

Safeguarding Procedure

This procedure ensures that all children, young people and adults accessing Young Epilepsy’s nationwide services and activities are protected from harm. It should be read alongside St Piers’ central safeguarding framework (which can be found [here](#) and is detailed further on our [website](#)).

This procedure applies to all Young Epilepsy staff, volunteers, and other adults whose work predominantly covers children and young people *off-campus*—that is, outside the St Piers Lingfield campus and not involving St Piers students. It must be followed in addition to any relevant local authority safeguarding procedures in the area where the work is being carried out. Staff should always ensure they are familiar with how to find the safeguarding arrangements of the local authority in which they are operating.

This includes, but is not limited to, the teams within the Fundraising and Development Directorate and the Health & Research team, at national or international events or trips and during group or one-to-one meetings, whether digital or in person.

The St Piers Child and Adult Protection and Safeguarding Policy remains relevant background reading for all Young Epilepsy staff, volunteers and other adults working off-campus, and must be understood in full. However, the **reporting procedures outlined in this Safeguarding Procedure** must be followed for the above noted services.

Safeguarding Standards and Expectations

All representatives of Young Epilepsy must uphold safeguarding standards during all activities, including events, outreach, and digital campaigns. Activities must be risk-assessed with safeguarding as a core consideration. Volunteers must be briefed, supervised and clearly identifiable. Ethical storytelling practices must be followed when sharing lived experiences, with informed consent and trauma-sensitive communication.

Staff and volunteers should remember that a safeguarding concern may arise from something you have been told directly, something you have witnessed, information from other sources or just an instinct or intuition that something may not be right. Staff should read the [Signs of Abuse Guidance](#) and be familiar with the signs and indicators.

Never keep a potential concern to yourself. All staff, volunteers and people working on behalf of Young Epilepsy must follow these procedures for reporting and recording safeguarding concerns.

While it is not your role to investigate, it is your responsibility to act — promptly and appropriately. This procedure explains what we expect you to do and how you will be supported if you are concerned that a child, a young person or adult is at risk or has been abused.

This procedure should be read in conjunction with relevant guidance and policies available on the St Piers intranet, which provide further direction on professional conduct, safeguarding responsibilities, and organisational expectations.

Safeguarding Reporting Procedure

Young Epilepsy is committed to ensuring that all safeguarding concerns are responded to promptly, appropriately, and in line with statutory guidance.

Trustees have legal responsibilities for safeguarding and are required to report serious safeguarding incidents (safeguarding concerns about beneficiaries of the charity) to the Charity Commission. This includes reporting breaches of policy or procedure which have put beneficiaries at risk. The Designated Safeguarding Officers must ensure that the Executive Director of Fundraising and Development and the Head of Safeguarding and Quality Practice are informed of [significant incidents](#) promptly.

Immediate Risk

If a child or young person is in immediate danger or a criminal offence has occurred, staff must call 999 without delay. Once emergency services have been contacted, staff must follow the reporting steps outlined below.

Step-by-Step Reporting Procedure

1. Report the Concern

- All safeguarding concerns must be reported immediately to the appropriate Designated Safeguarding Officer (DSO). Staff must make every effort to *call* the designated DSO as soon as the incident occurs, where it is safe to do so.
- If the DSO does not answer, staff must promptly attempt contact via email, Teams, and/or text message to *all* DSOs and the Head of Safeguarding and Quality Practice, requesting urgent discussion.
- See Table 1 for all safeguarding contact details. DSOs must ensure their teams know exactly who they should report concerns to.
- During office hours, if the designated DSO is unavailable, staff may also contact the Head of Safeguarding and Quality Practice for guidance.
- Outside office hours, staff should contact the Executive Director on call for immediate advice and support. Details available on the intranet.
- Any subsequent updates, actions or new information must be recorded on the safeguarding report by both the reporting staff member and the DSO.

All DSOs must ensure appropriate cover arrangements when unavailable, and out-of-office messages must clearly indicate who should be contacted in their absence.

2. Record the Concern

After receiving direction from the DSO or Executive Director on call, staff must formally record the concern within 24 hours using one of the following (See Table 1):

- The safeguarding reporting function on Beacon, where appropriate, OR
- MyConcern®
- The lead DSO for the concern is responsible for updating the report with the actions provided to the staff member.

All safeguarding records must be:

- **Accurate** – stick strictly to observed facts
- **Factual** – do not include assumptions or opinions
- **Verbatim** – record the exact words used by the child/young person/adult or reporting individual, wherever possible

The DSO must confirm that all required steps have been completed appropriately and that the record is complete.

3. External Reporting (if applicable)

If thresholds are met, the DSO may advise that the concern is reported to the relevant local authority safeguarding team, accessible via council websites or online directories. This must be completed:

- With appropriate consent unless doing so increases risk
- Within 24 hours of the concern
- In strict accordance with statutory reporting timescales

4. Escalation of Concerns

If staff are not satisfied with the safeguarding actions or responses taken by the DSO, they may escalate the concern to the relevant local authority, or through Young Epilepsy's whistleblowing.

5. Use of Safety Devices

All home visits must be formally approved by the relevant Manager, in line with the Home Visits Procedure. Where issued, personal safety devices must be used appropriately and only by trained staff. Staff may only attend home visits if they have completed the required training.



Table 1 -Designated Safeguarding Officer Contact Details (DSO)

Department	Support Service	Youth Voice	Digital Services	Fundraising	Research
First Point of Contact	<p>Louise Barkes Head of Support & Inclusion, 07825 188920, lbarkes@youngpilepsy.org.uk</p> <p>or</p> <p>Marianna Nicolaou Youth Support Manager, 07719 526046, mnicolaou@youngpilepsy.org.uk</p>	<p>Catherine Hodder Head of Voice, Policy and Support, 07825 188873, chodder@youngpilepsy.org.uk</p> <p>or</p> <p>Cameron Matthews Youth Engagement and Participation Manager, 07825188830, cmatthews@youngpilepsy.org.uk</p>	<p>Nicola Shukla Head of Marketing Communication, 07719 525925, nshukla@youngpilepsy.org.uk</p>	<p>Simon Purkiss Head of Supporter Engagement, 07825 188921, spurkiss@youngpilepsy.org.uk</p>	<p>Jowinn Chew Head of Research, 07793089786. jchew@youngpilepsy.org.uk</p>
Reporting Procedure	Beacon (or the safeguarding reporting form if unavailable, and then transferred)	MyConcern®	MyConcern®	MyConcern®	MyConcern®



Alternative Contacts:

Lead DSL: Gill Walters, Head of Safeguarding and Quality Practice, 01342 832243 Ext 409 / 07825 1888 20, gwalters@stpiers.org.uk

Executive Director on call: rota can be found on the [Young Epilepsy intranet](#)

This procedure is agreed by the Director of Fundraising and Development and Executive Safeguarding Lead and will be implemented by all relevant Departments.	
Signed:	Date: 11 March 2026
Name: Sally Brighton Title: Director of Fundraising and Development	Date of next review: 01 September 2026

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Version no.	Date of changes	Reasons for change	Changes made by
1	26 Sept 2023	New Procedure	Helena Smith/Gill Walters
2.	04 April 2024	Terminology /Contacts updated	Gill Walters
3.	01 September 2025	Review and contacts updated	Gill Walters
4.	11 March 2026	Reporting requirements updated. Head of Research details updated	Gill Walters
5.	01 April 2026	Reporting form updated to MyConcern® for all services except Support Service	Gill Walters