

SAFEGUARDING POLICY

1. Statement

Safeguarding means the actions taken to protect anyone who comes into contact with the organisation from abuse or mistreatment in line with UK regulations and legislation.

This document sets out Esmée Fairbairn Foundation's approach to safeguarding. Although the Foundation does not provide services to, or work directly with, children/adults at risk, the Charity Commission requires all registered charities to ensure that safeguarding is a governance priority. This policy reflects the Foundation's obligations under the Charities Act 2011, Charity Commission regulations on safeguarding and other relevant UK legislation. By prioritising safeguarding within our internal practices and integrating safeguarding into our overall approach to funding, the Foundation plays an important role in promoting practices and organisational cultures which keep people safe.

The Foundation aims to promote safeguarding through:

- Creating a safe environment for Trustees, staff, volunteers, and others who come into direct contact with the organisation.
- Encouraging a culture of good practice in safeguarding in organisations that are funded by the Foundation, whilst recognising that it is the responsibility of the organisations we fund to ensure that their safeguarding policies and procedures are fit for purpose, given the specific nature of their work.
- Ensuring a robust response to safeguarding concerns and that learning from incidents informs improvements in practice.
- Providing guidance for staff and Trustees on their responsibilities and ensuring they have access to support and advice around safeguarding.

This policy is reviewed on an annual basis and approved by Trustees. Safeguarding encompasses Esmée's responsibilities as an employer and this policy should be read in conjunction with:

- The staff handbook and employment policies
- Esmée Values, Behaviours and Practices
- Whistleblowing policy
- Anti-Bullying & Harassment Policy
- Grievance & Disciplinary Procedure
- Health & Safety Policy
- GDPR Policy
- Social Media Policy
- Complaints Policy

2. Roles and responsibilities

Safeguarding is the responsibility of everyone working at the Foundation and all staff are expected to read and follow this guidance.

Trustees have ultimate responsibility for safeguarding. They maintain oversight of safeguarding within the Foundation through:

- The Audit and Risk Committee (ARC) review the safeguarding policy and it is confirmed by the Board on an annual basis.
- When approving the annual review of the safeguarding policy, ARC and the Board are provided with an update on safeguarding within the Foundation as well as any changes in regulations or legislation relevant to their role.
- The ARC Chair (Professor David Hill) is the lead Trustee for safeguarding. They are responsible for championing safeguarding at Board level and providing oversight on high-risk safeguarding concerns. The Chief Operating Officer will advise/lead on this from SMT and, with approval of the Board, will ensure any serious safeguarding incidents are reported to the Charity Commission.
- The Chair of Trustees will be notified of any high-risk concerns and will ensure that the Trustee Board is informed.
- The Foundation maintains an organisational risk register which includes safeguarding. This is reviewed regularly by SMT, ARC and the Board.

The designated leads for safeguarding are Veda Harrison (Impact Director and deputy overall lead) and James Wragg (Chief Operating Officer and overall lead on Esmée as an organisation). The Designated Leads for Safeguarding are responsible for:

- Acting as the first point of contact for any safeguarding concern and ensuring appropriate action is taken.
- Ensuring the Foundation's Safeguarding Policy is reviewed on an annual basis.
- Ensuring staff have access to advice and training to help them fulfil their safeguarding responsibilities, including access to external safeguarding expertise where necessary.

3. Safer recruitment

The Foundation uses external professional expertise for recruitment to ensure that our approach reflects the best in current practice. We work alongside the professional recruiter and use a two-stage process: with an activity or test relevant to the role included as part of the recruitment process. At interviews, we look to bring external perspectives on to the panel where appropriate. We take references for all candidates prior to confirming employment.

The Foundation does not undertake Disclosure and Barring Services (DBS) checks as Esmée staff do not work directly with children and young people or adults at risk. **Esmée staff cannot, therefore, be left alone with children, young people or adults at risk when visiting an organisation or project and will refuse to do so if asked.** In addition, staff must ensure that they are aware of and follow any safeguarding procedures required by the organisation being visited.

If, in the future, Esmée creates new positions which require regular contact with children or adults at risk, Esmée will use the government online tool to check whether a DBS check is required <https://www.gov.uk/find-out-dbs-check>.

The Foundation's approach to safeguarding including the policy will be highlighted and as part of the induction process for new employees. There will also be refresher training provided as required and for the whole staff team on (at least) a bi-annual basis. Trustees will receive an annual briefing on safeguarding as part of the policy approval process (see above) and the lead Trustee for safeguarding will be included in any staff training on safeguarding.

4. Our Approach to safeguarding through our funding process

a) Application stage

In general, the Foundation expects all organisations applying for funding to have a Safeguarding Policy in place. All organisations are asked to submit their safeguarding policy with their proposal.

On a limited number of occasions, organisations may be invited to submit a proposal without having a safeguarding policy in place (for example, as part of our efforts to remove barriers for organisations who are not eligible to apply to our main fund due to governance or other requirements of our general funding). Any decision to waive the requirement for a safeguarding policy must be approved by an SMT Member and a condition may be placed on funding requiring the development of a safeguarding policy or approach once funding is in place.

b) Assessment stage

The Foundation requires all applicants to demonstrate adequate safeguarding measures are in place in the following four areas:

- **Policies & Procedures:** The organisation has appropriate policies and procedures are in place to keep people safe.
- **Reporting and Response:** The organisation has accessible channels for people to raise concerns and is clear about how it will respond, including reporting to relevant authorities.
- **Human Resources:** The organisation takes steps to ensure people are suitable to act in their roles and everyone is aware of their safeguarding responsibilities.
- **Governance & Accountability:** There is clear accountability and oversight to ensure everyone connected with the charity is protected from harm.

The Foundation's expectations reflect Charity Commission requirements. This aims to reduce the duplication of effort for registered charities by ensuring consistency between funder and regulatory requirements. For organisations who are not registered charities, we hope that aligning our expectations with the Charity Commission will help build awareness and promote the adoption of agreed good practice in safeguarding.

This is achieved through reviewing the applicant's safeguarding policy and, where necessary, asking additional questions. On the limited occasions where organisations are invited to submit a proposal without having a safeguarding policy in place, the Foundation will focus on understanding the organisation's approach to safeguarding through conversation.

Additional guidance has been developed for Funding Managers to assist them when reviewing an organisation's safeguarding. This guidance is a living document and will be updated by the designated leads for safeguarding (guided by external safeguarding experts) in light of changes to legislation or best practice and training will be provided to the Executive Team.

In any circumstances where the assessment results in concerns about the welfare of a child, young person, adult at risk or the ability of the organisation in managing its' safeguarding procedures within the law, concerns should be raised immediately with the designated safeguarding lead or deputy to decide on next steps.

c) Approval

If an organisation is turned down at proposal stage and there are concerns about safeguarding practice, those concerns will be communicated back to the organisation, signposting which organisations/agencies may be able to help them address the issue. This communication will also be copied to the organisation's chair of Trustees or non-executive Director. A copy of this should be placed on the organisation's Salesforce record (if there are strict confidentiality issues with doing this, then guidance should be sought from the Chief Operating Officer).

d) Grant/Social Investment management

The Foundation's terms and conditions require fundees are required to notify the Foundation of any safeguarding issues involving their organisation and/or staff.

This applies to all fundees

Safeguarding incidents may be reported to the Esmée staff member (usually the Funding Manager), identified during project visits, or shared as part of monitoring reports. The responsibility for responding to the concern, including notifying relevant authorities and the regulator, rests with the fundee and should be undertaken in line with their own safeguarding procedures.

Upon receiving the report, the Funding Manager will notify the Designated Safeguarding Lead to seek guidance on what further information is required from the fundee.

- Where the Foundation is satisfied that appropriate action has been taken, the Funding Manager will simply thank the fundee for sharing details of the concern and their response.
- If further information is required, the Funding Manager will call the relevant Senior member of staff in the fundee organisation to discuss the action taken. The Funding Manager will not request any personal details related to those involved in the incident (e.g., names) and the focus should be on actions taken in response and learning rather than requesting detailed information about the incident itself.

In exceptional circumstances, where the Foundation believes that the fundee is unable or unwilling to address the concern, or where continuing funding may place people at risk of harm, the Foundation reserves the right to suspend or terminate funding. Where a payment is pending, the COO may make an immediate decision to suspend funding but the Board will be notified and must approve any decision to terminate funding.

The Foundation recognises the potential safeguarding impact of suspending or terminating funding, particularly if it leads to an interruption of services. This decision would always include a consideration of potential risks and the steps required to minimise these risks.

a) Contact with fundees and the communities they serve

Foundation staff may come into direct contact with fundees and the communities they serve during visits, convenings and other events. On these occasions, it is important that all staff conduct themselves in line with Esmée's Values, Behaviours and Practices. It is important to recognise that staff may come into contact with individuals with additional vulnerabilities, such as children or adults at risk, and staff should always seek guidance from the fundee about any safeguarding measures that should be followed. If staff have any concerns about the safety or welfare of those they are meeting, this should be raised with the relevant member of fundee staff and Esmée's designated safeguarding lead should also be informed.

5. Reporting & Response to Safeguarding Allegations against Esmée Staff

If Esmée staff observe, suspect, or receive a disclosure about any harm, abuse or exploitation perpetrated by and to Foundation staff, Trustees, or consultants working on behalf of the Foundation, they must:

- Inform the Designated Lead for Safeguarding immediately. Staff must not investigate or try to address the concerns themselves. Staff must never promise to keep a concern a secret as they are required to report all safeguarding concerns to the Designated Lead.
- Any external stakeholder who wishes to report a safeguarding concern to the Foundation can contact the Designated Safeguarding Lead via a dedicated safeguarding email that is only accessed by the Safeguarding Leads – safeguarding@esmeefairbairn.org.uk
- The Designated Lead for Safeguarding will ensure that all concerns and allegations are taken seriously and responded to appropriately. Where a child or adult at risk is suffering or at risk of significant harm, the Designated Lead will refer the matter to the relevant local authority social care team as soon as possible.
- The Designated Lead will ensure the Foundation cooperates fully with any actions or investigation which may be initiated by the police or local authority.
- The Designated Lead will inform the lead Trustee for Safeguarding who will ensure that serious incident report is submitted by the Executive in line with Charity Commission requirements.
- In line with Esmée's Grievance and Disciplinary Policy, the individual may be suspended while further investigations are carried out. Suspension will be on full pay and does not imply any determination of guilt, but it is a measure to protect everyone involved.
- The Designated Lead will maintain a confidential record of the concern, actions taken and any learning or improvements which could help prevent similar incidents in the future.

6. Room Bookings at 210 Pentonville Road

The Foundation sometimes provides the opportunity for outside organisations to use the facilities at our office (e.g. meeting rooms). When arranging a booking, we confirm that the organiser takes responsibility for safeguarding issues relating to those using the room, in relation to any children or vulnerable adults.

Policy Review

Reviewed by Audit and Risk Committee: 4 November 2025

Approved by Trustee Board: 17 December 2025

Next review: November 2026

Version Reference	Author	Date	Changes
Version 2025.01	James Wragg	16 December 2025	<i>Reviewed and minor updates from FSC (professional safeguarding advisers).</i>
Version 2024.01	James Wragg	17 December 2024	<i>Reviewed and minor updates from FSC (professional safeguarding advisers).</i>