider's site, where appropriate
- training and staff understanding of these important areas of practice

Inspectors should assess carefully not only whether these documents exist, but their quality and crucially, how well they are understood and applied. These policies should cover services that extend beyond the working day (e.g., where provided, community activities on the provider's premises.)

In addition inspectors will consider other aspects of safeguarding.

For example, the extent to which learners feel safe and secure, and free from physical and verbal abuse in the provider. It is here that inspectors will evaluate and report on the impact of the provider's safeguarding arrangements and on learners' well-being.

Inspectors will evaluate how well the provision helps learners to develop skills, knowledge and understanding in making healthy lifestyle choices. This includes evaluating the provider's personal and social education programme. Inspectors should consider how well the provider supports the social and emotional skills of all learners, including those from disadvantaged backgrounds. For examples, inspectors should evaluate the provider's arrangements for teaching learners about:

- bullying including cyber bullying
- internet safety
- harassment and discrimination
- drug and substance abuse
- sex and healthy relationships education
- preventing radicalisation and exploitation
- learners' appropriate knowledge and understanding of emotionally damaging or unsafe behaviours, for example grooming, child sexual exploitation and extremism.

Inspectors will consider how well leaders support safeguarding Inspectors

should evaluate the priority that leaders have given to ensuring that all staff understand and promote the provider's safeguarding culture. A provider's leaders and managers should be clear about their statutory responsibilities regarding safeguarding and the steps they are taking to develop good practice beyond the statutory minimum. Inspectors should consider the priority that leaders have given to ensuring that all practitioners understand and promote the provider's safeguarding work.

The provider's governing body or proprietor (where relevant) is accountable for ensuring that the provider has effective policies and procedures in place in accordance with the Welsh Government's guidance and should monitor the provider's compliance with this. This includes ensuring that safe recruitment checks are carried out in line with statutory requirements.

Inspectors should assess carefully how well senior managers and governors/directors monitor and evaluate all the aspects for safeguarding and promote the provider's safeguarding culture. If the provider does not have effective policies and procedures for safeguarding and promoting the welfare of learners and does not take sufficient steps to ensure these are adhered to, this will influence the evaluation made about the quality of the provider's leadership and management.

Education with boarding or residential provision, or education within the justice sector

Where education has boarding provision or is linked to a residential or justice setting, inspectors must liaise with Care Inspectorate Wales (CIW) or HMI prisons (HMIP) to ensure that the provision contributes to boarders' or residents' needs in relation to their safety.

Where education has boarding provision or is linked to a residential or justice setting, these policies and procedures should cover services that extend beyond the working day.

Guidance for inspectors in evaluating the effectiveness of safeguarding

Pre-inspection evidence

Inspectors will use a wide range of evidence. Before the inspection, in relation to safeguarding and promoting welfare, the Reporting Inspector (RI) will consider (not for unannounced inspections or visits, such as those in the justice sector, see Annex 10):

- the provider's most recent evaluation of its safeguarding and child protection procedures
- any Welsh Government audit or information about the provider's performance or, policies
- the previous inspection report, if there is one

- data on aspects of behaviour such as disciplinary actions; serious incidents and the use of physical interventions
- the provider's policies for safeguarding and promoting welfare, including the child protection policy
- written information from parents or other partners
- any complaints we may have received
- where applicable, responses to the learners' questionnaires,
- where applicable, responses to the staff and governor questionnaires

It is important that we do not share individual comments from any questionnaire with the provider. The comments from the learner questionnaires are in the inspection documents area and should be kept confidential to the team. Comments from the staff and governor questionnaires are kept securely in the RI area and should remain confidential to the RI.

Where pre-inspection evidence identifies possible safeguarding issues or poor management practice by the provider, inspectors should seek guidance from their sector assistant director (AD) and the safeguarding team. Where an issue is considered reportable, our safeguarding policy must be applied planning the inspection

Responsibility for inspecting safeguarding should be shared by all members of the team, but ultimately rests with the reporting inspector. The RI may allocate specific tasks to any team member, including peer inspectors. It may be that different inspectors are responsible for different aspects of safeguarding and promoting welfare as they occur across the inspection framework. As in all inspections, the reporting inspector takes on overall responsibility for the conduct of the inspection and needs to monitor the work of the inspector(s), taking the lead on issues concerned with safeguarding and promoting the welfare of learners, particularly those regarding child protection.

All providers (not including those within the justice sector) will complete a comprehensive self-evaluation in relation to safeguarding prior to inspection. This will provide a useful overview of the issues which need to be taken into consideration when evaluating the provider's policy and procedures for safeguarding. The format of this may differ across sectors, leaders should ensure that they consult the most recent guidance for their sector when developing this document.

Where a safeguarding issue has been raised about the provider prior to an inspection, a safeguarding officer will have flagged the provider using a safeguarding alert. The inspection co-ordinator will inform the reporting inspector of the flag and will ask them to contact the safeguarding officer for further information and advice. This might include possible questions and further areas to evaluate, linked to the safeguarding issues raised in the alert. RIs should include a brief comment in the safeguarding section of the evidence base detailing what actions were taken during the inspection relating to the safeguarding alert.

The reporting inspector will need to consider how effectively the provider has evaluated their own procedures for safeguarding and promoting welfare. This will help establish the extent to which safeguarding policies and procedures are properly

implemented and monitored. If the provider does not upload an evaluation, this should cause concern about how robustly they evaluate their own procedures, and how well leaders promote the provider's safeguarding culture. In the light of this evaluation, the reporting inspector will need to allocate time to gather enough evidence to support the team's judgements. This may include asking questions specifically relating to safeguarding and promoting welfare at meetings with:

- senior managers or the principal/CEO
- representative(s) of the governing body / board of directors (where relevant)
- staff
- learners

Inspectors may also arrange to meet with the designated person with responsibility for child protection if this is not the principal / senior manager.

Inspection activity

When inspecting providers in relation to safeguarding, inspectors will evaluate the following:

- whether the provider has an up-to-date self-evaluation which considers the effectiveness of its safeguarding and child protection duties, including online safety activity, and how well it sets out areas of strength and areas for improvement
- how well the provider implements and monitors its policies and procedures to improve how it safeguards and promotes the welfare of children in accordance with statutory guidance.
- whether the provider reports regularly to senior managers and governors/directors, and how well it uses its data and evaluations of safeguarding about incidents within its provision, including online safety aspects and incidents
- whether all provider staff are clear about their responsibilities and what they need to do to protect learners and that all staff have received relevant child protection and safeguarding training, including 'Prevent' duties
- whether all safeguarding related records are up to date, including incidents of alleged bullying, physical intervention, child protection referrals, safe recruitment and DBS checks, and safeguarding training
- whether there are consistent approaches to the management and reporting of safeguarding incidents and behaviour management issues within the provider, which are supported by clear policies and procedures, and which include the management of internet and social media related incidents
- whether there are suitable arrangements to take action where any learner's pattern of attendance causes concern, and whether the provider monitors and acts on learners' absences for all or part of the working day
- how well the provider develops learners' knowledge and understanding of emotionally damaging or unsafe behaviours, for example grooming, harassment, discrimination, prejudice-related bullying, and extremism, in line with their stage of development

- whether there are appropriate arrangements for developing learners' awareness and understanding of how to be safe including safety online, and which are regularly included in the provider's curriculum

Reporting on safeguarding

Inspectors will report on whether the provider's safeguarding culture, whether arrangements to keep learners safe meet requirements and give no cause for concern.

They should consider whether it is appropriate to describe the nature of any strengths or shortcomings in the report.

Where arrangements do not meet requirements, inspectors should include a recommendation to improve the provision and that the provider address the safeguarding / well-being issues identified during the inspection. This should be the first recommendation on the inspection report. After the inspection, we may issue a 'well-being' letter to the provider to seek assurance that they are addressing the shortcoming(s) suitably.

Sector	Well-being letters applicable?	Concerns shared with
Further Education colleges	Yes	<ul style="list-style-type: none"> • Provider • Post 16 Quality Welsh Government • Commission for Tertiary Education and Research (CTER) - from August 2024 • Sector lead • Assistant director for the sector and for safeguarding
Independent specialist colleges	Yes	<ul style="list-style-type: none"> • Provider • FE support Welsh Government • CIW (where there is linked residential provision) • Sector lead • Assistant director for the sector and for safeguarding
Secure children's homes	Yes	<ul style="list-style-type: none"> • Provider • CIW • Local authority • Sector lead • Assistant director for the sector and for safeguarding
Justice sector	No	<ul style="list-style-type: none"> • Provider • HMIP • Sector lead

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Spring 2024

		<ul style="list-style-type: none">• Assistant director for the sector and for safeguarding
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Adult learning in the community	Yes	<ul style="list-style-type: none"> • Provider • Post 16 Quality Welsh Government • Commission for Tertiary Education and Research (CTER) - from August 2024 • Sector lead • Assistant director for the sector and for safeguarding
Work-based learning	Yes	<ul style="list-style-type: none"> • Provider • Post-16 Quality Welsh Government • Commission for Tertiary Education and Research (CTER) - from August 2024 • Sector lead • Assistant director for the sector and for safeguarding

Where inspectors judge safeguarding arrangements to be incomplete, ineffective, or not compliant with statutory requirements and/or learners are not safe, it is important that these issues, are properly recorded in the evidence base and brought to the attention of the provider. Where the disclosure of the exact nature of these concerns would create additional risks to the well-being of learners, inspectors should include the following statement in the report :

‘The provider’s arrangements for safeguarding learners do not meet requirements and give serious cause for concern.’

Where inspectors judge that drawing attention to the exact nature of a concern would not expose learners to additional risks, inspectors can refer to the concern in their main evaluation. For example, where there are concerns over traffic management at a college site, inspectors can make reference to this in their report.

Where matters are **minor** and/or **easily remedied**, and are not considered significant, there is no need for a comment or a recommendation in the final inspection report. Consequently, the RI should not issue a well-being letter to the provider. However, the RI must ensure that the concerns are raised and plans to address them discussed with the provider as soon as possible.

The RI must ensure that details of the concerns are recorded in the evidence base, including any action taken by the provider to address them.

Annex 1: Disclosure and Barring Service (DBS) checks, repeat checks and portability

The Protection of Freedoms Act 2012 came into effect on 10 September 2012 with further changes coming into force on a staged basis over the next few years.

The following changes were put in place in September 2012:

- a new definition of “regulated activity” to focus on work which involves close and unsupervised contact with vulnerable groups
- activities and work that have been taken out of the definition of “regulated activity” will still be eligible for Enhanced DBS checks
- the repeal of “controlled activity”
- the repeal of registration and continuous monitoring
- the repeal of the provision of additional information
- the implementation of a minimum age (16) at which someone can apply for a DBS check
- a more rigorous ‘relevancy’ test for when the police release information held locally on an enhanced DBS check

On 1 December 2012, the CRB and ISA merged to form the Disclosure and Barring Service. The DBS is responsible for administering three types of checks;

- **Standard** – a check on the Police National Computer (NPC) records of convictions, cautions, reprimands, and warnings
- **Enhanced** – a check on the PNC as above plus also other information held by the police that is considered relevant by the police
- **Enhanced with barred list information** – for people working in regulated activity with children. This adds checks of the DBS children’s barred list to the enhanced check.

During 2013, the DBS launched its Update Service. Employees are now able to register once for a DBS check, which is then automatically updated and available for organisations to check.

However, there are aspects of the old system which are not changing, these are:

- employers must make appropriate referrals to the DBS
- employers must not allow someone whom they know has been barred by the DBS to undertake regulated activity
- employers may undertake checks for anyone employed in activities which fall within the pre-September definition of regulated activity, as they remain eligible for enhanced DBS checks, whether or not they fall within the post-September definition of regulated activity (but they will no longer be eligible for barred list checks if they do not fall within the new definition of regulated activity)

Previously there has been widespread misunderstanding about when and how frequently to undertake checks. The following sets out the current position in relation to providers as to when checks need to be in place before an employee can start work.

- CRB checks were strongly recommended for all employees who have regular contact with children if they were employed after March 2002. However, the only requirement for those appointed before this date was that they must have been List 99 checked.
- CRB checks became mandatory for any of the workforce who work with children from 12 May 2006. Employees who took up post from this date must have an enhanced CRB disclosure.
- **No further checks are required** for any staff unless the person has a break in service of more than three months. There is no statutory requirement for staff to have routinely updated checks, although some employers may require this as policy. There is also no statutory requirement for staff employed before March 2002 to have retrospective CRB or DBS checks as long as they have been in continuous service. In this context, continuity means no break of service of longer than three months. However, prior to 2002, there was a requirement for all staff who work with children and young people to have to been checked against List 99, and evidence of this should be checked.

An employer can only ask for a barred list check for those staff undertaking regulated activity. It's a criminal offence to ask for a barred list check for any other role.

Under the Education Workforce Council (Main Functions) (Wales) Regulations 2015, registration with the Education Workforce Council is a statutory requirement for every teacher who works with children in Wales. The DBS provides EWC with regular updates on barred individuals. Note that some criminal offences do not debar a person registering as a teacher.

The [DBS eligibility tool](#), which applies in Wales and England, provides advice to determine the type of DBS checks that are relevant for employees. The tool can be used to find out which roles or activities could be eligible for a basic, standard or enhanced DBS check.

***Please note that not all staff within all Post-16 sectors are required to register with the EWC. Please see their website for more information on the categories for registration.**

Temporary staff, visitors employed by an agency or subcontracting provider

Staff such as temporary teachers, trainee teachers, nurses, sports staff or trainers who are employed by an agency or staff who are employed by a provider who subcontracts services to the provider and who work with the provider's learners should be CRB or DBS checked by their employer, for example the supply agency, the university, or local authority.

It is sufficient for providers to seek written confirmation that all appropriate checks, have been carried out for these people (most commonly on appointment) and by whom (most commonly the relevant human resources department). Providers should then confirm the identity of these visitors.

Temporary staff who are not employees of an agency or subcontractor

Where temporary staff are not employees of a supply agency, providers cannot

assume that supply staff matched with them in this way have been through the necessary vetting procedures. Providers should confirm directly with the individual supply, that the necessary recruitment checks have taken place before staff start work with them.

Part-time staff

Part-time staff may use the same CRB or DBS check for two or more posts as long as they are at a similar level **and** the provider has satisfied itself about their veracity and appropriateness.

Annex 2: Regulated activity as defined by the Protection of Freedoms Act 2012

The full, legal definition of regulated activity is set out in Schedule 4 of the Safeguarding Vulnerable Groups Act 2006, as amended (in particular by the Protection of Freedoms Act 2012).

Regulated Activity still excludes family arrangements, and personal, non-commercial arrangements.

The new definition of regulated activity relating to children comprises of:

- (i) **Unsupervised activities:** teach, train, instruct, care for or supervise children, or provide advice/guidance on well-being, or drive a vehicle only for children;
- (ii) **Work for a limited range of establishments** ('specified places'), with opportunity for contact: for example, providers, children's homes, childcare premises. **Not work** by supervised volunteers;

Work under (i) or (ii) is regulated activity only if done regularly. Regular means carried out by the same person frequently (once a week or more often), or on 3 or more days in a 30-day period (or in some cases, overnight).

The government has provided statutory guidance about supervision of activity, which would be regulated activity if it were unsupervised.

- (iii) **Relevant personal care**, for example washing or dressing; or health care by or supervised by a professional;
- (iv) **Registered child-minding**; and foster-carers.

What is no longer a regulated activity when working with children?

- Activity supervised at reasonable level
- Health care not by (or directed or supervised by) a health care professional
- Legal advice
- "treatment/therapy" (instead "health care")
- Occasional or temporary services, (not teaching etc.) e.g. maintenance at a college
- Volunteers supervised at a reasonable level

Annex 3: Handling allegations of abuse against teachers and other staff Welsh Government Circular 009/2014

[keeping-learners-safe-the-role-of-local-authorities-governing-bodies-and-proprietors-of-independent-providers-under-the-education-act.pdf](#)

This is statutory guidance for maintained providers and FEIs and is recommended guidance for work-based learning providers.

Providers should have procedures for dealing with allegations and all staff and volunteers should understand what to do if they receive an allegation or have concerns about another member of staff.

The procedures should make it clear that **all allegations should be reported immediately**, normally to the principal or proprietor.

The procedures should also identify the person, usually the chair of governors/directors, to whom referrals should be made in their absence; or in cases where the principal or relevant senior manager themselves is the subject of the allegation or concern.

Procedures should also include contact details for the local authority officer with responsibility for providing advice and monitoring professional abuse cases. The Local Authority Officer should be informed of all allegations that come to a provider's attention and appear to meet the criteria set out below.

A member of staff is alleged to have:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children.

The above procedures relate to members of staff who are currently working in any provider, regardless of whether that provider is where the alleged abuse took place.

Allegations against a member of staff who is no longer employed by the provider should be referred to the police.

Annex 4: Procedures for reporting misconduct and incompetence in the education workforce in Wales. Welsh Government circular 168/2015

This guidance sets out the reporting arrangements for cases of professional misconduct and professional incompetence in the education service.

In summary:

- If a member of staff or volunteer is dismissed or resigns before being dismissed for misconduct that relates to the harm, or risk of harm, to a child or vulnerable adult the employer must refer the matter to the DBS. If the member of staff is registered with the Education Workforce Council (EWC), the employer must also make a referral to the EWC.
- If a member of staff or volunteer who is registered with the EWC is dismissed or resigns before being dismissed for misconduct that does not relate to the harm, or risk of harm, to a child or vulnerable adult the employer must refer the case to the EWC.
- If a member of staff or volunteer who is not registered with the EWC (eg caretaker) is dismissed for misconduct that does not relate to the harm of a child or vulnerable adult, the employer should deal with the case under their own disciplinary procedures.

Annex 5: Site security and site safety

It is the responsibility of the leaders/ college principal / chief executive and board of directors to ensure that a provider's site(s) and buildings are safe. These arrangements will vary from provider to provider, depending on the nature of the sites and the age of the learners who attend the sites.

We expect the provider to:

- carry out a thorough risk assessment of its sites, for example taking account of site security, public rights of way, traffic management arrangements and the condition of all buildings
- make appropriate arrangements to manage those risks appropriately
- tell their employees about the risks and measures to be taken to manage the risks
- ensure that adequate training is given to employees on health and safety matters

Annex 6: Safeguarding Intelligence and inspections

Advice to RIs and team inspectors on the importance of taking account of any intelligence held by us regarding parental complaints against a provider, and any safeguarding matters in the management of an inspection

When preparing for inspection, the IC will inform the Reporting Inspector (RI) if there is a safeguarding flag on the provider within the Estyn system. This is so that the RI may use this information to inform lines of inquiry. Where the IC has indicated that there is a safeguarding flag the RI must contact a member of our Safeguarding Lead Officer Team (Andrea Davies) for a briefing, who will suggest a suitable line of inquiry.

The RI is also able to use the provider's safeguarding self-evaluation form to inform their lines of inquiry for well-being and safeguarding (not for unannounced inspections or visits, such as those in the justice sector). Where pre-inspection evidence in any sector identifies possible safeguarding issues or poor management by the provider, seek guidance from your sector's Assistant Director and the Safeguarding Team. Where any new issue is potentially referable, our safeguarding policy must be applied.

During the inspection, if we receive any relevant information about a safeguarding matter, a member of our safeguarding team will inform the RI and agree how to deal with the matter. The RI must ensure they record any evidence relating to any safeguarding lines of inquiry from interviews, observations or file reading in their evidence base, as this may be needed for any subsequent correspondence arising after the inspection. If the RI or another team member records any confidential information this should be passed to a member of our Safeguarding Team for secure filing. The detail of this confidential information should not be recorded in the evidence base but a note that the material has been passed to a member of our Safeguarding Team along with the relevant case number should be noted.

An incident may come to light after an inspection, and we may be asked to account for what the inspection team knew at the time and the actions the team either took or did not take. In the case of serious injury or death, this accountability could be through a Serious Case Review. It is vital to record any information in your evidence base, and any confidential information shared from our safeguarding files.

Annex 7: Supporting learners with healthcare needs

[Supporting learners with healthcare needs | GOV.WALES](#)

This document is designed to assist local authorities, governing bodies, education settings, education and health professionals and other organisations to support learners with healthcare needs and ensure minimal disruption to their education. It contains both statutory guidance and non-statutory advice.

*** Please note that this guidance may not be applicable in all Post-16 settings, it is only relevant where learners have healthcare needs. Further, this is not statutory within work-based learning or adult learning in the community providers.**

In summary:

- Local authorities and governing bodies, such as further education colleges' boards of directors **must** have regard to this statutory guidance when carrying out their duties in promoting the welfare of children who are learners at the education setting, including meeting their healthcare needs. The guidance also applies to activities taking place off-site as part of normal educational activities.
- Learners with healthcare needs should be properly supported so that they have full access to education, including trips and physical education.
- Governing bodies must ensure that arrangements are in place to support learners with healthcare needs.
- Governing bodies should ensure that provider staff consult the relevant professionals, learners and parents to ensure the needs of the learner with healthcare needs are properly understood and effectively supported.

The guidance provides information on

- The procedures for record keeping and management of learners' healthcare needs
- Creating an accessible learning environment
- The storage, access and the administration of medication and devices
- Staff training
- Emergency procedures
- Individual Healthcare Plans
- Unacceptable practice

Annex 8: Physical restraint

Restraint is used in providers and colleges across Wales. These practices do not only apply to special providers, it is important that HMI evaluate these practices equally across all settings.

What is restraint?

Glossary of terms

Restraint

Note: this is an umbrella term referring to the many forms of restraint listed below. It is sometimes taken to refer only to physical active restraint.

The [Mental Capacity Act 2005 \(MCA\)](#) (UK Government, 2019) defines restraint as when someone “uses, or threatens to use, force to secure the doing of an act which the person resists or restricts a person’s liberty whether or not they are resisting”.

The [EHRC enquiry](#) (EHRC, 2021) defines restraint as an act carried out with the purpose of restricting an individual’s movement, liberty and / or freedom to act independently.

Restrictive practices

Otherwise known as: restrictive interventions.

Restrictive practices are a wide range of activities that stop individuals from doing things that they want to do or encourages them to do things that they don’t want to do. They can be very obvious or very subtle. ([Care Council for Wales, 2016](#))

This term covers a wide range of activities that restrict people. It includes:

- physical restraint (active or passive)
- chemical restraint
- environmental restraint
- mechanical restraint
- seclusion or enforced isolation
- long term segregation
- coercion ([WG, 2021a](#))

Physical Active Restraint

Otherwise known as: physical intervention, physical restraint, safe holds, the application of reasonable force, clinical holding.

This is a method of restrictive practice in which a learner’s actions or movements are controlled by the active use of force. ([EHRC, 2021](#))

Physical Passive Restraint

A method of restrictive practice that involves direct physical contact, but not active force, to restrict or control a learner's movement or actions. (EHRC, 2021) For example, holding someone's hand near a busy road.

Chemical Restraint

When assistance is sought from a medically trained member of staff to administer medication to control or subdue a learner's behaviour. This medication could be taken directly in response to challenging behaviour, or as part of a daily routine. (EHRC, 2021)

Mechanical Restraint

This is the use of materials or equipment by staff to restrict a learner's ability to move or act, such as arm splints, belts or cuffs. This also includes the removal of an auxiliary aid such as a wheelchair or walking stick to prevent a learner from being able to move independently. (EHRC, 2021)

Seclusion

This is the withdrawal of a learner from a classroom or other provider situation against their will and involuntary confinement of a learner, apart from others, in a place where the learners must remain alone separate from other learners. (EHRC, 2021)

Environmental Restraint

Environmental restraint is the restriction of movement by someone without their consent.

Behaviour

The way in which a person behaves in response to a particular situation or stimulus. The term 'behaviour' does not necessarily mean the actions are negative, or unwanted. (Oxford Languages, 2021)

Behaviours that challenge

Otherwise known as: challenging behaviour.

Culturally abnormal behaviour of such intensity, frequency or duration that the physical safety of the individual or others is likely to be placed in serious jeopardy or behaviour which is likely to seriously limit or deny access to and use of ordinary community facilities. (Emerson, 1995)

Behaviour can be described as challenging when it is of such an intensity, frequency or duration as to threaten the quality of life and/or the physical safety of the individual or others and is likely to lead to responses that are restrictive, aversive or result in exclusion. (Royal College of Psychiatrists et al, 2007)

Blanket restrictions

A general lack of access to certain places or activities that are in place irrespective of an individual's needs.

De-escalation

The act of moving from a state of high tension to a state of reduced tension. (Richards, 2007)

Prone restraint

The person subject to physical active restraint is lying face downwards. It has been shown to be associated with high rates of injury and, in certain circumstances, death, due to positional asphyxia.

Supine restraint

The person subject to physical active restraint is lying face upwards.

Post incident review

Otherwise known as: debrief, reflection.

A review that consists of two separate components:

1. Post incident support.
This is the support that is immediately offered to an individual who has been involved in an incident. It should include assessment and treatment of any medical needs and provision of immediate emotional support.
2. Post incident reflection and learning review.
This is a non-blaming review where the factors that led to the restraint being used are examined and actions are agreed that support the prevention of future incidents or the minimisation of impact and less restrictive response in the future. (Restraint Reduction Network, 2019)

When is it justifiable to use restraint?

In England and Wales, provider staff have the power to use 'reasonable force' to prevent a learner from:

- committing any offence
- causing personal injury to, or damage to the property of, any person (including themselves)
- prejudicing the maintenance of good order and discipline at the provider or among any learners receiving education at the provider

Staff may also use reasonable force when exercising the statutory power to search learners for weapons, without their consent, where they have reasonable grounds for suspicion.

Staff may also seclude or isolate a learner in an area away from other learners if they are disruptive. This approach can be used as a disciplinary penalty. Providers have discretion about how long to isolate a learner and in what circumstances, leading to a variety of practices. Providers must have a behaviour policy that should set out what these practices are.

It is never lawful to use:

- restraint with intent to torture, humiliate, distress or degrade someone
- a method of restraining someone that is inherently inhuman or degrading, or which amounts to torture
- physical force as a means of punishment
- restraint that unnecessarily humiliates or otherwise subjects a person to serious ill-treatment or conditions that are inhuman or degrading (EHRC, 2019)

Evidence to consider on inspection:

- Staff training records
- Individual development plans or equivalent
- Manual handling plans
- Exclusion records
- Observation and discussion
- Restraint records
- Adherence to policy
- Use of 'quiet spaces'

Evidence	Possible lines of enquiry
Staff training records	<ul style="list-style-type: none"> - Are key staff regularly and appropriately trained? - Does training keep staff and learners safe? - Are the right staff trained? - Is training appropriate for the age/ stage/ medical needs of learners?

IDPs	<ul style="list-style-type: none"> - Are learners medically exempt from restraint? Is this followed? - Are restrictive practices hindering progress against IDP objectives? - Are learners subject to restrictive practices involved in the process of decision making, or person-centred practice, where these decisions affect them?
Observation and discussions	<ul style="list-style-type: none"> - Is there a consistent response to behaviours that challenge? - Do staff follow behaviour and positive handling plans? - Are these plans helpful? - Does the provider have strong links with parents and carers of learners subject to restrictive practices that help continuity at home?
Restraint records	<ul style="list-style-type: none"> - Do they meet the requirements in the provider's own policy? - Are they accurate, complete and up to date? - Is there a process for the oversight of these records? - Are leaders checking the prevalence of restraint and whether there are any trends? Particularly considering protected characteristics. - Are incidents of restraint tracked and is there an improvement in behaviour over time?
Adherence to provider policy	<ul style="list-style-type: none"> - Are staff aware of policies in this area? - Are policies implemented effectively and consistently?
Use of 'quiet spaces'	<ul style="list-style-type: none"> - Are these being used as a punishment? - Are there viewing panels on doors?
Post incident support	<ul style="list-style-type: none"> - What is in place for staff? And learners? - How effective is it?

What should provider restraint records contain?

This is sometimes referred to the 'bound book', however, providers may store this information electronically or in paper-based records.

Providers MUST:	Best practice:
Follow their own policy accurately.	<p>The record should include:</p> <ul style="list-style-type: none"> • the type of restraint • the reason(s) for the use of restraint • where and when the restraint was used • the length of the restraint • the impact on the learner, including any injuries, and any risks to their physical or mental well-being • the protected characteristics of the learner (including age, sex, disability – broken down by impairment type and race)

	<ul style="list-style-type: none">• the outcome of any incident review, including any measures that will be taken to avoid or minimise restraint and the risk of harm in future• the learner's involvement in the review• when the parents were informed• Reviewing trends considering all this information at a whole provider level
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Annex 9: Possible safeguarding questions for inspection

- Can you explain the safeguarding roles and responsibilities across the provider?
- What training is in place for staff and designated officers? How often does this take place and who delivers it? Do you keep records of attendance?
- How do you ensure that new members of staff, including supply staff, and volunteers are aware of your safeguarding policy and procedures? What about staff not employed by the provider?
- Tell me about the advice that you give staff to follow if a learner makes a disclosure to them.
- Whose responsibility is it to make a referral? Who would you make a referral to?
- When is a referral triggered? What are the signs or symptoms you would identify to trigger a referral?
- How do you follow up on a referral if you have not heard back from other agencies?
- Tell me about your policy for dealing with allegations of abuse against a member of staff? If there is an allegation against a leader, to whom would staff report this?
- Where do you keep your confidential records?
- What training is in place for the Governing Body? (where applicable)
- When did you last revise/review your anti bullying policy? Who was involved in this?
- How do you ensure that learners are taught about bullying, including cyber bullying?
- Can you talk me through a recent bullying incident that you dealt with?
- How do you log incidences of bullying? What about racist incidents? Or sexual harassment? Do you keep a record of these and do analyse data to identify trends?
- In what ways do you teach learners about healthy relationships? How successful is this work?
- What training have staff had in dealing with physical intervention? How do you make a record of any time physical intervention is used?
- How do you ensure that all staff employed have had the necessary checks before they begin at the provider? Who is responsible for doing this?
- Do you ever allow a member of staff to work before their DBS has been received? If so, what risk assessment do you have in place?
- How do you ensure that all staff are aware of how to spot signs of radicalisation and what they should do should they have concerns?
- How do learners understand the risk of radicalisation?
- How have Prevent-related policies or processes been monitored e.g. relating to external speakers, welfare or safeguarding processes, and is there assurance that they are effective?
- Have staff assured you that the risk assessment has been reviewed in the past 12 months, and outlined any material changes of risk (and mitigations in response)?
- Have staff reported any serious incidents? If so, how did you respond? Were there any lessons learned?

- Have there been any near misses in this area? If so, have any lessons learned have been acted upon?
- Have you been assured that Prevent has been implemented in a proportionate and risk-based manner, including considering the duty alongside other statutory obligations e.g. freedom of speech?
- Is there visible and demonstrable ownership of Prevent at a senior level at the provider?
- Are you assured that staff have received sufficient training and awareness raising to implement Prevent effectively?
- Has the provider continued to work in partnership with its Prevent partners, including statutory agencies and students?

Annex 10: Inspecting in the justice sector

Estyn's inspection arrangements

Estyn's learning in the justice sector inspection arrangements for safeguarding provide for inspectors to evaluate whether the **education setting** ensures that

- Learners feel safe and secure, and free from physical and verbal abuse during their education, work and activities
- Learners know how they can protect themselves from harassment, discrimination and extremism
- Teachers help learners to understand issues relating to equality and diversity, and to develop the values of tolerance and respect
- Teachers challenge stereotypes in learners' attitudes, choices and expectations.
- Staff have good systems in place to record and monitor learners' behaviour

Inspections in the justice sector are carried out in partnership with Her Majesty's Inspectorate of Prisons (HMIP) or Care Inspectorate Wales (CIW). Their respective frameworks make provision for inspecting safeguarding arrangements.

HMIP's [Men's Prison Expectations](#)

HMIP's [Children's Expectations](#)

CIW's [Inspection framework for care home services, secure accommodation services, residential family centre services, and domiciliary support services](#)

HMIP's inspection arrangements

HMIP's framework incorporates the following expectations:

For adults:

- The prison provides a safe and secure environment which actively reduces the risk of self-harm and suicide.
- Prisoners at risk of self-harm or suicide receive individualised care from a multidisciplinary team and have unhindered access to help, including from their families.
- Prisoners, particularly vulnerable adults at risk are provided with a safe and secure environment which protects them from harm and neglect.
- Adults at risk are appropriately located and supported by trained staff who are resourced to meet their needs.

For children:

- The establishment promotes the welfare of children, particularly those most at risk, and protects them from all kinds of harm and neglect.
- The establishment provides a safe and secure environment which reduces the risk of self-harm and suicide. Children at risk of self-harm or suicide are identified at an early stage and given the necessary support. All staff are aware of and alert

to vulnerability issues, are appropriately trained and have access to proper equipment and support.

- Children are kept safe through attention to physical and procedural matters, including effective security intelligence and positive relationships between staff and children.
- Children live in a safe, well-ordered and motivational environment where their good behaviour is promoted and rewarded. Unacceptable behaviour is dealt with in an objective, fair and consistent manner.

CIW's inspection arrangements

CIW's framework makes detailed provision for safeguarding, which can be found in the link above. The relevant lines of enquiry are as follows:

Care and Support

- The extent to which individuals are provided with the quality of care and support they need through a service designed in consultation with the individual and which considers their personal wishes, aspirations and outcomes of any risks and specialist needs which inform their needs for care and support.
- The extent to which service providers have in place mechanisms to safeguard vulnerable individuals to whom they provide care and support.

Inspecting safeguarding arrangements

Inspectors may encounter evidence that contributes to Estyn's and/or HMIP's inspection evidence of the setting's safeguarding arrangements. Where evidence relates to the Estyn's framework, this information will form part of Estyn's evidence base and inform the team's evaluations of learners' well-being and their care, support and guidance. If the inspection evidence concerns the wider prison setting, or relates to learners' safety, the RI will share this evidence with HMIP's and CIW's lead inspector for their consideration and referral as part of their inspection activities. Where a referral is made to HMIP, CIW or the setting's managers or governors, the RI must a record of the referral and date of referral in the evidence base.

Before the inspection, the Reporting Inspector will consider:

- the previous inspection report, if there is one
- any complaints we may have received
- where available, the provider's SAR and reports to governors/ senior managers
- where applicable, responses to the learners' questionnaires,
- where applicable, responses to the staff and governor questionnaires

It is important that we do not share individual comments from any questionnaire with the provider.

When inspecting safeguarding arrangements **during inspection** in relation to the education setting, inspectors will evaluate the following:

- whether the provider reports regularly to senior managers and governors/directors, and how well it uses its data and evaluations of learner's behaviour

- whether there are suitable arrangements to take action where any learner's pattern of attendance causes concern, and whether the provider monitors and acts on learners' absences for all or part of the working day
- how well the provider develops learners' knowledge and understanding of emotionally damaging or unsafe behaviours, for example grooming, harassment, discrimination, prejudice-related bullying, and extremism, in line with their stage of development
- how well the provider develops learners understanding of issues relating to equality and diversity, to develop the values of tolerance and respect and challenges stereotypes in learners' attitudes, choices and expectations

Safeguarding concerns

Estyn does not investigate individual safeguarding cases or referrals. That responsibility lies with HM Prisons and Probations Service for Wales, the Local Authority and the Police. However, inspectors must follow **this protocol** to ensure that all allegations or suspicion of abuse or neglect are reported and investigated by the appropriate authorities. This guidance sets out what to do to enable both Estyn and its partner inspectorates to fulfil their statutory safeguarding duties.

The full text of HMIP's Safeguarding Adult's Protocol and Children's Protocol can be found here:

[Safeguarding Adult's Protocol](#)

[Safeguarding Children's Protocol](#)

[CIW safeguarding policy](#)

Inspectors may encounter safeguarding concerns in several ways, including but not restricted to direct allegation by a learner or allegations of others in the setting. The concern may relate to what is happening now or in the past to a learner in the organisation that we inspect or outside of that organisation.

The concerns might be about the behaviour of

- Another learner or detainee in the setting
- Someone in the community
- A member or staff, volunteer or service provider within the setting
- Or a member of the inspection team (Estyn's, HMIP's or CIW's)

Where a concern is raised, inspectors should not undertake to maintain confidentiality or anonymity within the inspection process with regards to information which suggests any safeguarding concerns. Any written request for information must state this clearly. It should be explained to the person at risk that a safeguarding referral will be made, at the same time as ensuring their immediate safety.

It is important to share information promptly so that the necessary help can be provided and procedures can be put in place. Serious Case Reviews have repeatedly shown how poor information sharing has contributed to death or serious injuries. It should never be assumed that another professional or another agency has passed on information that might be critical to keeping someone safe.

Inspectors must inform the reporting inspector of any safeguarding concerns, having recorded basic information. Inspectors should only ascertain the minimum information required. The reporting inspector must inform

- the Governor or Manager of the setting, and HMIP's/CIW's Lead inspector and ask them immediately to follow their own safeguarding policy and protocol.
- Estyn's Safeguarding Team using our referral form

In all cases, inspectors must be thoroughly satisfied that the information has been shared appropriately.

Inspectors who raise concerns must be satisfied that the establishment and lead inspectorate is managing the safeguarding concern effectively using its own protocols, within appropriate timescales. This should include making sure appropriate and timely action has been taken to protect and support the child or adult at risk, both in the short-term and subsequently.

The reporting inspector must ensure all information, the referral, discussions and outcomes are recorded as contemporaneously as possible.

Safeguarding concerns about an Estyn inspector or HMIP/CIW member of staff

Any concerns about the behaviour or actions of a member of Estyn's inspection team or HMIP/CIW staff must be made immediately to the reporting inspector and the partner inspectorate's lead inspector, unless this person is the subject of the concern, in which case Estyn's and HMIP's/ CIW's Designated Safeguarding Lead must be advised. If no senior manager is available, then the Designated Deputy Safeguarding Lead and HMIP's Head of Human Resources must be notified.

The Designated Safeguarding Lead must consider if there is a person at risk of harm (either in a setting that HMIP/CIW is working in or in the community, for example at the home of the staff member). If this is thought to be the case, the Designated Safeguarding Lead must contact the local authority Adult Services Department immediately and make and implement plans to notify the setting if applicable.

In all cases, once the appropriate referral has been made, Estyn's, HMIP's or CIW's safeguarding protocols apply.

Who to contact:

Estyn Designated Post 16 Safeguarding Lead

Rachel Hackling

Rachel.Hackling@estyn.gov.wales

Safeguarding lead and officers:

- Dyfrig.Ellis@estyn.gov.wales
- Andrea.davies@estyn.gov.wales
- Liz.Counsell@estyn.gov.wales
- Delyth.gray@estyn.gov.wales

A member of our Lead Officer safeguarding team: 02920 446482 (also available out of office hours)

Our main office (during office hours): 02920 446446

HMIP Designated Safeguarding Lead

Angus Jones

Angus.Jones@HMIPrisons.gov.uk

07813122038

CIW details

Olwen Davies

Olwen.Davies@gov.wales

Tel: 0300 7900 126