British Society for Immunology
Safeguarding children and adults at risk procedures and processes

The British Society for Immunology (BSI) is a registered charity and the leading UK membership organisation working with scientists and clinicians from academia and industry to forward immunology research and application. Our mission is to support our immunology community in driving scientific discovery and making a positive impact on health. This procedures document applies to anyone working on behalf of the British Society for Immunology, including senior managers and the board of trustees, paid staff, volunteers, and students.

1. Introduction

The procedures outlined in this document are to assist BSI trustees, staff, volunteers and those holding public engagement and involvement activities funded or supported by the BSI to protect all persons by identifying clear instructions in accordance with the legislative framework.
They include:

- Harm – what it is and how to recognise the signs
- Procedure for preventing harm
- Procedure for responding to the discovery and disclosure of harm and how to respond sensitively to persons who have been harmed
- Procedure for responding to allegations made against staff and volunteers

Legislation and government guidance makes it clear that all adults need to play a role in safeguarding. The BSI is fully committed to complying with all UK Safeguarding legislation and guidance including the Children Act 1989 and 2004, Working Together to Safeguard Children 2023 and Care Act 2014.

Related policies and procedures

These procedures and processes should be read in conjunction with the following existing policies and procedures:

- BSI Safeguarding policy
- BSI Code of conduct
- Staff handbook including:
  - Code of conduct
  - Disciplinary policy
  - Data protection policy
  - Whistleblowing policy
- BSI Photography and filming policy

2. Definitions

Safeguarding children and adults at risk

Safeguarding relates to the action taken to promote the welfare of children and adults at risk and protect them from harm. A child is categorised as anyone who has not yet reached their 18th birthday. Working together to safeguard children (2023) states that safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment
- Preventing impairment of children's health or development

- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes

The Charity Commission for England and Wales 2017 and the Care and Support Statutory Guidance 2014 describes adult safeguarding as protecting the rights of adults to live in safety, free from abuse and neglect. These duties apply in relation to any person who is aged 18 or over and at risk of abuse or neglect because of their needs for care and support.
Definitions of child abuse and adult abuse are further detailed in Appendix 1.

3. Roles and Responsibilities

Designated Safeguarding Officer
Sophie Broste-James, Director of External Affairs
Email address: safeguarding@immunology.org
Tel: +44 (0)7703 807444

The Designated Safeguarding Officer is responsible for handling reports or concerns, about the protection of vulnerable people, appropriately and in accordance with the procedures that underpin the policy. The role of the DSO is:

- To be the first point of contact for Trustees, staff and volunteers to go for advice if they are concerned about safeguarding children and adults at risk in activities that they are carrying out on behalf of the BSI
- To draw up, communicate and implement a safeguarding policy and procedures
- To ensure that the safeguarding policy and procedures are reviewed and updated as necessary
- To undertake appropriate training and maintain an up-to-date knowledge of safeguarding requirements for the BSI
- To support staff to assist in providing information on appropriate action in relation to concerns raised from staff and BSI members
- To monitor and respond to questions and concerns raised through the safeguarding@immunology.org email inbox
- To ensure that any concerns raised are escalated appropriately, logged and stored securely
- To maintain up-to-date contact details for relevant statutory agencies (e.g. Local Authority Designated Office (LADO), Local Safeguarding Children Board, Police, Children's Social Work Services).

Senior Management Team
The Designated Safeguarding Officer reports to the following member of the Senior Management Team for safeguarding matters:
Graham Blair, Chief Executive Officer (g.blair@immunology.org)
The BSI Senior Management Team is responsible for ensuring the effective implementation of the organisation's safeguarding policy and procedures and ensuring that everyone linked with the BSI is equipped and supported to meet their responsibilities.

Board of Trustees
The Board of Trustees hold ultimate accountability for this policy. The BSI Trustee lead for safeguarding is:
Professor Jessica Strid.

Contact details of other agencies can be found in Appendix 2.

4. Raising and responding to safeguarding concerns

Responding to a concern from or about a child or adult at risk

If during an activity or event linked to the BSI, a child or adults at risk confides in you or you learn from anyone else about a safeguarding concern, then all Trustees, staff members and volunteers have a duty to respond and report this. The following steps are advised:

- Remember the safety of the child or adult at risk is paramount
- Listen carefully and avoid expressing your own views
- Reassure and let them know they have done the right thing telling you
- Explain what you will do next but do not promise to keep the information a secret
- Record the conversation immediately so it is as accurate as possible
- Report the incident to the BSI Designated Safeguarding Officer at safeguarding@immunology.org
- Concerns relating to a DSO should be raised with the BSI Senior Management Team

do not:

- React strongly e.g. that's terrible!
- Jump to any conclusions (especially about the abuser)
- Accuse anyone
- Tell them you will keep this a secret
- Ask leading questions
- Stop them from speaking freely
- Tell them to stop talking so you can contact the DSO

Reporting a concern from or about a child or adult at risk

Anyone can voice concerns about unacceptable behaviour towards children or adults at risk. All concerns should be recorded using the BSI Safeguarding Incident Report Form. If a child or adult at risk is in immediate danger, contact emergency services (999) first, then notify the DSO as soon as practicable.

Procedure for record keeping

All incidents and concerns must be recorded and stored securely and safely by the BSI for a period of seven years from the closure of the case. The DSO is responsible for these records which only they and the relevant members of the Senior Management Team have access to. It is important to keep records that are not referred to the Police or Social Services, as they may upon later review show patterns or clusters which may heighten the level of concern. Retention periods are in line with safeguarding best practice and data protection requirements.

Confidentiality

The best interests of the child or adult at risk are always the most important consideration. BSI Trustees, staff members and volunteers must ensure the confidentiality of matters relating to safeguarding and information must be shared on a need-to-know basis. All BSI Trustees, staff members and volunteers must be aware that they cannot promise a child or adult at risk to keep secrets that might compromise their safety or well-being or that of another.

Allegations against trustees, staff and volunteers

An allegation may relate to a trustee, staff or volunteer who has:

- Behaved in a way that has (or may have) harmed a child/adult at risk
- Possibly committed a criminal offence against or related to a child/adult at risk
- Behaved towards a child/adult at risk in a way that indicates that may pose a risk of harm

There are three strands for consideration:

1. A police investigation of a possible criminal offence
2. Enquiries and assessment by social care about whether a child or adult at risk is in need of protection or services
3. Disciplinary action by the BSI in respect of the individual

The BSI has a duty of care to staff and volunteers and will ensure effective support is provided for anyone facing an allegation. It is essential that any allegation is dealt with quickly and fairly, in a manner that provides effective protection for the person and supports the person who is subject of the allegation. All options to avoid suspension (of either staff or member) should be considered prior to this step. If the BSI removes an individual because the person poses a risk of harm to others, the BSI must make a referral to the Disclosure and Barring Service

5. Recruitment, selection and vetting

UK legislation

The BSI is committed to the safe recruitment, selection and vetting of those performing their duties for or on behalf of the BSI or represent the BSI in its work with children or adults at risk. Appendix 3 provides details of our safeguarding levels and measures which we have used to assess all our activities. We require all trustees, staff and volunteers within the jurisdiction of UK legislation and regulation, who are involved in regulated activity with children or adults at risk (face-to-face, online, by phone, by email or via social networks) to have a criminal record check from the Disclosure and Barring Service (DBS) in England and Wales, Disclosure Scotland or Access Northern Ireland (AccessNI).

The majority of the activities run or supported by the BSI where staff, trustees or volunteers may come into contact with children or adults at risk constitute one-off interactions where at no time they are on their own or unsupervised by that child/adults at risk's guardian or teacher. This type of occasional interaction should not necessitate a disclosure check. However, such a check may be appropriate under special circumstances should the staff or members have prolonged or regular contact with children or adults at risk. The appropriateness of such a check will be discussed and agreed by the individual affected and the Designated Safeguarding Officer. Under all circumstances, staff, trustees and volunteers must still abide by the BSI's code of conduct and data protection policy.

Outside UK legislation

Whilst UK disclosure checks will not apply to trustees, staff and volunteers outside UK legislation and regulation, they must still abide by the BSI code of conduct and other terms of this policy, to the extent that this does not conflict with local law and that it meets the legislative requirements of the countries in which they are working. The BSI is required to adopt local procedures (where relevant), disseminate to the staff and volunteers within that jurisdiction and report any incidents immediately to the relevant local authorities.

6. Code of conduct and appropriate behaviour

All staff, trustees, members and volunteers are bound by the BSI Code of Conduct when undertaking activities on behalf of the organisation. Additionally, the following is recommended with regards to

behaviour around children and adults at risk. These expectations apply equally to online and digital interactions.

DO

- Ensure that whenever practicable the persons who are normally responsible for the children and adults at risk (teachers, parents, carers, guardians, etc) are present during activities or that there is always more than one adult present
- Treat all children and adults at risk with respect
- Act as a role model of professional and appropriate behaviour
- Respect the personal privacy of a child or adult at risk
- Bear in mind that someone else might misinterpret your actions, no matter how well intentioned
- Be aware that any physical contact with a child or adults at risk may be misinterpreted and so must be avoided whenever possible
- Challenge unacceptable behaviour and report all allegations and/or suspicions of abuse.

DON'T

- Place yourself in a situation could reasonably be misinterpreted.
- Spend time alone with children and adults at risk away from other adults
- Have inappropriate contact with children and adults at risk – physical, verbal or electronic
- Use inappropriate language – writing, phoning, email or online
- Do things of a personal nature for children and adults at risk that they can do for themselves
- Allow children and adults at risk to behave inappropriately without being challenged
- Make suggestive or derogatory remarks or gestures in the presence of children and adults at risk
- Show favouritism to any one child or adults at risk
- Be under the influence of alcohol or other substances when working on activities involving children and adults at risk
- Take photographs of children and adults at risk without the express permission of their school, parents, carers, or guardians
- Transfer the personal data of children and adults at risk to third parties without express permission from the child, adults at risk, parents or guardians as appropriate
- Let any allegations a child or adults at risk makes go unrecorded
- Rely on your good name or our good name to protect from allegations of abuse
- Become complacent on the (spurious) grounds that "it could never happen to me"

7. Risk assessment

Safeguarding risks must be considered when planning all activities undertaken on behalf of, or supported by, the British Society for Immunology.

The level of assessment should be proportionate to the activity but should consider:

- whether children or adults at risk may be present
- the nature of contact with children or adults at risk (planned or incidental)
- supervision arrangements and whether parents, carers, teachers or support workers will be present
- venue suitability and security
- online safeguarding arrangements for virtual or hybrid events, including moderation where appropriate
- photography, filming and recording

- travel and overnight accommodation (where applicable)
- emergency procedures and reporting arrangements.

Any identified safeguarding risks should be documented alongside health and safety risks and appropriate control measures put in place before the activity proceeds.

Appendix 1 - Definitions of abuse

Child abuse - any action by another person (adult or child) that causes significant harm to a child. There are many types of abuse as defined by the NSPCC.

Domestic abuse - any type of controlling, bullying, threatening or violent behaviour between people in a relationship. But it isn't just physical violence, domestic abuse includes emotional, physical, sexual, financial or psychological abuse.

Sexual abuse – when a child is forced or persuaded to take part in sexual activities. This doesn't have to be physical contact, and it can happen online. Sometimes the child won't understand that what's happening to them is abuse

Neglect - the ongoing failure to meet a child's basic needs and is the most common form of child abuse. A child may be left hungry or dirty, without adequate clothing, shelter, supervision, medical or health care. A child may be put in danger or not protected from physical or emotional harm. They may not get the love, care and attention they need from their parents.

Online abuse - any type of abuse that happens on the web, whether through social networks, playing online games or using mobile phones. Children and young people may experience cyberbullying, grooming, sexual abuse, sexual exploitation or emotional abuse

Physical abuse - deliberately hurting a child causing injuries such as bruises, broken bones, burns or cuts.

Emotional abuse - the ongoing emotional maltreatment of a child. It's sometimes called psychological abuse and can seriously damage a child's emotional health and development.

Child sexual exploitation - a type of sexual abuse. Children in exploitative situations and relationships receive something such as gifts, money or affection as a result of performing sexual activities or others performing sexual activities on them

Female genital mutilation - the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting

Bullying and cyberbullying - behaviour that hurts someone else – such as name calling, hitting, pushing, spreading rumours, threatening or undermining someone

Child trafficking - Child trafficking and modern slavery are child abuse. Children are recruited, moved or transported and then exploited, forced to work or sold

Grooming - when someone builds an emotional connection with a child to gain their trust for the purposes of sexual abuse, sexual exploitation or trafficking.

Harmful sexual behaviour - includes using sexually explicit words and phrases, inappropriate touching, using sexual violence or threats, full penetrative sex with other children or adults.

Adult abuse - mistreatment by any other person or persons that violates a person's human and civil rights. The abuse can vary, from treating someone with disrespect in a way that significantly affects

the person's quality of life, to causing actual physical or mental suffering. There are many types of abuse defined by Care and Support Statutory Guidance 2014:

Physical abuse - includes hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions

Sexual abuse - includes rape and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting

Psychological abuse - includes emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or unreasonable and unjustified withdrawal of services or supportive networks

Exploitation - either opportunistically or through premeditation, unfairly manipulating someone for profit or personal gain

Financial or material abuse - includes theft, fraud, exploitation, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits

Neglect and acts of omission - includes ignoring medical or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating

Discriminatory abuse - includes discrimination on grounds of race, gender and gender identity, disability, sexual orientation, religion, and other forms of harassment, slurs or similar treatment

Institutional abuse - includes neglect and poor care practice within an institution or specific care setting like a hospital or care home, for example. This may range from isolated incidents to continuing ill-treatment.

Appendix 2 - Contact details

The following services can be contacted:

Police
If a child or adult at risk is in immediate danger, call
Emergency: 999
Non-emergency: 101

NSPCC (if you are worried about a child, but unsure)
0808 800 5000
www.nspcc.org.uk

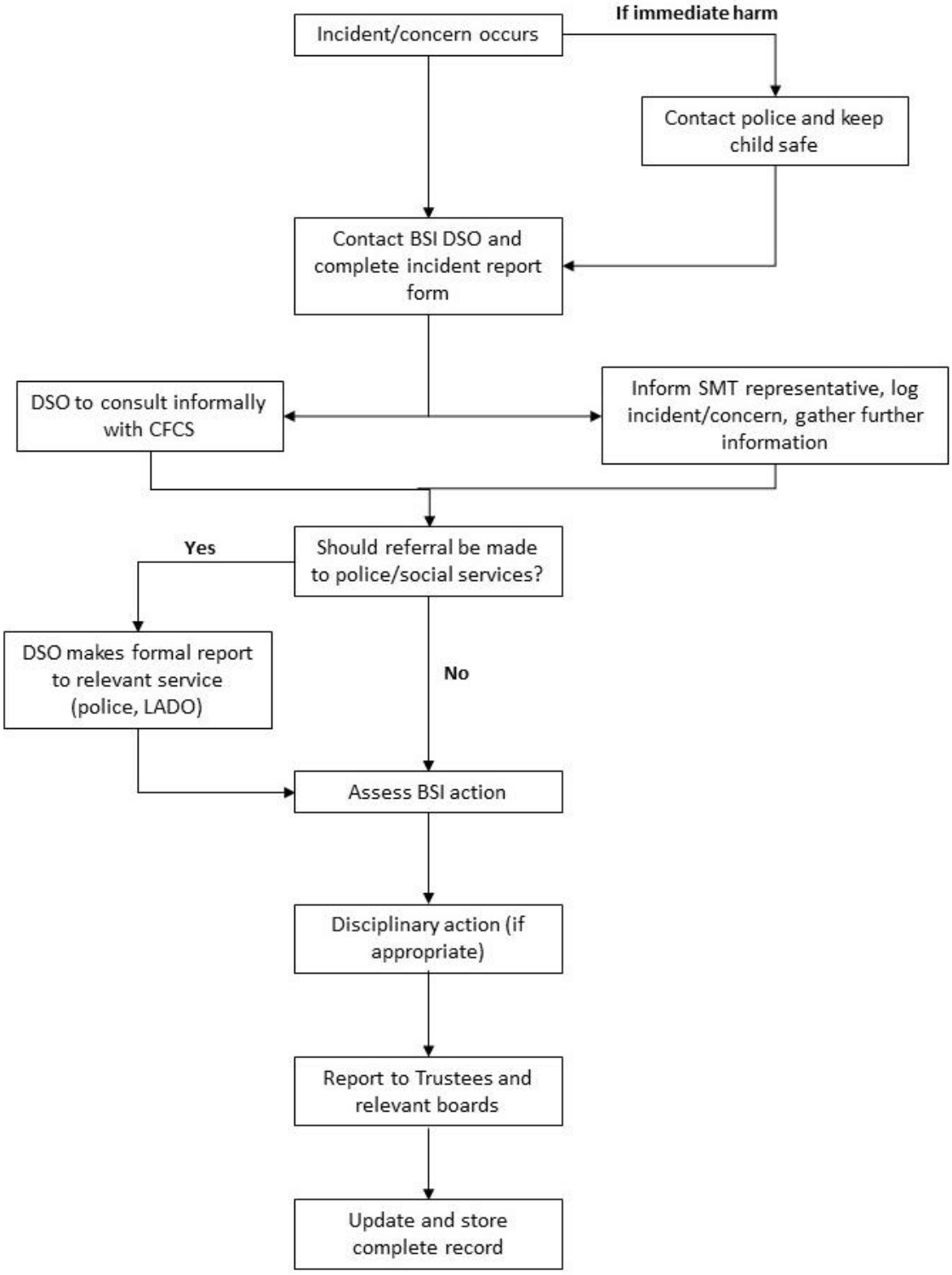
Child Exploitation and Online Protection Command (CEOP)**.**
They can be contacted through their website
www.ceop.police.uk

Local Authority Designated Officer (LADO)
For concerns relating to individuals working with children, contact the relevant Local Authority Designated Officer (LADO) for the local authority where the incident occurred.

Adult Social Care
For concerns regarding an adult at risk, contact the Adult Social Care team for the local authority area where the individual resides or where the concern arose

As BSI activities take place throughout the United Kingdom, the appropriate local authority, safeguarding team and police force will vary depending on the location of the event or the individual concerned. The Designated Safeguarding Officer will assist with identifying and contacting the appropriate local safeguarding agencies where required.

Appendix 3 - Process for recording incidents and concerns



Appendix 4 - Safeguarding levels and measures

Safeguarding level	Description	Safeguarding measure
General awareness	Understanding safeguarding responsibility	All staff and trustees aware of their safeguarding responsibilities Communications to raise and maintain safeguarding awareness Safeguarding policy and procedure available
Level 1	No direct contact with children or adults at risk, but has overall responsibility for safeguarding strategies Manages a department, team or section which require level 1,2,3 & 4 Safeguarding measures	All involved to understand and comply with safeguarding policy and procedures Training (if appropriate)
Level 2	The activity has some contact with children/adults at risk but on an infrequent basis and where other staff/volunteers/teachers/parents/STEM Ambassadors will be present	Safeguarding responsibilities explained to all those involved and safeguarding policy and procedures provided Safeguarding responsibilities will be reviewed annually
Level 3	Activities have some contact with children/adults at risk on a regular basis (but not frequent) Activities involve working or visiting a location where there is a potential for coming into contact with children/adults at risk on a frequent basis, but they won't be the same children/adults at risk Activities involve visiting a location or school where access to children/adults at risk is likely but not the same location	All involved to understand and comply with safeguarding policy and procedures Safeguarding responsibilities will be reviewed annually
Level 4 (NB The BSI does not currently undertake any activity that falls within this category)	Activity is seen as regulated and/or involves regular contact with children/adults at risk. Regular contact is considered to be: frequently – once a week or more; intensively – 4 or more occasions in a 30 day period or overnight – between 2am and 6am.	Individuals must have a DBS check and undertake safer recruitment process. Training All involved to understand and comply with safeguarding policy and procedures Safeguarding responsibilities will be reviewed annually