

# Policies and Procedures

2024

CHICHESTER  
COMMUNITY  
DEVELOPMENT  
TRUST

## Chichester Community Development Trust Anti Discrimination Policy: July 2024

### Introduction

Chichester Community Development Trust Organisation is committed to providing anti environment free of discrimination and harassment, where all individuals are treated with respect and dignity, can contribute fully and have equal opportunities.

### **The objectives of this Policy are to:**

- Make sure that members, clients and associates of Chichester Community Development Trust are aware that harassment and discrimination are unacceptable practices and are incompatible with the standards of this organization, as well as being a violation of the law
- Set out the types of behavior that may be considered offensive and are prohibited by this policy.

Under this policy we will ensure that every person has the right to be free from harassment and discrimination. Harassment and discrimination will not be tolerated, condoned or ignored at Chichester Community Development Trust. If a claim of harassment or discrimination is proven, disciplinary measures will be applied, up to and including termination of employment. Chichester Community Development Trust is committed to a comprehensive strategy to address harassment and discrimination, including:

- providing training and education to make sure everyone knows their rights and responsibilities
- regularly monitoring organizational systems for barriers relating to *Code* grounds
- providing an effective and fair complaints procedure
- promoting appropriate standards of conduct at all times.

The right to freedom from discrimination and harassment extends to all employees, including full-time, part-time, temporary, probationary, casual and contract staff, as well as volunteers, co-op students, interns and apprentices. It is also unacceptable for members of Chichester Community Development Trust are to engage in harassment or discrimination when dealing with clients, or with others they have professional dealings with, such as suppliers or service providers.

This policy applies at every level of the organization and to every aspect of the workplace environment and employment relationship, including recruitment, selection, promotion, transfers, training, salaries, benefits and termination. It also covers rates of pay, overtime, hours of work, holidays, shift work, discipline and performance evaluations. This policy also applies to events that occur outside of the physical workplace such as during business trips or company parties.

## Anti-Fraud Policy – April 2024

### 1. Introduction

This document sets out the policy and procedures of Chichester Community Development Trust against fraud and other forms of dishonesty. It applies to Directors, staff and volunteers. Anybody associated with Chichester Community Development Trust who commits fraud, theft or any other dishonesty, or who becomes aware of it and does not report it, will be subject to appropriate disciplinary action.

### 2. Statement of intent

Chichester Community Development Trust will continually strive to ensure that all its financial and administrative processes are carried out and reported honestly, accurately, transparently and accountably and that all decisions are taken objectively and free of personal interest. We will not condone any behaviour that falls short of these principles. All members of Chichester Community Development Trust have a responsibility for putting these principles into practice and for reporting any breaches they discover.

### 3. Definitions

- a) Fraud: A deliberate intent to acquire money or goods dishonestly through the falsification of records or documents. The deliberate changing of financial statements or other records by either; a member of the public, someone who works or is a volunteer for [X charity]. The criminal act is the attempt to deceive and attempted fraud is therefore treated as seriously as accomplished fraud
- b) Theft: Dishonestly acquiring, using or disposing of physical or intellectual property belonging to Chichester Community Development Trust or to individual members of the organisation.
- c) Misuse of equipment: Deliberately misusing materials or equipment belonging to Chichester Community Development Trust for financial or material benefit.
- d) Abuse of position: Exploiting a position of trust within the organisation for financial or material benefit.

### 4. Culture

Chichester Community Development Trust fosters honesty and integrity in its entire staff. Directors, staff and volunteers are expected to lead by example in adhering to policies, procedures and practices. Equally, members of the public, service users and external organisations (such as suppliers and contractors) are expected to act with integrity and without intent to commit fraud against the Charity. As part of this, Chichester Community Development Trust will provide clear routes by which concerns may be raised by Directors, staff and volunteers. Details of this can be found in the Chichester Community Development Trust Staff Handbook.

Senior management are expected to deal promptly, firmly and fairly with suspicions and allegations of fraud or corrupt practice.

## **5. Responsibilities**

In relation to the prevention of fraud, theft, misuse of equipment and abuse of position, specific responsibilities are as follows:

### **a) Trustee and Non-Executive Directors:**

The Directors are responsible for establishing and maintaining a sound system of internal control that supports the achievement of the Charity's policies, aims and objectives.

The system of internal control is designed to respond to and manage the whole range of risks which the Charity faces. The system of internal control is based on an on-going process designed to identify the principal risks, to evaluate the nature and extent of those risks and to manage them effectively. Managing fraud risk is seen in the context of the management of this wider range of risks.

### **b) The Chief Executive Officer (CEO):**

Overall responsibility for managing the risk of fraud has been delegated to the CEO. The day to day responsibility has been delegated to the Operations Director or Partnership Director to act on behalf of the CEO.

Their responsibilities include:

- Undertaking a regular review of the fraud risks associated with each of the key organisational objectives.
- Establishing an effective anti-fraud response plan, in proportion to the level of fraud risk identified.
- The design of an effective control environment to prevent fraud.
- Establishing appropriate mechanisms for:
  - reporting fraud risk issues
  - reporting significant incidents of fraud or attempted fraud to the Board of Director Directors.
- Liaising with the Charity's appointed Auditors.
- Making sure that all staff are aware of the Charity's Anti-Fraud Policy and know what their responsibilities are in relation to combating fraud.
- Ensuring that appropriate anti-fraud training is made available to Directors, staff and volunteers as required; and
- Ensuring that appropriate action is taken to minimise the risk of previous frauds occurring in future.

### **c) Senior Management Team**

The Senior Management Team is responsible for:

- Ensuring that an adequate system of internal control exists within their areas of responsibility and that controls operate effectively.
- Preventing and detecting fraud as far as possible.
- Assessing the types of risk involved in the operations for which they are responsible.
- Reviewing the control systems for which they are responsible regularly.

- Ensuring that controls are being complied with and their systems continue to operate effectively.
- Implementing new controls to reduce the risk of similar fraud occurring where frauds have taken place.

#### d) Staff

Every member of staff is responsible for:

- Acting with propriety in the use of Charity's resources and the handling and use of funds whether they are involved with cash, receipts, payments or dealing with suppliers.
- Conducting themselves with selflessness, integrity, objectivity, accountability, openness, honesty and leadership.
- Being alert to the possibility that unusual events or transactions could be indicators of fraud.
- Alerting their manager when they believe the opportunity for fraud exists e.g. because of poor procedures or lack of effective oversight.
- Reporting details immediately if they suspect that a fraud has been committed or see any suspicious acts or events; and
- Cooperating fully with whoever is conducting internal checks or reviews or fraud investigations.

#### e) Volunteers

Every volunteer is responsible for:

- Acting with propriety in the use of the Charity's resources and the handling and use of funds whether they are involved with cash, receipts, payments or dealing with suppliers.
- Conducting themselves with selflessness, integrity, objectivity, accountability, openness, honesty and leadership.
- Being alert to the possibility that unusual events or transactions could be indicators of fraud.
- Alerting their manager when they believe the opportunity for fraud exists e.g. because of poor procedures or lack of effective oversight.
- Reporting details immediately if they suspect that a fraud has been committed or see any suspicious acts or events; and
- Cooperating fully with whoever is conducting internal checks or reviews or fraud investigations.

### 6. Review

This policy will be reviewed on an annual basis.

## Chichester Community Development Trust Attendance at Work Guidelines: January 2024

### Introduction

It is recognised that there may be times when it is problematic for staff to travel to work. This may be when your normal mode of transport is not possible due to inclement weather\* or public transport strikes or other circumstances occur which are beyond staff member's control (domestic situations should be dealt with under the Statement of Conditions of Service Policy). Although it is anticipated that such problems will be rare the following policy has been written to provide guidelines should such circumstances arise.

### **1. Attendance at Work Guidelines During Inclement Weather or Extreme Circumstances**

#### Guidelines for Staff

Generally individuals choose where they live and how they travel to work. If you travel to work by car and are unable to get to work because of the weather or another reason e.g. national fuel shortage or some other circumstance outside your everyday life, it is expected that you will make every effort to attend work by making alternative arrangements, e.g. public transport. Likewise, if your preferred mode of transport is by bus or train and there is a public transport strike you are expected to arrange, where possible, alternative travelling arrangements e.g., car-sharing, taxi etc.

It is expected that every member of staff will make every reasonable effort to get to work during inclement weather, buses may be running but unable to reach some areas. It is not unreasonable to expect someone to use an alternative nearby bus stop on an open route.

It is essential to phone the Trust Director to let them know if you are going to be late or unable to attend work as soon as reasonably possible and no later than one hour after your expected starting time. Clearly there may be times when this is not possible and allowances will be given in circumstances when there is no access to a phone. However, contact should be made as soon as reasonable practicable in such instances. Failure to notify the Trust Director that you are unable to attend work without a reasonable explanation would count as unauthorised absence and therefore be unpaid. Furthermore, it could constitute a disciplinary offence which may result in formal disciplinary action being invoked.

If you do arrive late because of inclement weather or other such extreme circumstances you will not normally be expected to make up the time lost. Likewise, if you wish to leave work early because of the weather you should consult with the Trust Director. In the case of worsening, or particularly hazardous conditions you should be able to leave work earlier than usual without having to make up any time lost. CCDT's Trust Director will communicate to all if staff should be sent home early.

There may be circumstances where your inability to attend work is caused by a need to provide emergency care for family purposes e.g. in the event of school/nursery closures, illness or other

family situation. In such circumstances guidance should be sought from CCDT's Statement of Conditions of Service.

\*Inclement weather is defined as snow, ice, fog, floods, which render extremely hazardous journeys by road, by both public and private transport

In the event that weather conditions deteriorate during the working day and it appears that staff may have difficulty in travelling home, CCDT's Trust Director will consider whether staff should leave work early. This will be communicated to everyone. Information from the AA, the police and local radio will be taken into consideration when making such a decision. No loss of pay to staff will be involved.

In the event that weather conditions do not improve resulting in absence of more than one day, staff members should maintain regular contact with the Trust Director. Although CCDT will not be unreasonable should extreme circumstances prevent a member of staff attending work, alternative arrangements will be required should a regular or consistent pattern of time-off as a result of inclement weather occurs. This may be due to the member of staff living a considerable distance from work or in a remote area. In such cases, consideration should be given to a combination of paid, unpaid or annual leave being used during absences.

#### Guidelines for All

All members of staff should be clear what reporting arrangements should apply in the event that a member of staff within their area anticipates difficulty getting to work or late arrival. This should be consistent with information already provided to staff for sickness or other forms of leave.

There is a wide range of factors which can apply and a decision as to how time off should be categorised is for the Trust Director. However, consistency and fairness is very important. While accepting that staff should not take unreasonable risks in attempting to get to work in difficult or extremely hazardous\* conditions, there should not be a disincentive to staff that do make a particular effort. Staff are expected to make reasonable efforts to find alternative means of getting to work which do not in the case of inclement weather, cause a health and safety risk. The following factors should be taken into account by the Trust Director when exercising discretion in these circumstances. These include:

Staff should check if public transport is running or if alternative travel arrangement are possible e.g. taxi, walking, car sharing etc. In cases where alternative transport is available staff will be expected to make use of it even if this differs from their normal mode of transport.

Where it is likely that the inclement weather or circumstance preventing the staff member from attending work will continue, working from home should be considered. This is dependent on the nature of employment and whether circumstances permit this to happen.

Where it is known that the member of staff has mobility problems special care should be taken in reaching a decision relating to attendance and pay. CCDT Trust Director will advise on such cases.

\*Extremely hazardous is defined as those conditions in which the police and/or appropriate motoring organisations advise people not to make When a member of staff has not been able to attend work at all due to inclement weather, or other extreme circumstances outside their

control, then the Line Manager may come to an agreement with that individual to allow them to take a day's annual leave, or elect to have a day's authorised leave without pay, or work at home, or make up the time/hours lost within one month of the occurrence.



## Chichester Community Development Trust Bullying & Harassment Policy: January 2024

### Introduction

CCDT expects that all working relationships will be characterised by respect. Any kind of behaviour which undermines exploits, humiliates, ridicules or threatens another person will not be tolerated.

The law defines harassment as unwanted conduct that affects the dignity of people in the workplace or creates an intimidating, hostile, degrading, humiliating or offensive environment.

If it is serious enough, a single incident can be harassment. It is irrelevant that no offense was meant; the effect on the recipient is what determines whether words or actions are harassment. Bullying can never be excused by saying, "But I was only joking". It is also irrelevant that the person offended was not the intended target. For example, if a colleague expresses offensive views in a conversation which does not include you but takes place in your presence, you would still be entitled to complain about it.

The most common forms of harassment are a person being

- ridiculed
- patronised
- excluded
- bullied
- intimidated
- physically or verbally threatened.

This list is not exhaustive.

Bullying and harassment can happen:

- face to face
- by letter
- by email
- by phone

Bullying itself is not against the law, but harassment is. This is when the unwanted behaviour is related to one of the following:

- age
- sex

- disability
- gender (including gender reassignment)
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief
- sexual orientation

## **1. What to do if you are being bullied or harassed**

If you are being bullied or harassed, the first step, if possible, is to confront the harasser. Clearly state that the behaviour is offensive and that you want it to stop. If you do not feel able to do this by yourself, ask your Line Manager for help. The initial approach may be made informally. If your complaint is against your manager, then you may contact the Trust Director.

Any manager who receives a complaint must deal with it promptly and thoroughly. In most instances, managers should be able to put a stop to the problem informally, without recourse to further action. Managers must report all bullying and harassment complaints, whether they are formal or informal to the Trust Director who will report back to the Trustees.

## **2. The Formal Complaint Process**

A formal complaint of harassment may be made if informal action is thought to be insufficient by the member of staff making the complaint, by the manager who receives the complaint or by the Trust Director or Trustees.

When a formal complaint is made, the Trust Director will begin an investigation within ten days of the complaint being received. This may be carried out internally or an investigator may be appointed. If an investigator is appointed, he or she will be a manager/ trustee who is senior to the person making the complaint and who has had no involvement in the matters complained of. The objective of any investigation will be to uncover all relevant information. Investigations must be thorough, but must also be carried out with all due urgency. Confidentiality and discretion are paramount.

An essential part of any investigation is to interview the person making the complaint. At this meeting the person may be accompanied by a colleague or official representative.

## **3. The Right to be Accompanied**

To exercise the right to be accompanied, employees must make a reasonable request. It will not normally be reasonable for employees to insist on being accompanied by a companion whose presence would prejudice the meeting, nor who might have a conflict of interest, nor would it be reasonable to ask to be accompanied by a companion from a remote geographical location.

The role of the companion can include addressing the meeting to sum up the employee's case and conferring with the employee, if the employee wishes, but it does not include answering questions on the employee's behalf or preventing them from speaking. If the original time set for the meeting is during the normal working hours of the companion, he or she will normally be released from his or her duties to attend the hearing. However, if the companion cannot be

available on the date for which the hearing has been arranged, an alternative time will be set within five working days from the day after the original hearing date.

In certain limited circumstances, the Trust Director may decide that we should allow the employee to be accompanied by someone other than a fellow worker or official representative. Two examples would be where there are language difficulties or where it would be a reasonable adjustment for someone with a disability. It will be open to the Trust Director to refuse to allow anyone to act as a companion that he or she considers inappropriate for this role and we reserve the right to ask for full details of the proposed companion's identity and qualifications in order to make this decision.

#### **4. Investigation**

An investigation may also involve taking statements from other members of staff. The investigating manager will make it clear that in the interests of fairness, any statements may be copied to the member of staff whose conduct is being investigated. If a member of staff is afraid of reprisals from the employee under investigation, we will try to protect his or her identity, if we can. In any event, the investigating manager will ensure that everyone they speak to is informed that the process is confidential and must not be discussed.

Both parties to the complaint will be advised of the outcome within two weeks of the end of the investigation. Disciplinary procedures will then begin if appropriate.

Reports and other information produced during the investigation may be made available on request to both parties to the complaint and will not be unreasonably withheld.

The kind of follow-up action that might be necessary following the investigation of a complaint of bullying or harassment could include:

- Disciplinary proceedings against a person found to have subjected someone to harassment;
- Training for the person found to have subjected someone to harassment;
- Disciplinary proceedings against a complainant who makes an ill-founded complaint and who does not hold an honest belief in the complaint.

#### **5. Appeals**

If the outcome is adverse to the employee, he or she will have the right to appeal against the decision taken. For further information, please consult the Appeals Procedure.

## Chichester Community Development Trust Capability Policy: January 2024

### Introduction

CCDT defines the term “Capability” as relating to an employee’s ability and competence in performance of their work as opposed to “Conduct” which relates to the standard of their behaviour at work. For example: someone may want to do a piece of work, or may think they are doing it acceptably, but they may not have the skills or the experience required; this would be covered by Capability Procedures. On the other hand, someone may refuse to do a piece of work, or may choose to do it badly; this would be a Conduct issue, and would be covered by CCDT’s normal disciplinary procedures.

It is recognised that an employee’s work performance and efficiency can be affected by a wide range of factors both related to the workplace and to their life outside of work. Health may also play an important part in this. The point of having a Capability Policy is for CCDT to be able to address any unsatisfactory work performance as soon as possible, and to offer what support it can to employees to enable performance to be improved. It should be noted that this Policy is intended to link with CCDT’s Disciplinary Procedure where necessary.

### **1. Examples of Capability Related Issues**

Low output – where an employee appears capable of producing work at the required standard, but works slowly and fails to meet targets/other output requirements.

2. Inability to do the work required – where an employee has been offered training and advice but is still unable to do their work at the level or to the standard which is required. Reasons may include inappropriate recruitment, promotion beyond ability, or introduction of new working practices/systems which have resulted in declining performance and this has not been improved by training/other support.

3. Health problems which may not necessarily be serious enough to justify longer term absence but which affect performance, attendance or timekeeping. It should be noted, however, that where an employee is a disabled person (as defined in the Equality Act 2010), it will be necessary to make all appropriate “reasonable adjustments” before considering any action under capability procedures. Reasonable adjustments include adjustments in working patterns, physical adjustment to the work area and medically prescribed rest or therapy (among others).

4. An underlying health problem.

5. Personal problems including domestic responsibilities.

This list is meant to provide examples rather than a definitive list, and the Trust Director will consider cases carefully and on an individual basis before deciding whether to use this Policy or others.

### **2. Procedure**

CCDT recognises that matters relating to work performance can be sensitive and it will endeavour to treat staff with respect and courtesy in using this Policy. It also recognises that all

employees need clear standards and targets, and these should be implemented from the outset of employment and updated regularly as required.

The Probationary Period is also intended to clarify standards and performance requirements, and this may be extended if there are concerns about an employee's capability. All employees should have up-to-date job descriptions, and these may be thoroughly reviewed during Annual Appraisals, and when an employee leaves. If there has been a breakdown in this procedure, it is the responsibility of the Trust Director to address the situation as soon as possible and to rectify it via honest discussion with the employee concerned.

### **3 Stages**

#### **Stage One**

If an employee's performance is causing concern, the Trust Director should arrange to meet with them to discuss the concern(s); this may be done as part of the normal supervision process, or separately. The employee should be encouraged to explain the reason(s) for their poor performance, and the Trust Director should consider these fully. The issue(s) should be discussed thoroughly, and by the end of the meeting both the employee and the Trust Director should understand the following:

- how the performance is unsatisfactory
- what the required performance is (with SMART\* objectives where possible)
- a date for when the performance will be reviewed
- a clear indication of what will happen if there is no improvement

The Trust Director should confirm these in writing to the employee and ask for their signature as agreement on what was discussed. The timescale for improvement will vary depending on the nature of the problem and any mitigating circumstances. Where the problem was caused by lack of skills, training (either formal or informal, or some type of coaching/mentoring) should be offered and the employee should be given sufficient time to reach the required standard. Where training or some similar support is agreed, this should also be noted in writing.

Documentary evidence of meetings, agreed training plans, etc, should be kept in the employee's personnel file. At the end of the review period, the Trust Director should again meet with the employee to review progress. It is envisaged that in most cases this will be the end of the matter, as performance will have improved as agreed.

#### **Stage Two**

If there are still concerns or performance has not improved as agreed, the Trust Director should arrange a follow-up meeting with the employee, where they will be told clearly that their performance has not improved adequately; they will be reminded of the first meeting and of the targets set.

They will be able to discuss any explanation they may have, and may again be offered training or other support should the Trust Director feel that this will help. They should also be informed that they now have a maximum of eight weeks to reach the agreed standards but that should this not happen, CCDT reserves the right to consider the matter under its Disciplinary Procedure. Again, written evidence must be kept in the personnel file.

### Stage Three

If there are still concerns or performance has not improved as agreed, the Trust Director should consider carefully whether the issue is health related; if it is or may be, CCDT reserves the right to request a medical opinion – either from the employee's GP or from an independent doctor of CCDT's choice. If this option is to be pursued, the employee will be fully informed.

Following receipt of a medical report, a further meeting should be arranged with the employee to discuss the content; subsequent action will of course depend upon the content of the report, and each case will be treated on its individual merits. If the continued concern(s) are not related to a health issue, the employee should be informed that a further meeting will be held and that the matter is now to be considered under CCDT's Disciplinary Procedure.

The employee should be reminded of their right to be accompanied at this meeting and the Disciplinary Procedure should then be followed in full. It is assumed that the information gathered to date will replace the formal investigation stage of the Disciplinary Procedure, as the Trust Director and Trustees and the employee will be aware of the concerns and will have made attempts to address them.

### **4. Related Documents**

This Policy should be read alongside CCDT's Disciplinary Procedure, Health & Safety Policy, Equal Opportunities Policy, and Appraisal Policy. This policy will be reviewed from time to time as necessary by the CCDT Executive Board.

## Chichester Community Development Trust Caring for Staff & Relationships Policy: January 2024

### 1.0 INTRODUCTION

CCDT is mindful of its staffs health and wellbeing. Supervision provides staff with the opportunity to discuss any issues in a confidential environment. Our lone worker policy ensures the safety of staff, however if there are specific circumstances which may affect individuals, they should be encouraged to discuss these with their Line Manager so appropriate support can be identified e.g. domestic violence, mental health.

### 2.0 GENERAL PRINCIPLES

1. CCDT is committed to the principle of wanting a happy, creative, productive and safe working environment and for matters of concern for individuals to be taken seriously.
2. It is intended that the supervision and appraisal process adopted by CCDT will prevent grievances arising. The trustee champions will also play their part in avoiding problems.
3. Wherever possible issues should be resolved informally. It is hoped that individuals will approach the issues in good faith, with the aim of resolution.
4. All parties involved in these procedures must ensure that they maintain, as appropriate, the confidentiality of the process within and outside CCDT.
5. CCDT is committed to exploring all other avenues before the formal procedure, as set out in the Grievance Policy, is commenced, however these principals will not prevent staff from instituting the formal grievance process at any time should they so wish.

### 3.0 GRIEVANCES

Grievances are concerns, problems or complaints raised by a staff member. Examples of issues that may cause grievances include:

- Excessive workloads
- Being refused holiday
- Health and safety issues
- Work relationships
- Bullying and harassment
- New working practices/organisational changes
- Treatment seen as unfair or discriminatory by the employee

### 4.0 MEDIATION

An independent third party or mediator can sometimes help resolve disciplinary and grievance issues. This is a voluntary process where the mediator helps two or more people in dispute to attempt to reach an agreement. Mediation will be offered as an option where appropriate.

It is hoped that the employees will recognise the benefits of seeking to resolve issues via mediation and will be amenable to, and cooperate with this approach.



## Chichester Community Development Trust Complaints Policy: January 2024

### HOW TO DEAL WITH A COMPLAINT

1. Definition - A complaint is defined as an expression of dissatisfaction about the standard of service, actions, or lack of action by CCDT or its staff, affecting an individual or a group of people.

We aim to put things right straight away if possible, but recognise there may be cases requiring fuller investigation.

2. Written Complaints - Tell the Trust Director that a written complaint has been received and ensure that details are recorded in the Complaints Register which is kept at the front of the Complaints file. If you have access to the file you should record these details yourself, as soon as you receive the complaint.
3. Oral Complaints - If you receive a complaint, either in person or by telephone, ask the person concerned to put the complaint in writing. This can be done by letter or by email, or by completing the CCDT complaints form. If necessary you should offer to complete the complaints form by taking down all the details, filling in the form and asking the person to sign it.
4. Acknowledgement - Written acknowledgement of the complaint must be sent to the complainant within 2 working days, saying who will be dealing with investigation of the complaint. A copy of the CCDT leaflet entitled 'How to Make a Complaint', which sets out VAAC policy, should be enclosed with the acknowledgement.

The Office Manager normally deals with acknowledging the complaint, but it is the responsibility of the person receiving the complaint to ensure that it is acknowledged in writing. File a copy of the acknowledgement on the Complaints file.

5. Investigation - CCDT Feedback Policy and the leaflet entitled 'How to Make a Complaint' provide details of the steps to be taken.
6. Monitoring - Progress on dealing with the complaint should be recorded in the Complaints Register.

## Chichester Community Development Trust Data Protection Policy: November 2024

### Introduction

Community Development Trust (CCDT) collects and uses certain types of personal information about staff, Trustees, residents and other individuals who come into contact with the Trust. The Trust may be required by law to collect and use certain types of information to comply with statutory obligations related to employment and this policy is intended to ensure that personal information is dealt with properly and securely and in accordance with the General Data Protection Regulation and other related legislation. This policy is intended to ensure that personal information is dealt with properly and securely and in accordance with the General Data Protection Regulations and other related legislation.

The GDPR applies to all computerised data and manual files if they come within the definition of a filing system.

### **1 Personal Data**

1.1 'Personal data' is information that identifies an individual. A sub-set of personal data is known as 'personal sensitive data'. This special category data is information that relates to a person's:

- race or ethnic origin;
- political opinions;
- religious or philosophical beliefs;
- trade union membership;
- physical or mental health;
- an individual's sex life or sexual orientation;
- genetic or biometric data for the purpose of uniquely identifying a natural person.

1.2 Personal sensitive data is given special protection, and additional safeguards apply if this information is to be collected and used.

1.3 The Trust does not intend to seek or hold sensitive personal data about staff, trustees or clients except where it has been notified of the information, or it comes to light via legitimate means (e.g. a grievance) or needs to be sought and held in compliance with a legal obligation or as a matter of good practice.

## **2 The Data Protection Principles**

2.1 Article 5 of the GDPR sets out six data protection principles which must be followed at all times:

- personal data shall be processed fairly, lawfully and in a transparent manner;
- personal data shall be collected for specific, explicit, and legitimate purposes, and shall not be further processed in a manner incompatible with those purposes;
- personal data shall be adequate, relevant and limited to what is necessary for the purpose(s) for which it is being processed;
- personal data shall be accurate and, where necessary, kept up to date;
- personal data processed for any purpose(s) shall not be kept for longer than is necessary for that purpose / those purposes;
- personal data shall be processed in such a way that ensures appropriate security of the data, including protection against unauthorised or unlawful processing and against accidental loss, destruction, or damage, using appropriate technical or organisational measures.

2.2 In addition to this, the Trust is committed to ensuring that at all times, anyone dealing with personal data shall be mindful of the individual's rights under the law (as explained in more detail in paragraphs 7 and 8 below).

2.3 The Trust is committed to complying with these principles at all times. This means that we will:

- inform individuals as to the purpose of collecting any information from them, as and when we ask for it and will identify who we will share the information with and how long we intend to retain the information;
- be responsible for checking the quality and accuracy of the information;
- regularly review the records held to ensure that information is not held longer than is necessary, and that it has been held in accordance with the data retention policy;
- ensure that when information is authorised for disposal it is done in accordance with our disposals policy;
- ensure appropriate security measures to safeguard personal information whether it is held in paper files or on our computer system, and follow the relevant security policy requirements at all times;
- share personal information with others only when it is necessary and legally appropriate to do so;
- set out clear procedures for responding to requests for access to personal information known as subject access requests;
- report any breaches of the GDPR.

### **3 Conditions for Processing**

3.1 The individual has given consent that is specific to the particular type of processing activity.

3.1.1 The processing is necessary for the performance of a contract, to which the individual is a party, or is necessary for the purpose of taking steps with regards to entering into a contract with the individual, at their request.

3.1.2 The processing is necessary for the performance of a legal obligation to which we are subject.

3.1.3 The processing is necessary to protect the vital interests of the individual or another.

### **4 Use of Personal Data by the Trust**

4.1 The Trust collects and uses certain types of personal information about staff, Trustees, residents and other individuals who come into contact with the Trust. In each case, the personal data must be treated in accordance with the data protection principles as outlined in the paragraph above.

4.2 Any wish to limit or object to use of personal data should be notified to the Trust in writing. If, in the view of the Trust, the objection cannot be maintained, the individual will be given written reasons why the Trust cannot comply with their request.

#### **Staff, Trustees and Volunteers**

4.3 The personal data held about staff, Trustees and volunteers will include contact details, employment history, information relating to career progression, information relating to DBS checks and photographs.

4.4 The data is used to comply with legal obligations placed on the Trust in relation to employment. We may pass information to other regulatory authorities where appropriate. Personal data will also be used when giving references.

4.5 It should be noted that information about disciplinary action may be kept for longer than the duration of the sanction. Although treated as “spent” once the period of the sanction has expired, the details of the incident may need to be kept for a longer period.

#### **Other Individuals**

4.6 The Trust may hold personal information in relation to other individuals who have contact with the Trust, such as volunteers and guests. Such information shall be held only in accordance with the data protection principles and shall not be kept longer than necessary.

## **5 Security of Personal Data**

5.1 The Trust will take reasonable steps to ensure that members of staff and Trustees will only have access to personal data where it is necessary for them to carry out their duties. All staff will be made aware of this Policy and their duties under the GDPR. The Trust will take all reasonable steps to ensure that all personal information is held securely and is not accessible to unauthorised persons.

## **6 Disclosure of Personal Data to Third Parties**

6.1 The following list includes the most usual reasons that the Trust will authorise disclosure of personal data to a third party:

- to give a confidential reference relating to a current or former employee;
- for the prevention or detection of crime;
- for the assessment of any tax or duty;
- where it is necessary to exercise a right or obligation conferred or imposed by law upon the Trust (other than an obligation imposed by contract);
- for the purpose of, or in connection with, legal proceedings (including prospective legal proceedings);
- for the purpose of obtaining legal advice;

6.2 The Trust may receive requests from third parties to disclose personal data it holds about staff or other individuals. This information will not generally be disclosed unless one of the specific exemptions under data protection legislation which allow disclosure applies; or where necessary for the legitimate interests of the individual concerned or The Trust.

6.3 All requests for the disclosure of personal data must be sent to the Trust, who will review and decide whether to make the disclosure, ensuring that reasonable steps are taken to verify the identity of that third party before making any disclosure.

## **7 Subject Access Requests**

7.1 Anybody who makes a request to see any personal information held about them by the Trust is making a subject access request. All information relating to the individual, including that held in electronic or manual files should be considered for disclosure.

7.2 A subject access request must be made in writing. The Trust may ask for any further information reasonably required to locate the information.

7.3 All requests will be handled in line with the Subject Access procedural note.

## **8 Other Rights of Individuals**

### **Right to restrict processing**

- 8.1 An individual has the right to object to the processing of their personal data and to block or suppress the processing.
- 8.2 Where such an objection is made, it must be sent to the Trust who will assess whether there are compelling legitimate grounds to continue processing which override the interests, rights and freedoms of the individuals, or whether the information is required for the establishment, exercise or defence of legal proceedings.
- 8.3 The Trust shall be responsible for notifying the individual of the outcome of their assessment within 20 working days of receipt of the objection.

### **Right to rectification**

- 8.4 An individual has the right to request the rectification of inaccurate data or incomplete data without undue delay. Where any request for rectification is received, it should be sent to the Trust and where adequate proof of inaccuracy is given, the data shall be amended as soon as reasonably practicable, and the individual notified within 20 days.
- 8.5 Where there is a dispute as to the accuracy of the data, the request and reasons for refusal shall be noted alongside the data and communicated to the individual. The individual shall be given details of how to appeal to the Information Commissioner.
- 8.6 An individual also has a right to have incomplete information completed by providing the missing data, and any information submitted in this way shall be updated without undue delay.

### **Right to erasure**

- 8.7 Individuals have a right, in certain circumstances, to have data permanently erased without undue delay. This right arises in the following circumstances:
- where the personal data is no longer necessary for the purpose or purposes for which it was collected and processed;
  - where consent is withdrawn and there is no other legal basis for the processing;
  - where an objection has been raised under the right to object, and there is no overriding legitimate interest for continuing the processing;
  - where personal data is being unlawfully processed (usually where one of the conditions for processing cannot be met);
  - where the data must be erased in order to comply with a legal obligation.

8.8 The Trust will decide regarding any application for erasure of personal data and will balance the request against the exemptions provided for in the law. Where a decision is made to erase the data, and this data has been passed to other data controllers, and / or has been made public, reasonable attempts to inform those controllers of the request shall be made.

### **Right to object**

8.9 An individual has the right to object to:

- processing based upon legitimate interests or the performance of a task in the public interest/exercise of official authority (including profiling);
- direct marketing (including profiling);
- processing for purposes of scientific /historical research and statistics.

8.10 Where such an objection is made, it must be sent to the Trust who will assess whether there are compelling legitimate grounds to continue processing which override the interests, rights and freedoms of the individuals, or whether the information is required for the establishment, exercise or defence of legal proceedings.

### **Right to portability**

8.11 If an individual wants to send their personal data to another organisation, they have a right to request that the Trust provides their information in a structured, commonly used, and machine-readable format. This right is limited to situations where the Trust is processing the information on the basis of consent or performance of a contract. If a request for this is made, it should be forwarded to the Trust.

## **9 Breach of any Requirement of the GDPR**

9.1 Any and all breaches of the GDPR, including a breach of any of the data protection principles shall be reported as soon as it is discovered, to the Trust.

Once notified, the Trust shall assess:

- the extent of the breach;
- the risks to the data subjects as a consequence of the breach;
- any security measures in place that will protect the information;
- any measures that can be taken immediately to mitigate the risk to the individuals.

9.2 Unless the Trust concludes that there is unlikely to be any risk to individuals from the breach, it must be notified to the Information Commissioner's Office within 72 hours of the breach having come to the attention of the Trust.

9.3 The Information Commissioner shall be told:

- details of the breach, including the volume of data at risk, and the number and categories of data subjects;
- the contact point for any enquiries;
- the likely consequences of the breach;
- the measures proposed or already taken to address the breach

9.4 If the breach is likely to result in a high risk to the affected individuals then the Trust shall notify data subjects of the breach without undue delay unless the data would be unintelligible to those not authorised to access it, or measures have been taken to mitigate any risk to the affected individuals.

9.5 Data subjects shall be told:

- the nature of the breach;
- who to contact with any questions;
- measures taken to mitigate any risks.

9.6 The Trust shall then be responsible for instigating an investigation into the breach, including how it happened, and whether it could have been prevented. Any recommendations for further training or a change in procedure shall be reviewed by the Trust and a decision made about implementation of those recommendations.



## Chichester Community Development Trust Data Sharing Agreement: January 2024

### 1. Parties:

CCDT whose offices are at The Water Tower, Blomfield Drive, Graylingwell Park, Chichester PO19 6BZ (the "Data Controller");

and

[NAME OF DATA PROCESSOR] of [ADDRESS] (the "Data Processor")

### 2. Background

- 2a. The Data Controller uses the services of the Data Processor from time to time to [insert activity e.g. carry out mailings/marketing/provide event services, provide web hosting services etc].
- 2b. The Parties have agreed to enter into this Agreement to ensure compliance with the General Data Protection Regulations (the Regulations) in relation to all such processing.
- 2c. The terms of this Agreement are to apply to all data processing carried out for the Data Controller by the Data Processor and to all personal data held by the Data Processor in relation to all such processing whether such personal data is held at the date of this Agreement or received afterwards.

### 3. Interpretation

- 3.1 The terms and expressions set out in this agreement shall have the following meanings:

"Contract" the agreement between the parties for [insert subject matter of the agreement] dated [insert date];

"Data Controller", "Data Processor" and "processing" shall have the meanings given to them in the Regulations;

"ICO" means the Information Commissioner's Office;

"personal data" shall include all data relating to individuals which is processed by the Data Processor on behalf of the Data Controller in accordance with this Agreement.

“Regulations” means the General Data Protection Regulations

It is agreed as follows:

4. The Data Processor is to process personal data received from the Data Controller only on the express instructions of designated contacts at the Data Controller.
5. The Data Processor shall comply at all times with the Regulations and shall not perform its obligations under this Agreement in such way as to cause the Data Controller to breach any of its applicable obligations under the Regulations.
6. All personal data provided to the Data Processor by the Data Controller or obtained by the Data Processor in the course of its work with the Data Controller is strictly confidential and may not be copied, disclosed or processed in any way without the express authority of the Data Controller.
7. The Data Processor agrees to comply with any reasonable measures required by the Data Controller to ensure that its obligations under this Agreement are satisfactorily performed in accordance with all applicable legislation from time to time in force and any best practice guidance issued by the ICO.
8. Where the Data Processor processes personal data (whether stored in the form of physical or electronic records) on behalf of the Data Controller it shall:
  - 8.1 process the personal data only to the extent, and in such manner, as is necessary in order to comply with its obligations or as is required by law or any regulatory body including but not limited to the ICO;
  - 8.2 implement appropriate technical and organisational measures and take all steps necessary to protect the personal data against unauthorised or unlawful processing and against accidental loss, destruction, damage, alteration or disclosure, and promptly supply details of such measures as requested from the Data Controller;
  - 8.3 in furtherance of its obligations under 8.2 above implement and maintain the security measures set out in Schedule 1 to this agreement;
  - 8.4 if so requested by the Data Controller (and within the timescales required by the Data Controller) supply details of the technical and organisational systems in place to safeguard the security of the personal data held and to prevent unauthorised access;
  - 8.5 notify the Data Controller (within two working days) if it receives:
    - 8.5.1 a request from a data subject to have access to that person’s personal data; or
    - 8.5.2 a complaint or request relating to the Data Controller’s obligations under the Regulations;
  - 8.6 provide the Data Controller with full co-operation and assistance in relation to any complaint or request made, including by:
    - 8.6.1 providing the Data Controller with full details of the complaint or request;
    - 8.6.2 complying with a data access request within the relevant timescale set out in the Regulations and in accordance with the Data Controller’s instructions;
    - 8.6.3 providing the Data Controller with any personal data it holds in relation to

a data subject (within the timescales required by the Data Controller);  
8.6.4 providing the Data Controller with any information requested by the Data Controller;

- 8.7 not process personal data outside the European Economic Area without the prior written consent of the Data Controller;
- 8.8 not transfer any personal data provided to it by the Data Controller to any third party without the written consent of the Data Controller and ensure that any third party to which it sub-contracts any processing has entered into a written contract with the Data Processor which contains all the obligations that are contained in this Agreement and which permits both the Data Processor and the Data Controller to enforce those obligations.
9. The Data Processor shall be liable for and shall indemnify (and keep indemnified) the Data Controller against each and every action, proceeding, liability, cost, claim, loss, expense (including reasonable legal fees and disbursements on a solicitor and client basis) and demand incurred by the Data Controller which arise directly or in connection with the Data Processor's data processing activities under this Agreement.
10. The Data Processor agrees that in the event that it is notified by the Data Controller that it is not required to provide any further services to the Data Controller under this Agreement, the Data Processor shall transfer a copy of all information (including personal data) held by it in relation to this Agreement to the Data Controller in a format chosen by the Data Controller and/or, at the Data Controller's request, destroy all such information using a secure method which ensures that it cannot be accessed by any third party and shall issue the Data Controller with a written confirmation of secure disposal.
11. All copyright, database right and other intellectual property rights in any personal data processed under this Agreement (including but not limited to any updates, amendments or adaptations to the personal data by either the Data Controller or the Data Processor) shall belong to the Data Controller. The Data Processor is licensed to use such data only for the term of and in accordance with this Agreement.
12. The Data Processor accepts the obligations in this Agreement in consideration of the Data Controller continuing to use its services.
13. This Agreement shall be governed by the laws of England and Wales.

SIGNED for and on behalf of CCDT by:

Print Name: ..... Position: .....

Signature: .....

SIGNED for and on behalf of [NAME OF DATA PROCESSOR] by:

Print Name: ..... Position: .....

Signature: .....

## Schedule 1

### Security Measures to be adopted by the Data Processor

1. The Data Processor will ensure that in respect of all personal data it receives from or processes on behalf of the Data Controller it maintains security measures to a standard appropriate to:

1.1 the harm that might result from unlawful or unauthorised processing or accidental loss, damage or destruction of the personal data;

1.2 the nature of the personal data.

2. In particular the Data Processor shall:

2.1 have in place and comply with a security policy which:

2.1.1 defines security needs based on a risk assessment;

2.1.2 allocates responsibility for implementing the policy to a specific individual or members of a team;

2.1.3 is provided to the Data Controller on or before the commencement of this Agreement;

2.1.4 is disseminated to all relevant members, volunteers and staff; and

2.1.5 provides a mechanism for feedback and review.

2.2 ensure that appropriate security safeguards and virus protection are in place to protect the hardware and software which is used in processing the personal data in accordance with best industry practice;

2.3 prevent unauthorised access to the personal data;

2.4 ensure its storage of personal data conforms with best industry practice such that the media on which personal data is recorded (including paper records and records stored electronically) are stored in secure locations and access by personnel to personal data is strictly monitored and controlled;

2.5 have secure methods in place for the transfer of personal data whether in physical form (for instance, by using couriers rather than post) or electronic form (for instance, by using encryption);

2.6 put password protection on computer systems on which personal data is stored and ensure that only authorised personnel are given details of the password;

- 2.7 take reasonable steps to ensure the reliability of any members, volunteers and employees or other individuals who have access to the personal data;
- 2.8 ensure that any employees or other individuals required to access the personal data are informed of the confidential nature of the personal data and comply with the obligations set out in this Agreement;
- 2.9 ensure that none of the employees or other individuals who have access to the personal data publish, disclose or divulge any of the personal data to any third party unless directed in writing to do so by the Data Controller;
- 2.10 have in place methods for detecting and dealing with breaches of security (including loss, damage or destruction of personal data) including:
  - 2.10.1 the ability to identify which individuals have worked with specific personal data;
  - 2.10.2 having a proper procedure in place for investigating and remedying breaches of the data protection principles contained in the Regulations;
  - 2.10.3 notifying the Data Controller as soon as any such security breach occurs.
- 2.11 have a secure procedure for backing up and storing back-ups separately from originals;
- 2.12 have a secure method of disposal unwanted personal data including for back-ups, disks, print outs and redundant equipment.

## Chichester Community Development Trust Depositing & Investing Funds Policy: November 2024

### Introduction

Relevant documentation pertaining to this policy include:

- Memorandum and articles of association
- CCDT financial and purchasing controls and procedures
- CCDT reserves policy
- Charity Commission guidance 'Charities and investment matters: a guide for trustees'.

It is very important for the protection of trustees and the good governance of charities that trustees are individually aware of guidelines that should steer their decision-making in financial matters.

### **1. Role of Trustees**

Trustees have overall responsibility for the investment of a charity's funds. This means that they have a crucial role to play in making strategic decisions about how to use a charity's assets to achieve its aims. However, trustees may choose to delegate day to day decisions about investments to a third party.

Trustees must use their skills and knowledge in a way that is reasonable in the circumstances ('the duty of care'). For example, a trustee with investment experience should draw on his or her skills and knowledge of investments when making decisions.

If trustees can demonstrate that they have considered the relevant issues, taken advice where appropriate and reached a reasonable decision, they are unlikely to be criticised for their decisions, or for adopting a particular policy.

### **2. What Should Trustees Consider When Investing in Savings and Cash Deposits?**

Savings and cash deposits are forms of investment and the legal requirements set out in section 1 above apply. Cash deposited in a bank or building society normally earns interest, which can be either used by the charity to generate income until it is needed to spend on the charity's aims or placed in longer term investments.

Trustees should identify and plan for the management of any risks attached to the investment of cash.

Cash needed for the day to day running of the charity will be held in an instant access current or deposit account. If CCDT should wish to lock away cash for longer periods of time, for example to fund a project at a defined point in the future, CCDT can deposit cash in a fixed term or notice

account, which can offer higher rates of interest although it is noted there may be restrictions on access to funds.

If cash is available for surplus investment the trustees will decide and record in writing where and how long cash may be deposited and the maximum amount to be placed in one institution

Cash should only be deposited with reputable institutions, such as those protected by the FSCS. This currently protects £85k of deposits for charities that are limited companies that fulfill two out of three criteria:

- Turnover not more than £6.5m
- Balance sheet of not more than £3.26m
- Not more than 50 employees.

### **3. Long Term Investments for Capital Growth**

CCDT is not in a position currently to consider long term investment strategies but trustees should be aware that whatever arrangements are eventually put in place, the trustees should be able to demonstrate that they have retained overall control of decision making and have complied with their duties.

If the need arises, they will need a long term investment strategy, a set of principles regarding, for example, ethical investment in line with its memorandum and articles of association, almost certainly professional guidance, and a detailed risk analysis. Guidelines on the management of such investments (subject to an appropriate policy being devised) are contained in the Memorandum and Articles of Association.

### **4. Additional Considerations**

Cash reserves for the purpose of working capital should only be held in an FSCS approved account. The amount should not exceed the amount currently guaranteed by FSCS regulations.

CCDT is not in a position currently to consider long term investment strategies but trustees should be aware that whatever arrangements are eventually put in place, the trustees should be able to demonstrate that they have retained overall control of decision making and have complied with their duties.

Cash reserves for the purposes of funding unexpected expenditure, for example when projects overrun, or unplanned events occur, or when income does not reach expected levels, should total a maximum of £100k (expected in 2017 – current level £60.2k in July 2015 balance sheet).

Such sums should be invested in an interest-bearing FSCS approved deposit account, based upon a survey of rates currently available, up to the guaranteed limit of £85K, at which time a further account should be opened with a different institution bearing equivalent guarantees. Should reserves go on to exceed £170k in total in current and deposit accounts, trustees should consider instituting a longer term investment strategy for the surplus in compliance with the Charity Commission's guidelines. Interest rates and the possibility of switching accounts should be kept under review by trustees at all times.

## Chichester Community Development Trust Employee Retention Strategy: January 2024

### 1.0 INTRODUCTION

CCDT recognises that our success depends on our ability to attract, develop, motivate, and retain high quality staff. In recruiting, we seek staff with the motivation, drive and commitment that supports our aims.

In retaining our employees, we recognise that most people seek challenges, opportunities, recognition and learning. An organisation that is not committed to provide those will face higher staff turnover than most. A healthy organisation will achieve a balance between staff joining and leaving, as new staff will bring new approaches and ideas which will enrich our work. It is inevitable that staff will leave for a number of reasons outside of our control but CCDT will seek to provide a professional, meaningful and enjoyable environment to support staff retention.

### 2.0 STAFF RETENTION

Staff retention is essentially a risk management process. The following items include top reasons for employee turnover:

- Lack of acknowledgement and recognition – line managers will conduct an assessment of the employee's performance annually as part of the employee appraisal process. Employees will receive support to achieve their personal development plans, in accordance with our Training policy. Employees with mandatory continuing professional development requirements will be supported. It is the aim of CCDT to offer development for staff and to provide support for relevant professional qualifications which help meet CCDT's objectives.
- Inequities in salary (perceived and actual) – CCDT uses the NJC salary scale which is available to all members of staff.
- No sense of long-term purpose or vision – staff and stakeholders are involved in shaping the priorities and development of CCDT via surveys, feedback and development opportunities. The Board of CCDT has approved a Business Plan which outlines the vision for the organisation. Staff are consulted and updated on the delivery of this plan via away days, staff meetings and bulletins.
- Insufficient opportunities for professional and career development – CCDT takes employee development seriously, and sees ongoing training as a key factor in professional and career development. Another key factor is ensuring formal communication mechanisms are in place so that the employee is provided with sufficient information related to their performance and its impact on their professional and career development plan.
- Mismatches between reality and promises – CCDT strives to ensure that an employee's expectations match ours. Clear competencies & job descriptions are essential, together with the opportunity to visit and engage with prospective members/groups. CCDT has an 'open



door' policy where the employee can discuss any of their concerns or issues with their manager or Trust Director at any time.

### **3.0 STAFF ENGAGEMENT AND DEVELOPMENT**

- Communication – Using our supervision process and staff meetings, CCDT will engage with staff and provide opportunities to share information, develop and apply relevant skills and knowledge. Annual Board/staff away days and staff questionnaires give staff an opportunity for dialogue and involvement in the business direction of CCDT.
- Involvement & participation – regular opportunities for involvement in and across CCDT will be supported. This may include cross working groups, action learning, training and development.
- Systems approach – a clear focus on our purpose and what matters to the people we support will be at the heart of our decision making and procedures. Staff are expected to actively support these principles. Managers are required to facilitate good decision making as close to the work as possible.
- Compensation – CCDT salaries reflect local market conditions.
- Benefits and flexibility – Terms & conditions will reflect local market conditions. CCDT recognises staff may need support in balancing workload against the need for family life.
- Recognising the risk environment – the current economic context and demands upon public finances can cause anxiety. CCDT's Business Plan and subsequent updates will seek to provide a clear vision and project plans to continue to achieve its objectives

## Chichester Community Development Trust Equality and Diversity Policy: November 2024

### Introduction

Chichester Community Development Trust (CCDT) aims to create a culture that respects and values people's differences and to secure genuine equality of opportunity in all aspects of its activities. This applies to users of CCDT's services, as well as to volunteer workers, job applicants and employees.

This policy will set out how we aim to achieve this, the responsibilities of staff, volunteers and service users, and what processes will be put in place to monitor our success. This policy is influenced by both current legislation and policy, but it also reflects the wish of CCDT to promote the best practice in this area.

### **1. Statement of Intent**

CCDT recognises that many people in our society experience discrimination or lack of opportunity for reasons that are not fair. These include: race, religion, creed, colour, national and ethnic origin, political beliefs, gender, sexual orientation, age, disability (including mental illness), health, marital status, responsibility for dependants, appearance, social class, income level or criminal record.

CCDT will challenge discrimination and lack of opportunity in its own policies and practice and will help other organisations and individuals to do the same.

CCDT aims to create a culture that respects and values each other's differences. CCDT sees these differences as an asset to its work as they improve its ability to meet the needs of the people it serves.

All employees, board members, volunteers and member organisations must be able to support the objectives of this Equality and Diversity Policy. All trainers, facilitators and consultants contracted to work for CCDT will be required to support our Equality and Diversity Policy.

### **2. What is Discrimination?**

CCDT believes that discrimination can take one or more of the forms set out below.

**Direct discrimination** is treating one person less favourably than another in the same or similar circumstances or segregating them from others solely because, for example, of their race or because they have a disability or illness. Refusing to employ someone who has the required skills because they are deaf or are pregnant are other examples of such discrimination.

Direct discrimination can also take the form of abuse and/or harassment. Examples of this are verbal abuse, racist jokes, insensitive comments, unwanted physical contact or sexual advances, ridicule or isolation.

**Indirect discrimination** occurs where there is a requirement or condition that applies equally to everyone but which, in practice, has an adverse impact on a particular group and cannot be justified.

For example, an unnecessary physical requirement can discriminate against disabled people; an unnecessary age requirement can discriminate against older people or young people. The setting of language tests, where language skills or fluency are not really needed for a job, is another example.

**Victimisation** occurs when a person is treated less favourably or is discriminated against because they have pursued, or intends to pursue, their rights in respect of alleged discrimination.

**Institutional racism (Macpherson Report, 1999)** is the collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture or ethnic origin. It can be seen in processes, attitudes and/or behaviour, which amount to discrimination, unwitting prejudice, ignorance, thoughtlessness and racist stereotyping, and which disadvantage people from minority ethnic groups.

Discrimination in any of the forms stated above is unacceptable, regardless of whether there was any intention to discriminate or not.

### **3. Service Provision**

All CCDT services are covered by this policy. Services will be reviewed regularly and changed where needed. CCDT will promote equality and diversity in its work with other agencies or individuals.

### **4. Accessibility**

CCDT aims to make its service provision as accessible as possible.

CCDT will, for example, make every effort to ensure that premises used in relation to its work are accessible and welcoming for all members of the community.

CCDT recognises that not everyone has access to personal transport, or is able to use public transport, and will plan its services and activities with this in mind.

CCDT recognises that there will be occasions when the services it provides will not be fully accessible. If requested, CCDT will attempt to make special provision in order to overcome any accessibility issues.

## **5. Recruitment and Selection**

CCDT believes that no person or group should be treated less favourably in employment or volunteering because of the reasons given in the Statement of Intent.

Staff and volunteer appointments will be monitored to ensure no discrimination is occurring at the point of selection. A separate recruitment policy will give full details of this process.

## **6. Staff/Volunteer Development**

All staff and volunteers will have access to appropriate learning and development opportunities in line with their personal development needs and the aims and objectives of CCDT.

## **7. Promotion of Policy**

Copies of this policy will be freely available to staff, volunteers, member organisations and any other interested parties. A laminated summary of the Statement of Intent, together with a named contact for more information, will be placed in a prominent position in CCDT offices.

## **8. Implementation and Monitoring**

Monitoring of the Equality and Diversity Policy and its implementation is the responsibility of the Board of Trustees. The Board will review the policy every three years.

Induction for board members, new staff and volunteers will include a briefing on the Equality and Diversity Policy.

A copy of the Equality and Diversity Policy will be given to all new staff and volunteers, and board members of CCDT and to any member organisation on request.

## **9. The Board of Trustees**

All board members will affirm their commitment to the Equality and Diversity Policy.

CCDT's membership should aim to reflect a fair balance and representation of the local community and should endeavour to redress any imbalance of under-represented groups.

## **10. Chichester Community Development Trust Policies and Procedures**

Other CCDT policies and procedures support its commitment to equality and diversity. These include Annual Leave and Time Off in Lieu, Recruitment, Grievance and Disciplinary, Notification of Absence and Sick Pay, Complaints Procedure, Recruitment of Ex-Offenders, Statement of Terms and Conditions and Induction.

## Equality and Diversity Action Plan 2024

Action	How	Who By	When / Frequency
Review Policies	Equality and Diversity policy to be reviewed to ensure meets all legislation	SMT	Annually
Publicise Policies	Policies are explained to staff and tutors at start of year tutor meetings.	Delivery team	Annually
	Learners are made aware of the policy via learner handbooks and induction	Delivery team	At start of each course
	Schemes of work to be checked to ensure that equalities issues are addressed	Delivery team	Before each course
Staff training	All staff to take part in Equalities training	Delivery team	All new tutors and every 2y.
Equalities Action Planning	Action plan reviewed, published and distributed to staff. Details of changes made are logged.	SMT and Delivery team	Annually
Consultation	Service users are to be consulted via feedback forms in a range of formats, and via focus groups	Delivery team	At end of every course
	Non-service users are consulted about what they would like to do, via surveys and Advice sessions with groups	Delivery team	
Promotion of accessible services	Services available to be added to website listings	Delivery team	Constantly
Monitoring of workforce	Monitoring forms for all applicants kept on file, and checked to ensure all groups are included	Youth manager	Annually
	Figures benchmarked against those of the city as a whole	Youth manager	Annually
Employment Codes of practice	Codes of practice from CRE, EOC and DRC are followed in all policies	Youth manager	
Complaints System	Ways to comment and complain publicised on websites, learner handbook, and via tutors.	Delivery team and tutors	Constantly
	Complaints procedure reviewed	SMT	Annually
	Complaints received are reviewed annually	Delivery team	Annually
Racial Harassment Policy	To be implemented, and reviewed annually	SMT	Annually

## **Equality, diversity and inclusion statement 2024**

Equality, diversity, and inclusion are at the heart of CCDTs values. As a voluntary sector body, we are committed to meeting the duties set out under the Equality Act 2010, which outlines the legal framework for creating a fair and more equal society. This vital piece of legislation protects people's rights in law and keeps all of us from unfair treatment and discrimination. But as an organisation whose sole purpose is to give a strong and powerful voice to people who often go unheard, the Equality Act serves as the minimum for our work. We believe that everyone should have a fair and equal experience. We recognise that some people and communities face compounding layers of disadvantage and discrimination, and we will ensure that our approach reflects the multiple inequalities that people face. We will work to prevent and challenge discrimination and inequality in all of our functions.

### **Our approach**

Our approach to these issues is more important than ever, as we seek to understand and mitigate the different and disproportionate impact that COVID-19 is having on people with protected characteristics under the Equality Act. We will design our programmes of work to meet the diverse needs of the population we represent and challenge inequality in the following ways. We will:

- Work to ensure our evidence base more accurately represents the diversity of the communities we serve.
- Use our evidence base to ensure that, where possible, every piece of policy work we undertake is designed to deliver real-world impact that addresses issues relating to equality, diversity, and inclusion.
- Involve and consult with individuals and groups with specific experience of issues relating to equalities, diversity, and inclusion as necessary. Develop our services through local and national partnerships where appropriate.
- Conduct appropriate and proportionate equality impact assessments.

The Equality Act sets out a proactive duty on us to:

- Eliminate discrimination, harassment, and victimisation
- Advance equality of opportunity
- Foster good relations

At CCDT we need to understand the effect of our policies and practices on equality and consider their impact on the whole population. Under the Equality Act, the relevant protected characteristics are:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race (including ethnic or national origins, colour or nationality)
- Religion or belief (or no belief)
- Gender (men, women, other)
- Sexual orientation
- Marriage and civil partnership (only concerning eliminating discrimination)
- Caring responsibilities

We understand that some people fall into multiple categories and therefore may well experience intersecting levels of inequality. In addition, we also recognise that socioeconomic factors have an extensive impact on people's experience of health and social care, and we will consider this in how we approach our programmes of work.

We will ensure that the promotion of equality, diversity, and inclusion is reflected in all our policy development and influencing work. It will play a key role in helping set out policy influencing priorities for the year. Each individual proactive and reactive project will always be explored through an equalities lens to ensure that we deliver real world impact in showing how excluded communities experience. We will:

- Analyse our evidence to identify issues within these topics that may disproportionately affect people with protected characteristics and create or perpetuate inequality.
- Work with partners to understand the evidence we gather in more detail and create a strong voice together to extend and enhance our influence.
- Our reactive work will also have an equality, diversity, and inclusion focus. We will continually encourage the health and care system to have this focus. We will horizon scan to identify issues or proposed changes to the health and social care system that may adversely affect communities we don't always hear from.
- When we identify changes that are likely to affect specific groups, we will promote CCDT as a potential avenue for helping the system engage with these groups. Where we see decisions being made across the sector which we think will create new or compound existing inequality we will not be afraid to offer public challenge.

We will embed equality, diversity, and inclusion across all our workstreams, which includes: •  
Volunteering

- Business support

- Providing a quality service
- Delivering with impact
- Effective collaboration
- Learning and development

We will share examples of best practice to facilitate learning from high-quality work on equality, diversity, and inclusion that is being delivered by CCDT.

As an employer we will foster a workforce culture that promotes and embraces equality, diversity, and inclusion, and we recognise that each individual adds value to a team. We know our strength comes from building on and valuing our people's differences as well as their similarities. By being inclusive we encourage all staff from many different backgrounds to be themselves and apply their own unique perspectives. We recognise that we need to draw on talent from all sections of the population to be innovative, creative and effective. We are committed to supporting our workforce to develop and deliver good quality work that meets the needs of everyone.

We will ensure that all our communications take account of equality, diversity, and inclusion obligations. Through our approach to communication, we will publicly challenge inequality and discrimination, and ensure that we raise awareness of CCDT among a broad range of communities. We will provide a platform for seldom heard voices to influence how health and social care services are delivered. We will ensure that our communications engage and support people from every section of the community. 6. Governance Our Committee will ensure that it is representative of the society it represents. The Committee will scrutinise our work against equality and diversity objectives to ensure that we meet our commitments.



## Chichester Community Development Trust Feedback Policy: January 2024

### Introduction

CCDT welcomes all feedback in order to continually improve its offering and meet its remit of developing and supporting the local community.

### **1. Complaints**

A complaint is defined as an expression of dissatisfaction about the standard of service, actions, or lack of action by CCDT or its staff, affecting an individual or a group of people. We aim to put things right straight away if possible, but recognise there may be cases requiring fuller investigation. All such complaints are treated as formal complaints and recorded in writing and investigated by the relevant management structure.

A summary of the complaints procedure is as follows:

- Formal complaints must be made either by letter, by email to the CCDT offices. CCDT staff may help with the lodging of the complaint if required.
- Written acknowledgement is sent within two working days of receipt of a formal complaint, including the name of the member of staff dealing with the investigation.
- The investigating manager will respond within 28 days of receipt of the complaint. If the complaint has not been fully resolved, the response will include the likely timescale for resolving the problem.
- If the complainant is not satisfied, they are advised to write to the Trust Director who will carry out a review and respond within fourteen (14) days.
- If the complainant is still not satisfied they should write to the Board, who will carry out a further review and if necessary present the complaint at the next Board Meeting. The Chairman will send a progress report within fourteen (14) days, including if necessary the date of the Board Meeting which will consider the complaint.

When a complaint is received it is recorded and kept at the front of the Complaints file. The register is also used to monitor progress of the complaint. All paperwork connected with the complaint is filed on the Complaints file.

### **2. Other Feedback**

Other feedback exercises are conducted from time to time in order to review CCDT effectiveness. These may take the form of face-to-face discussion or a more formal exercise. Oral comments received are discussed during team meetings and used to consider improvements which may be required.

Formal feedback questionnaires are designed in relation to specific projects in a way which aids data evaluation. Where possible the results of such exercises will be evaluated using spreadsheet analysis and graphical representation.

A report is made to the Board of Trustees at least once a year outlining improvements made or proposed as a result of feedback received from stakeholders,

## Chichester Community Development Trust Financial & Purchasing Controls and Policy: November 2024

### Introduction

Financial records will be kept so that Chichester Community Development Trust can:

- a) Meet its legal and other obligations, e.g. Charities Act 2006, Companies act 2006, Inland Revenue, Customs & Excise and common law.
- b) Enable the Directors to be in proper financial control of Chichester Community Development Trust.
- c) Enable Chichester Community Development Trust to meet the contractual obligations and requirements of funders.

Chichester Community Development Trust will keep proper books of accounts using a basic computerised system, which will include:

- a) A cashbook analysing all the transactions in Chichester Community Development Trust's bank account(s).
- b) A petty cash book if cash payments are being made.
- c) Inland Revenue deduction cards P11 and Schedule D numbers for freelance workers when required.

### **1. Financial Parameters**

The financial year will end on 31<sup>st</sup> March each year.

Accounts will be drawn up after each financial year within three months of the end of the year and will be approved by the Directors, audited and then presented to the AGM.

Prior to the start of each financial year, the Directors will approve a budgeted income and expenditure account and a projected cash flow for the following year, along with a projected statement of assets/ liabilities at the end of the budget year. This will be amended or updated if any new funding becomes available during any financial year, budgets allocated to specific new projects/initiatives.

A report comparing actual income and expenditure with the budget for the organisation as well as any specific project budgets will be prepared every quarter and presented to the Directors within a month of the quarter end. A cash flow and a statement of assets/liabilities compared against budget will be prepared and presented to the Directors every quarter. A projection for the year-end position will be produced compared against budget.

The AGM will appoint an appropriately qualified auditor/examiner to audit/examine the accounts for presentation to the next AGM.

## **2. Banking**

- 2.1 Chichester Community Development Trust will bank with Cooperative Bank plc with on-line banking facility: accounts will be held in the name of Chichester Community Development Trust. The following accounts will be maintained:
- Chichester Community Development Trust current account.
  - Chichester Community Development Trust deposit account.
- 2.2 Additional high interest accounts may be opened from time to time with an appropriate bank or building society.
- 2.3 The bank mandates will always be approved and minuted by the Directors, as will all the changes to it.
- 2.3 The charity will require the bank to provide statements every month and these will be reconciled with the cash book at least every month and the treasurer will spot check that this reconciliation has been done at least twice a year, signing the cash book accordingly.
- 2.4 The charity will not use any other bank or financial institution or use overdraft facilities or loan without the agreement of the Directors.

## **3. Receipts (income)**

- 3.1 All monies received will be recorded promptly in the cash analysis book and banked without delay (note this includes sundry receipts such as payment for telephone calls, photocopying etc.). Chichester Community Development Trust will maintain files of documentation to back this up.

## **4. Payments (expenditure)**

- 4.1 The aim is to ensure that all expenditure is on the charity's business and is properly authorised and that this can be demonstrated. The latest approved budget provides the cheque signatories with authority to spend up to the budgeted expenditure, not beyond it.
- 4.2 The Treasurer will be responsible for holding the cheque book (unused and partly used cheque books) which should be kept under lock and key.
- 4.3 Blank cheques will NEVER be signed.
- 4.4 The relevant payee's name will always be inserted on the cheque before signature and the cheque stub will always be properly completed.

- 4.5 No cheques should be signed without original documentation (see below).
- 4.6 No electronic payments can be made, although monies can be moved between accounts on-line.

## **5. Purchasing Procedures and Payment Documentation**

- 5.1 Every item ordered or purchased for the Trust (that is not out of petty cash) will be written added onto the Xero finance system giving the supplier name and address, item description, quantity, unit cost, total spend.
- 5.2 The Chief Officer can sign purchase orders for any items up to the value of £2,500 as long as the sums have been previously approved within the budget.

The Chair can sign purchase orders for any item up to £2,500 as long as the item is contained and approved within the annual budget.

If the item has NOT already been approved within the budget and is over £1,000, the purchase order should be agreed by the chair as a chairs decision or by the board.

- 5.3 Every payment out of Chichester Community Development Trust's bank accounts will be evidenced by an original invoice (never against a supplier's statement or final demand). That original invoice will be retained by Chichester Community Development Trust and electronically filed.
- 5.5 Wages and Salaries. There will be a clear trail to show the authority and reason for EVERY such payment; e.g. asking for payment to an employee, the Inland Revenue, etc. All employees will be paid within the PAYE, National Insurance regulations.
- 5.7 No petty cash system will operate and no cash payments taken
- 5.8 Expenses/allowances. Chichester Community Development Trust will, if asked, reimburse expenditure paid for personally by staff, providing:
- Fares are evidenced by tickets.
  - Other expenditure is evidenced by original receipts.
  - Car mileage is based on Inland Revenue scales.
  - No cheque signatory signs for the payment of expenses to themselves.

## **6. Payments and Cash Cards**

- 6.1 Each payment will be signed by at least two authorised signatures
- 6.2 A payment must not be signed by the person to whom it is payable.
- 6.3 Hole in the wall type cash cards will not be used and if issued by the bank they will be immediately cut in half.

## **7. Other Undertakings**

- 7.1 Chichester Community Development Trust does not accept liability for any financial commitment unless properly authorised. Any orders placed or undertakings given, the financial consequences of which are, prima facie, likely to exceed in total £2500, must be EITHER agreed through the Annual Business Plan OR authorised and minuted by the Directors. In exceptional circumstances such undertakings can be made with the Chairperson's approval who will then provide full details to the next meeting of the Directors.
- 7.2 All fundraising and grant applications undertaken on behalf of the organisation will be done in the name of Chichester Community Development Trust with the prior approval of the Directors or in urgent situations the approval of the Chairperson when full details will be provided to the next trustee's meeting.

## **8. Confidentiality**

- 8.1 The confidentiality of employees financial circumstances will be respected at all times.
- 8.2 The Directors, volunteers and employees will at all times act in the best interest of the organisation and if they experience a conflict of interest, they will not divulge sensitive information.

## **9. Other rules**

- 9.1 The Directors will consider the level of reserves that is prudent for Chichester Community Development Trust to have at its first meeting after the AGM. Consideration will be given to redundancy liabilities, lease agreements and any other significant factors that should be taken into account were the Trust to close.
- 9.2 Chichester Community Development Trust will adhere to good practice in relation to its finances at all times, e.g. when relevant it will set up and maintain a fixed asset register stating the date of purchase, cost, serial numbers and normal location. Additionally Chichester Community Development Trust will maintain a property record of items of significant value, with an appropriate record of their use.

## Chichester Community Development Trust Health & Safety Policy: January 2024

### Introduction

This policy applies throughout CCDT and all associated buildings, being a requirement of the Health & Safety at Work Act 1974. It is the primary Health & Safety document within CCDT and is supported by additional specific policies and risk assessments undertaken as required.

### **1. Safety Statement**

CCDT policy is to provide and maintain safe and healthy working conditions, equipment and systems of work for all staff and volunteers, and to provide such information, training and supervision as they need for this purpose. CCDT also accepts a responsibility for the health and safety of other people who may be affected by its activities.

### **2. Roles and Responsibilities**

Overall and final responsibility for health and safety in the Trust is that of the CCDT Board and Trustees.

The Trust Director is responsible for the overall operation of the health and safety policy, together with policy implementation and review, investigating serious accidents, and notifying appropriate accidents to the health and safety inspector.

All staff and volunteers have the responsibility to co-operate with supervisors and managers to achieve a healthy and safe workplace and to take reasonable care of themselves and others. Deficiencies or defects in current arrangements should be reported to the Trust Director.

Whenever a staff member or volunteer notices a potential or actual health and safety problem, which they are not able to put right, they must tell the appropriate person, indicated above, straightaway.

Consultation between management and employees is provided through:

- staff meetings
- team meetings
- staff supervision
- appraisals

### **3. Training**

Information about this Health & Safety Policy, including the location of first aid boxes and accident books, will be provided to all staff during their induction programme. Any updates or changes to these arrangements will be discussed at staff meetings and supervision sessions.

Staff will be offered further health and safety training if appropriate.

#### **4. Accidents**

All accidents should be reported to the Trust Director and recorded in the accident book kept in the office or premises where the accident occurred, or where the employee or volunteer is based.

#### **5. Fire Safety**

CCDT operates a no smoking policy in its offices.

All staff will be advised of the fire action procedure, location of fire alarms and fire exits at their induction. Fire evacuation drills are normally practiced at least annually. .

Fire Officers, where appointed, have a duty to identify that escape routes are clear at all times, but if employees or volunteers notice any deficiencies they should tell the Trust Director in the first instance. If the deficiency remains the Trust Director should be told. In the event of an evacuation fire officers will ensure their floor is clear of staff and visitors, without endangering their own escape.

In the event of an evacuation, visitors' book or staff diaries may be used to assist with a roll call.

#### **6. Housekeeping and Premises**

As far as practicable, all staff will monitor that:

- safe stacking and storage methods are followed
- standards of cleanliness and hygiene are maintained in kitchen areas
- waste is disposed of safely in appropriate containers
- corridors and exits are kept clear and free of obstruction
- equipment in their work area is in good working order and will take such steps as may be necessary to ensure that any non-compliance is resolved.

Employees will ensure that they co-operate with all reasonable requests from their line manager to ensure the above standards are maintained.

#### **7. Electrical Equipment**

Employees should visually inspect equipment they use and report any defects or faults to the Trust Director. Equipment with known faults must not be used. Trailing wires should be covered and fastened down.

Portable electrical appliances should be placed in a safe position and should be inspected annually.

#### **8. Display Screen Equipment**

CCDT offers to all display screen users a free eye test with a designated optician on request, where this is not related to a regular optician's appointment.



Line managers will involve their employees in assessing their workstation and ensuring it meets their individual needs.

#### **9. Environmental Issues**

CCDT complies with all legal environmental issues and encourages staff to recycle waste material where such schemes exist in the workplace.

# CHICHESTER COMMUNITY DEVELOPMENT TRUST



Let's make it happen

## Chichester Community Development Trust

### IT Security Policy: January 2024

#### Introduction

Chichester Community Development Policy provides employees with access to various computer facilities for work and communication purposes. In order to ensure compliance with all applicable laws in relation to data protection, information security and compliance monitoring, CCDT has adopted an IT communications and monitoring policy which should be read in conjunction with its Data Protection policy.

#### **1. Breach of the Policy**

Breach of this policy will be regarded as a disciplinary offence and will be dealt with under the CCDTs formal disciplinary process.

Anyone who considers that there has been a breach of this policy in relation to personal information about them held by the CCDT should raise the matter via the CCDT's formal grievance procedure.

#### **2. IT Communications and Monitoring**

CCDT makes use of IT systems, for data storage, communications and as a source of information. We have adopted an IT, communications and monitoring policy in order to:

- prevent inappropriate use of computer equipment (such as extended personal use or for accessing and circulating pornographic, racist, sexist or defamatory material);
- protect confidential, personal or commercially sensitive data;
- prevent the introduction of viruses;
- prevent the use of unlicensed software;
- monitor the use of computer facilities to ensure compliance with internal policies and rules and to detect abuse.

#### **3. Policy Remit**

CCDT provides you with access to various computing, telephone and postage facilities ("the Facilities") to allow you to undertake the responsibilities of your position and to improve internal and external communication.

This policy sets out CCDT's position on your use of the facilities and it includes:

Your responsibilities and

- your responsibilities and potential liability when using the Facilities
- the monitoring policies adopted by the CCDT; and
- guidance on how to use the Facilities.

This policy has been created to:

- ensure compliance with all applicable laws relating to data protection, information security and compliance monitoring
- protect the CCDT from the risk of financial loss, loss of reputation or libel; and
- ensure that the Facilities are not used so as to cause harm or damage to any person or organisation.

This policy applies to the use of:

- local, inter-office, national and international, private or public networks and all systems and services accessed through those networks;
- desktop, portable and mobile computers and applications;
- social media; and
- electronic mail and messaging services.

#### **4. Use of Computer Systems**

Subject to anything to the contrary in this policy the facilities must be used for CCDT business purposes only.

In order to maintain the confidentiality of information held on or transferred via CCDT's facilities, security measures are in place and must be followed at all times. A log-on ID and password is required for computer access. This should be changed regularly and must be kept secure and not shared with anyone.

You are expressly prohibited from using the facilities for the sending, receiving, printing or otherwise disseminating information which is the confidential information of CCDT or its users other than in the normal and proper course of carrying out your duties for the Trust.

In order to ensure proper use of CCDT computers, you must adhere to the following practices:

- anti-virus software must be kept running at all times;
- media storage such as USB drives, CD's or portable hard drives will not be permitted unless they have been provided by the IT supplier;
- obvious passwords such as birthdays and spouse names, etc, must be avoided (the most secure passwords are random combinations of letters and numbers);
- all files must be stored on the network drive which is backed up regularly to avoid loss of information; and
- always log off the network before leaving your computer for long periods of time or overnight.

#### **5. Software**

10. Software piracy could expose both CCDT and the user to allegations of intellectual property infringement. The Trust is committed to following the terms of all software licences to which it is a contracting party. This means, in particular, that:

- software must not be installed onto any CCDT computers unless this has been approved in advance by our IT Contractors. They will be responsible for establishing that the

appropriate licence has been obtained, that the software is virus free and compatible with the computer Facilities; and

- software should not be removed from any computer nor should it be copied or loaded on to any computer without prior consent.

## **6. Laptops, PC's, Tablets and Smart Phones**

Laptop computers, PC's, tablets and smart phones belonging to the Trust along with related equipment and software are subject to all of the Trust's policies and guidelines governing non-portable computers and software). All laptops, PC's and tablets will be encrypted.

When using such equipment:

- you are responsible for all equipment and software until you return it. It must be kept secure at all times
- you are the only person authorised to use the equipment and software issued to you
- if you discover any mechanical, electronic, or software defects or malfunctions, you should immediately bring such defects or malfunctions to the Trust Director's attention;
- upon the request of the Trust Director at any time, for any reason, you will immediately return any equipment and all software to the CCDT office
- if you are using your own laptop or PC to connect with CCDT equipment or to transfer data between the laptop or PC and any other CCDT computer you must ensure that you have obtained prior consent, comply with instructions and ensure that any data downloaded or uploaded is free from viruses.

## **7. Email (internal or external use)**

All staff will be issued a CCDT email account which should be used when transacting on behalf of the PC.

Internet email is not a secure medium of communication; it can be intercepted and read. Do not use it to say anything you would not wish to be made public. If you are sending confidential information by email this should be sent using password protected attachments.

Email should be treated as any other documentation. If you would normally retain a certain document in hard copy you should retain the email.

Do not forward email messages unless the original sender is aware that the message may be forwarded. If you would not have forwarded a copy of a paper memo with the same information do not forward the email.

Your email inbox should be checked on a regular basis.

As with many other records, email may be subject to discovery in litigation. Like all communications, you should not say anything that might appear inappropriate or that might be misinterpreted by a reader.

Viewing, displaying, storing (including data held in RAM or cache) or disseminating materials (including text and images) that could be considered to be obscene, racist, sexist, or otherwise offensive may constitute harassment and such use of the facilities is strictly prohibited. The legal

focus in a harassment case is the impact of the allegedly harassing material on the person viewing it, not how the material is viewed by the person sending or displaying it.

Staff will be required to surrender their email account and all of its contents if they decide to leave the Trust.

## **8. Internet**

Posting information on the internet, whether on a newsgroup, via a chat room or via email is no different from publishing information in the newspaper. Staff should confirm the posting with the Clerk prior to issue.

Using the internet for the purpose of trading or carrying out any business activity other than CCDDT business is strictly prohibited.

For the avoidance of doubt the matters set out above include use of wireless facilities.

## **9. Monitoring Policy**

The policy of the Trust is that we may monitor your use of the facilities.

CCDDT recognises the importance of an individual's privacy but needs to balance this against the requirement to protect others and preserve the integrity and functionality of the facilities.

CCDDT may from time to time monitor the facilities. Principal reasons for this are to:

- detect any harassment or inappropriate behaviour by employees, ensuring compliance with contracts of employment and relevant policies including the health and safety, ethical and sex discrimination policies
- ensure compliance of this policy
- detect and enforce the integrity of the facilities and any sensitive or confidential information belonging to or under the control of the Trust
- ensure compliance by users of the facilities with all applicable laws (including data protection), regulations and guidelines published and in force from time to time
- monitor and protect the wellbeing of employees.

CCDDT may adopt at any time a number of methods to monitor use of the facilities. These may include:

- recording and logging of internal, inter-office and external telephone calls made or received by employees using its telephone network (including where possible mobile telephones). Such recording may include details of length, date and content
- recording and logging the activities by individual users of the facilities. This may include opening emails and their attachments, monitoring Internet usage including time spent on the internet and websites visited
- physical inspections of individual users computers, software and telephone messaging services
- periodic monitoring of the facilities through third party software including real time inspections
- physical inspection of an individual's post

- archiving of any information obtained from the above including emails, telephone call logs and Internet downloads.

CCDT will not (unless required by law):

- allow third parties to monitor the facilities (with the exception of our appointed IT supplier)
- disclose information obtained by such monitoring of the facilities to third parties unless the law permits

The Trust may be prohibited by law from notifying employees using the facilities of a disclosure to third parties.

## **10. Social Media**

CCDT has a separate Social Media Policy.

## **11. General Guidance**

Never leave any equipment or data (including client files, laptops, computer equipment and mobile phones) unattended on public transport or in an unattended vehicle.

When using email or sending any form of written correspondence:

- be careful what you write; never forget that email and written correspondence are not the same as conversation: they are a written record and can be duplicated at will
- use normal capitalisation and punctuation; typing a message all in capital letters is the equivalent of shouting at the reader
- check your grammar and spelling
- do not forget that emails and other forms of correspondence should maintain the high standards expected by the CCDT.

Observation of this policy is mandatory. Misuse of the facilities will be treated as gross misconduct and may lead to dismissal.

## Chichester Community Development Trust Lone Worker Policy: January 2024

### 1.0 INTRODUCTION

This document explains how the organisation will protect their staff and volunteers, as far as is reasonably practical from the risks of lone working. This policy and the procedure forms part of CCDT's overall health and safety policy.

### 2.0 POLICY

The policy shall be drawn to the attention of all existing staff, new members of staff and those staff who may potentially be required to work alone. All new and existing members of staff who are, or potentially may be, a lone worker shall receive information, instruction and relevant training in respect of all identified hazards, the risks involved and all associated risks e.g. violence and aggression and vehicles/driving.

- It is the responsibility of all line managers to coordinate the risk assessment for lone workers in consultation with the Trust Director
- Any staff member who is lone working shall be provided with a communication link to the office base. This link will normally be a mobile phone
- Any staff member who does, or is likely to be required to carry out lone working shall be given the opportunity by their line manager to be provided with a personal alarm
- Lone workers shall follow all instructions contained in the procedures below
- It is the responsibility of the line manager of lone workers to reassess risks regularly; reporting the time and dates monitoring was carried out, any changes and all reassessments to the Trust Director
- It is the responsibility of the line manager to ensure that their workers do not suffer from stress as a consequence of lone working
- CCDT's policy is that staff and volunteers should not have to work alone unsupported for extended periods and that they are properly supervised and have the opportunity to interact with other members of staff and volunteers. However, it recognises that many staff and volunteers are required to work by themselves for significant periods of time without close or direct supervision in the community, in isolated work areas and out of hours; therefore in these situations we will ensure adequate support is provided

### **3.0 PURPOSE**

CCDT is committed to providing a safe working environment, as far as reasonably practical, that meets the needs of its staff and volunteers. Consideration shall therefore be given to the health and safety implications in respect of lone working.

### **4.0 DEFINITION OF LONE WORKING/ WORKING ALONE**

Individuals are alone at work when they are on their own; they cannot be seen or heard by another worker; cannot expect a visit from another worker or member of the public for some time; and/or where assistance is not readily available when needed. Therefore, lone workers are those who work by themselves without close or direct supervision.

They include staff or volunteers in fixed establishments where:

- Only one person works on the premises
- One person works separately from others
- One person works outside normal working hours

They also include mobile lone workers working away from their base and when their work may be carried out in:

- Someone's home other than their own
- Premises not leased or managed by CCDT

It is likely that most staff and volunteers may spend a limited amount of time working alone. It is when a member of staff feels themselves to be at potential risk.

### **5.0 AIMS OF THE POLICY**

The aim of the policy is to:

- Increase staff and volunteer awareness of safety issues relating to lone working
- Ensure that the risks of lone working are assessed in a systematic ongoing and continuing way, and that safe systems and methods of work are put in place to reduce the risk as far as is reasonably practical
- Ensure that appropriate training is available to all staff and volunteers that equips them to recognise risk and provides practical advice on safety when working alone
- Encourage full reporting and recording of all adverse incidents relating to lone working; and reduce the number of incidents and injuries related to lone working

### **6.0 RISK ASSESSMENT**

Risk assessments must be carried out for and by all staff and volunteers whose working practice makes them vulnerable. This includes staff and volunteers who are site-based but work in isolation, as well as mobile staff and volunteers whose work takes them out into the community. Recommendations should be made to eliminate or to reduce the risk as far as possible. In all cases there is a fundamental question about the need for lone working. Managers must decide whether systems can be adopted to avoid workers carrying out tasks on their own. If this is not possible the working practice of the individual plus other contributory factors must be risk assessed. Where staff or volunteers work alone in buildings or carry out domiciliary visits, managers should complete the relevant lone worker's checklist. These



checklists can show if existing control measures are adequate and, if not, what else can reduce the risks.

## **7.0 PROCEDURE**

Staff will receive information, instruction and supervision in respect of the hazards and risks associated with lone working. All staff are to take relevant, sensible precautionary measures whilst lone working. If a member of staff feels that they are putting themselves at risk through lone working, they should discuss the situation with their line manager. Further efforts by the line manager shall be made to eliminate or reduce hazards starting with a process of reassessment of the task.

## **8.0 HAZARDS OF LONE WORKING**

People who work alone face the same hazards in their daily work as other workers. However, for lone workers there can be additional risks.

- Risk assessments for site-based lone workers must include:
  - Safe entry and exit
  - Location e.g.; remoteness, transport, parking
  - Risk of violence e.g.; history of violence from the public or the client
  - Safety of equipment for individual use
  - Channels of communication in an emergency
  - Site security
  - Security arrangements i.e. alarm systems and response to personal alarms
  - Level and adequacy of on/off site supervision
- Risk assessments for mobile lone workers must include:
  - Arrangements for domiciliary visits, including consideration of alternatives
  - Travelling between appointments
  - Reporting and recording arrangements
  - Communication and traceability
  - Personal safety/security Following completion of the risk assessment, consideration must be given to any appropriate action that is required

## **9.0 OFFICE BASED STAFF – OFFICE STAFF**

Whenever staff work within the office they should ensure there are other members of the CCDT team in the building.

If a member of staff is meeting a client on their own in the office, they should ensure the client does not sit between them and the door and that they have clear access to leave via the door. It is also advisable to tell someone that they are meeting with a client on their own.

- If there are any concerns about a client, they should be seen in a large office with someone else present
- If a member of staff is seeing clients in the office when no-one else is around, check someone else is in the building and make sure the office door is left open
- An attack alarm will be available in each office
- Staff must record all details of any visits on their outlook calendars. This must include time of departure, estimated time of return, the address to be visited including the contact phone number. It is also good practice to tell a colleague where they are going

- If a member of staff is visiting before coming into the office in the morning they must report in by telephone to their manager before attending the visit and make a note of their visit on their calendar
- If there is a change to a member of staff's day, they must ring in to the office and inform the manager of expected arrival
- If a member of staff has not arrived by the stated time, a phone call will be made to contact that member of staff

#### **10.0 STAFF WORKING OUT OF OFFICE HOURS (ALL STAFF)**

All staff working evenings or weekends shall – whether in the office or on site:

Must make a note of their visit on their calendar with the following information before attending the visit:

- Name
  - Destination
  - Expected time of arrival on site
  - Contact telephone/mobile phone number/s
- All staff will be provided with an alarm when making site visits
- On leaving the site, telephone/text their designated associate to say when they have arrived home/next destination safely.

All delegated associates must be made aware of the employees' line manager's number. In the event that the employee does not telephone their designated associate after an outreach the associate must contact the line manager. The line manager will endeavour to contact the employee however if there is no response the police shall be informed. All staff to ensure they use main roads to and from all destinations. This will then allow the police to retrace the steps of the member of staff to eliminate a road traffic accident as the cause of activating any emergency procedures.

#### **11.0 GENERAL SUPPORT FOR STAFF AND VOLUNTEERS**

All new staff and volunteers to CCDT should receive an induction, including reference to the lone worker policy.

Staff and volunteers working for the Trust should know that their safety comes first. They should be aware of how to deal with situations in which they feel at risk or unsafe. They should also be able to recognise how their own actions could influence or even trigger an aggressive response.

Managers must therefore ensure that all lone workers' training needs are assessed and that they receive appropriate training.

## Chichester Community Development Trust Monitoring and Evaluation Policy: January 2024

### Introduction

CCDT will monitor its work to ensure that it is meeting the outcomes set out in the Strategic Business Plan. Monitoring will be shared by the whole CCDT team and the management team will collate the information into reports for the Board and Trustees.

### **1. Outcomes**

Chichester Community Development Trust (CCDT) trades for social purpose, and was established to deliver the following outcomes social and environmental benefits:

- To own, manage and maintain land and community buildings
- To develop and encourage, foster and promote the physical, economic and social development and regeneration of the area
- To protect or conserve the environment
- To create training/employment opportunities
- To advance education, training and retraining
- To promote public safety and the prevention of crime
- To develop the capacity and skills of the members of the community

The business objectives for 2019/20 include:

- Open the Voluntary Sector Hub at the Water Tower
- Submit a stage two HLF application for Heritage at the Heart of Graylingwell Project
- Complete asset transfer process for pavilion building at lower Graylingwell
- Own, maintain and manage community land and buildings
- Plan and deliver community development activities including annual events, youth programmes, engagement events and social activities
- Promote and support training, education and local business activities through the delivery of new projects and existing programmes
- Encourage a low carbon lifestyle amongst residents
- Deliver community development activities from our community buildings

### **2. Responsibilities**

The monitoring of the outcomes will be shared amongst the CCDT staff team, and evaluation and reporting will be the responsibility of the Trust Director.

### **3. Review**

CCDT Monitoring and Evaluation procedures will be regularly reviewed to make sure they are effective and relevant to the current business aims. All data collected must be used in reporting and evaluating CCDT's work and outcomes, and managers must consider any data that is not being used and how this can either be utilised or discontinued.

CCDT's Data Protection Policy must be followed at all times.

## Chichester Community Development Trust Networking and Partnerships Policy: January 2024

### Introduction

The Trust Director will confirm networking and partnership established relationships. CCDT always seeks to expand these relationships but all new contacts should be approved by the Trust Director.

### **1. Networking Events**

CCDT hosts regular community networking meetings and coffee mornings, to which residents and other community groups are invited. An employee of CCDT local to the area where the event is taking place is invited to attend.

CCDT will occasionally arrange for a speaker to give a presentation on a subject judged to be useful to those attending. The Trust Director or relevant team member gives an update on current and planned CCDT activities.

Members are also given the opportunity to update those present on their activities.

Feedback is welcomed throughout the event either at the time or as a follow up appointment.

### **2. Information and Advice**

What's On is circulated to a wide number of residents and community groups throughout the wider Chichester community.

Information on activities, projects and other subjects of interest to is circulated regularly, either by email or hard copy or through social media. Any information held for communication purposes adheres to our Data Protection Policy.

Other more specific information may be given in response to enquiries. This is normally recorded as part of the referral process. Where important meetings take place involving decisions or follow up actions, a note of the key points is retained on the file.

### **3. Principles: Be Professional, Respectful and Responsible**

CCDT is pleased to encourage and participate in partnership working. The Trust Director can provide further information as required.

## **Prevent Duty Policy January 2024**

Chichester Community Development Trust recognise and promote fundamental British values. This is the key to building resilience to radicalisation on every level, allowing every young people from diverse and ethnic backgrounds to reach their full potential within their sports team. This has been recognised at every level with the prevent policy. From 1st July 2015, all schools and childcare providers were required, under section 26 of the Counter terrorism and Security Act 2015, to have due regard to the prevention of people from being drawn into terrorism.

This legalisation is primarily aimed at the education system. However, all agencies having contact with young people must adhere to the prospect of preventing radicalisation. CCDT is responsible for the welfare of all children and young people that partake in the sport. CCDT adopt the policy strategy laid down by the law to ensure the safeguarding of all. The Prevent Duty In dealing with the Prevent Duty it is important to recognise that the dealings that a rugby club official will be different to those of a child care professional, however, there are areas that will overlap and these are reproduced here: 'The general risks affecting children and young people may vary from area to area, and according to their age. Schools and childcare providers are in an important position to identify risks within a given local context. It is important that schools and childcare providers understand these risks so that they can respond in an appropriate and proportionate way.' 'There is no single way of identifying an individual who is likely to be susceptible to a terrorist ideology.' 'As with managing other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. Children at risk of radicalisation may display different signs or seek to hide their views.' 'The Prevent duty does not require teachers or childcare providers to carry out unnecessary intrusion into family life but as with any other safeguarding risk, they must take action when they observe behaviour of concern.' There may not be any one sign which will lead you to the belief a young person is being radicalised. The general risks affecting children and young people may vary from area to area, and according to their age. There is no single way of identifying an individual who is likely to be susceptible to a terrorist ideology. As with managing other safeguarding risks, club personnel should be alert to changes in children's behaviour that could indicate that they may be in need of help or protection. In these cases, the general safeguarding principles apply to the 'Keeping Safe' from radicalisation as per the general safeguarding relevant statutory guidance and CCDT policy. Any concerns of a young person being at risk demonstrated by behaviour on or off the pitch, views posted online or concerns from family or friends should be referred to the safeguarding lead. Concern does not require any person to carry out any form of investigation but will ultimately be referred to the relevant professional body.

## Chichester Community Development Trust Privacy Notice: January 2024

### Introduction

CCDT takes the protection of your data seriously. Our aim is to provide a personalised and valuable service whilst safeguarding our users' privacy. Collecting some personal information is necessary if we are to satisfy the expectations and requirements of our users and we have set out below what we will do with your personal information.

### **1. Visitors to the Website**

When someone visits this website we use a third party service, Google Analytics, to collect standard internet log information and details of visitor behaviour patterns. We do this to find out things such as the number of visitors to the various parts of the site. This information is only processed in a way which does not identify anyone. If we do want to collect personally identifiable information through our website, we will be up front about this. We will make it clear when we collect personal information and will explain what we intend to do with it.

### **2. Security and Performance**

We use a third party service to help maintain the security and performance of our website. To deliver this service it processes the IP addresses of visitors to the site.

### **3. Links to Other Websites**

We may provide links to other websites. This privacy notice does not cover the links within this site linking to other websites. We encourage you to read the privacy statements on the other websites you visit.

### **4. Use of Cookies**

This site uses cookies to maintain and keep track of users' preferences and authenticated sessions, to identify technical issues, user trends and effectiveness of campaigns, and to monitor and improve the overall performance.

### **5. Disclosure of Personal Information**

We collect contact details via the web site for the purposes of providing a service to existing and potential customers. We will never disclose personal details without the consent of the owner. Details are only held for as long as is necessary to fulfil the service request.

### **6. Access to Personal Information**

Individuals can find out if we hold any personal information by making a 'subject access request' under the General Data Protection Regulations. If we do hold information about you we will:

- give you a description of it;
- tell you why we are holding it;
- tell you who it could be disclosed to; and

- let you have a copy of the information in an intelligible form.

Please make any such request in writing via our email address [info@chichestercdt.org.uk](mailto:info@chichestercdt.org.uk) or by post to:

Chichester Community Development Trust  
The Water Tower  
Blomfield Drive  
Graylingwell Park  
Chichester PO19 6BZ

If at any time you feel that we have failed to meet these standards then please either contact us or make a complaint direct to the Information Commissioner using their website [www.ico.org.uk/concerns](http://www.ico.org.uk/concerns).



## Chichester Community Development Trust Privacy Notice - Staff: January 2024

### Introduction

We are Chichester Community Development Trust (CCDT). For the purposes of Data Protection legislation, CCDT is the Data Controller. This means it is in charge of personal data about you.

The postal address of CCDT is:

The Water Tower  
Blomfield Drive  
Graylingwell Park  
Chichester  
West Sussex PO19 6BZ

The Data Protection Officer for CCDT is the Trust Director.

### **1. How We Use Your Information**

We process personal data relating to those we employ to work at, or otherwise engage to work at CCDT. This is for employment purposes to assist in the running of the Trust and / or to enable individuals to be paid.

This personal data includes identifiers such as names and national insurance numbers, employment contracts and remuneration details, qualifications and absence information. It will also include sensitive personal data such as ethnic group, medical information and trade union membership (if you choose to supply this information to us).

During the recruitment process we may receive information about you from a previous employer which you have previously attended. You will know about this because you will have supplied us with the relevant contact details.

Collecting and using your information in this way is lawful because:

- The processing is necessary for the performance of your employment contract
- The processing is necessary for the performance of a legal obligation to which CCDT is subject, for example our legal duty to comply with safeguarding
- The processing is necessary for the performance of our function which is a function in the public interest.

When we collect personal information on our forms, we will make it clear whether there is a legal requirement for you to provide it, and whether there is a legal requirement on CCDT to

collect it. If there is no legal requirement then we will explain why we need it and what the consequences are if it is not provided.

## **2. How We Share Your Information With Third Parties**

We will not share information about you with third parties without your consent unless the law allows us to.

We disclose details about you including national insurance number and absence information to our payroll provider to enable you to be paid.

We disclose details any personal information shared about you to our HR provider for the purposes of HR management if this becomes necessary.

We share your identity and pay information with HMRC in conjunction with your legal obligation to pay income tax and make national insurance contributions.

We share your details with our pension provider in order to make sure that you pay the correct amount and maintain your entitlement to a pension upon your retirement.

Our disclosures to third parties are lawful because one of the following reasons applies:

- The disclosure is necessary for the performance of your employment contract
- The disclosure is necessary for the performance of our function which is a function in the public interest.

## **3. How Long We Keep Your Personal Information**

We only keep your information for as long as we need it or for as long as we are required by law to keep it.

## **4. Your Rights**

You have the right to:

- Ask for access to your personal information
- Ask for rectification of the information we hold about you
- Ask for the erasure of information about you
- Ask for our processing of your personal information to be restricted
- Data portability
- Object to us processing your information.

If you want to use your rights, for example, by requesting a copy of the information which we hold about you, please contact the Trust Director.

More information about your rights is available in our data protection policy.

If at any time you are not happy with how we are processing your personal information then you may raise the issue with the Trust Director and if you are not happy with the outcome you

may raise a complaint with the Information Commissioner's Office:

Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Tel: 0303 123 1113 (local rate) or 01625 545 745 if you prefer to use a national rate number.

## **Quality Assurance Policy**

### **January 2024**

#### **1.0 Introduction**

This policy outlines Chichester Community Development Trust approach to ensuring continuing quality improvement. The purpose of this policy is to enable such continuous improvement through process of self-evaluation and quality improvement planning.

Chichester Community Development Trust is dedicated to continuous improvement by providing opportunities and services that meet or exceed the needs of our customers, employers and our community by:

- Establishing and ensuring that programmes and services Chichester Community Development Trust are designed and implemented with a commitment to meet customer requirements.
- Operating and adhering to a formal Quality Management System, based on and compliant with the requirements of the Common Inspection Framework and Industry Standards (Matrix, liP, The Information Standard).
- Ensuring staff are highly qualified through ongoing recruitment development and training.
- Implementing quality management systems, which demonstrate that all employees have a commitment to the quality of our service.
- Ensuring that each member of the Chichester Community Development Trust team at **all** levels are responsible for the quality of their own work.
- Ensuring that standards are maintained and improved by active monitoring, reviewing and taking appropriate action for all activities.
- Ensuring that measurable and realistic quality objectives are established annually, communicated to all employees and evaluated, reviewed and revised (as needed) on an ongoing basis.

#### **2.0 Scope**

- 2.1 This policy and associated procedures/cycles will involve all employees and key stakeholders/partners. The management of the process will be through the existing organisational structure. Delivery managers, team leaders and line managers will initiate procedures within their teams and collate and monitor self-assessment reports and action plans.
- 2.2 Quality improvement will be founded on a process of regular self-evaluation by teams and individual employees who are responsible for delivering courses/ IAG/ Mentoring and other services. Chichester Community Development Trust will seek the views and perceptions of customers, employers and other stakeholders for whom the services exist.

- 2.3 Wherever appropriate, this policy will promote the identification of quality standards and performance indicators that are consistent with the Framework for Excellence and against which performance can be measured, evaluated and so improved.
- 2.4 It will support the processes of peer review both internally and with external partners in the sector including training and private sector providers.

### **3. Responsibility for implementation**

- 3.1 **All** employees (managers, team leaders, teachers, support staff, trainers, assessors, mentors, administrative, HR, Finance etc) are responsible for the implementation of this policy.
- 3.2 **All** employees/volunteers contribute to the quality culture of Chichester Community Development Trust.
- 3.3 It is the responsibility of the Quality Assurance Group (QAG) to ensure review of the policy. It is the responsibility of all members of the QAG to engage positively in that review and ensure implementation.

### **4. Policy Statements**

- 4.1 To encourage continuous improvement in the quality of teaching and learning programmes, thereby making learning an enjoyable activity, increasing learner retention, participation, attendance and the achievement of individual and group learning plans.
- 4.2 To develop and sustain a range of accredited and non-accredited programmes that provide opportunities for progression and which provide learners with experiences and qualifications suited to their learning aims.
- 4.3 To ensure rigorous and consistent assessment procedures, which meet the standards of external awarding bodies and validating agencies.
- 4.4 To provide information which supports strategic planning, meets employer requirements for qualified and skilled staff and underpins achievement of entry requirements for Further/ Higher Education and employment.
- 4.5 To monitor and evaluate the procedure for the delivery of Information, Advice and Guidance (IAG) at entry and throughout their Chichester Community Development Trust Journey both on the Chichester Community Development Trust site and/or in the workplace
- 4.6 To establish standards and monitor procedures for providing a supportive and accessible range of services to customers.
- 4.7 To monitor and evaluate the standard of services responsive to the needs of employers.
- 4.8 To establish and monitor service standards for the effective delivery of Chichester Community Development Trust Back to Work training programmes.

## 5. **Employees**

- 5.1 To review regularly the performance, training and developmental needs of all employees through the operation of the Chichester Community Development Trust appraisal scheme
- 5.2 Through Chichester Community Development Trust training plan and Continuing Professional Development, to train and develop individuals upon appointment and throughout their employment.
- 5.3 To monitor and evaluate the effectiveness of such training and development against the Chichester Community Development Trust strategic goals and self assessment processes.

## 6. **Methodology**

- 6.1 All employees and customers will be made aware of the quality standards within Chichester Community Development Trust.
- 6.2 The process of quality control requires staff teams to meet on a regular basis to review their work, set standards and monitor customer perceptions and achievements.
- 6.3 Quality control will be carried out against agreed criteria, which will include performance indicators.
- 6.4 Review will be supported by analysis of customer, employer and stakeholder views and gathered via questionnaires, surveys, focus groups and at review meetings.
- 6.5 The outcome of these processes will provide information:
  - To inform the process of self assessment
  - To set targets and action plans for improvement at all levels
  - To highlight issues that need consideration by Chichester Community Development Trust
  - That supports the Chichester Community Development Trust quality, business and strategic planning cycle
  - That supports Chichester Community Development Trust activity to achieve the funding targets and other external and internal targets
  - Feedback on actions resulting from the review process will be communicated to employees via both team and/or individual meetings
- 6.6 The outcomes and action plans which result from the process will form the basis of the annual Chichester Community Development Trust Self Assessment Report and Quality Improvement Plan.

## Chichester Community Development Trust Redundancy Policy: January 2024

### 1.0 INTRODUCTION

The Government define redundancy as a form of dismissal from your job. It happens when employers need to reduce their workforce. If you're being made redundant, you might be eligible for certain rights, including redundancy pay, a notice period, a consultation with your employer and/ or the option to move into a different job.

You must be selected for redundancy in a fair way, for example because of your level of experience or capability to do the job.

You cannot be selected because of age, gender, or if you're disabled or pregnant. If you are, this could be classed as an unfair dismissal.

### 3.0 CCDT

CCDT will adhere to statutory redundancy pay in line with those issued by the Government at the relevant time.

In addition to CCDT will wherever possible provide help in terms of finding suitable alternative employment and allow reasonable time off for job search and interviews.

The Trust Director in association with the Trustees will use a fair and objective way of selecting posts for redundancy; but may utilise any of the following:

- last in, first out (employees with the shortest length of service are selected first)
- asking for volunteers (self-selection)
- disciplinary records
- staff appraisal markings, skills, qualifications and experience

If a particular position no longer exists, for example you have been employed solely for a specific project, you may be the only employee eligible for redundancy.

# RISK ASSESSMENT

Name: Work Experience Students

Venue: Water Tower

Date: April 2024

Written by: Nina Boden

What are the hazards?	Who might be harmed and how?	What are you already doing?	Do you need to do anything else to manage this risk?	Action by whom?	Action by when?	Done
Safe access to venue for all participants  Stairs in the water tower	Work Experience Students	Main and toilet doors are wide enough for wheel chair access.  Stairs: Students reminded to take care. No chairs are positioned at the top of stairs.  Mezanine Balcony: Students reminded not to lean over or throw items from the balcony.	Point out these hazards to new comers	CCDT Staff responsible for induction of work experience Students	Ongoing	
Tripping hazards	Work Experience Students	Stairs kept clear of trip hazards at both the top and the bottom	Continue current practise	CCDT Staff		
Risk of injury / accident / medical incident	Work Experience Students	Medical needs of student disclosed and any actions required (i.e. allergy and administering of epipen) If necessary, action plan written. Ensure we have emergency contact details of school / parents.  First Aid trained member of staff on site. All staff know location of first aid kit. Accidents reported in accident book. All volunteers / staff know location of nearest A&E hospital	Liaise with school / college on student medical needs and emergency contact.  Regularly check contents of first aid kit.	CCDT Staff linked to school arrangements		
Fire	Work Experience Students Staff	Fire Marshall training in place for key members of staff	Brief work experience students on fire procedures.	CCDT Staff responsible for induction of work experience Students		
Safeguarding	Work Experience Students Staff	Relevant staff are DBS checked Ensure all members of team know who DSL is and procedure for reporting concerns about work experience students. DSL knows who to contact at the school with any safeguarding concerns.	Liaise with school / college to ensure we are made aware of any safeguarding issues that could effect students' experience with us.	CCDT Staff responsible for induction of work experience Students  DSL		



## Chichester Community Development Trust Safe Space Policy: July 2024

### Introduction

Our spaces at Chichester Community Development Trust are for all individuals. As an organisation, we are inclusive of trans, non-binary, and gender fluid individuals, people of colour, older people, and disabled people. To make sure that we can enforce this inclusivity, we have several ground rules that must be followed in our spaces to ensure that everyone feels welcome. If you feel unwelcome or unsafe at any point of any of our events, or witness any behaviour that may be deemed problematic, please speak to the facilitator of that event.

*Photos/videos* - Under our confidentiality policy, it is important that no one records or takes any pictures during our sessions, unless you are a volunteer or member of staff who has explicit consent from the clients to do so.

*Oppressive behavior* - We have a zero-tolerance policy for racism, sexism, classism, homophobia, transphobia, biphobia, fatphobia, ableism, ageism, or discrimination based on immigration status, ethnicity, religion, cultural and/or spiritual beliefs, or any other kind of oppressive language or behaviour. Please give people a choice of whether they want to interact or not, do not force people to talk if they don't want to. Do not tell people off if they need to talk or move when other people are seated quietly. Give people space so that they can move at their own pace.

*Language* - Please avoid using complicated language, acronyms, and in-jokes. Try to be clear in the language you use. Please try to give explanations or brief descriptions of people, events, and theories – don't assume that others have the same knowledge as you in these areas, no matter how well known you think something is.

*Content/Trigger Warnings* - Please always give a pre-warning if you are going to discuss something that others may find upsetting such as mental illness or domestic abuse.

*Pronouns* - A pronoun is how you refer to someone, for example they or she. Please ask people what their pronouns are if you are meeting them for the first time. If someone does not want to give their pronouns, please be respectful of this. Make sure to use the pronouns someone has told you to use to refer to themselves, even if you are unfamiliar with the words. If you make a mistake and refer to someone using the wrong pronoun, apologise and move on.

*Assumptions* - Please do not make assumptions about someone's identity and be mindful of the ways in which people from minority groups may be impacted in different ways by the issues discussed at sessions. Be mindful of any position and privileges you may bring regarding e.g. your class, race, gender identity, ability, or age. Try not to make generalising statements e.g. 'all women love Y'.

*Sexual Harassment* - We have a zero-tolerance policy for sexual harassment. You must gain consent before engaging in physical contact with someone, and this includes hugs. We also will not tolerate any wolf whistling, catcalling, inappropriate sexual comments or sexually based jokes, songs, or taunts.

*Taking Up Space* - It is difficult for members of marginalised groups or minority groups to participate in discussions. Please do not talk over people and try your best to gauge whether it is appropriate for you to speak on certain topics. Give everyone a chance to speak.

# **THE CHICHESTER BIKE PROJECT**

## **Safeguarding Policy: March 2024**

### **1.0 INTRODUCTION**

THE CHICHESTER BIKE PROJECT (THE CHICHESTER BIKE PROJECT) acknowledges the duty of care to safeguard and promote the welfare of children and adults at risk and is committed to ensuring safeguarding practices reflect statutory responsibilities, government guidance and compliance with best practice. The information contained within this document must be read in conjunction with the Safeguarding Policy – Children & Adults at Risk. This procedure applies to all staff (paid and unpaid) and includes the Board of Trustees, volunteers and sessional workers, agency staff, students or anyone working on behalf of THE CHICHESTER BIKE PROJECT. Failure to comply with the Safeguarding Policy and associated procedures will be addressed without delay and may ultimately result in dismissal/exclusion from the organisation. The Safeguarding Officer for THE CHICHESTER BIKE PROJECT is Liz Woodsell, Director.

### **2.0 SAFER RECRUITMENT**

All staff must agree to having a police check, currently a DBS enhanced disclosure, carried out every three years and to provide two referees one of whom should have known them on a professional basis (one of whom has experience of their work or contact with children or adults at risk). In addition, all staff will be subject to a careful and rigorous selection and vetting process covering the following requirements:

- Providing the following safeguarding statement in recruitment adverts or application details –‘recruitment is done in line with safe recruitment practices.’
- Job or role descriptions for all roles involving contact with children and / or adults at risk will contain reference to safeguarding responsibilities.
- Completion of an application form and checking the person’s identity by their birth certificate or passport, something with a photograph if possible.
- An interview by at least two people.
- Identifying reasons for gaps in employment or inconsistencies.
- Carrying out police checks and checks with the Disclosure & Barring Service.
- Allowing no unsupervised access to children and adults at risk until this has been completed.
- Advice is sought about recruiting someone with a criminal record.
- A supervised probationary period for new people to the project and a comprehensive induction period that includes GHP’s safeguarding policy and associated procedures.

It is THE CHICHESTER BIKE PROJECT ’s policy that no-one shall work with children and young people who:

- Has been convicted of or has received a formal police caution concerning an offence against children as listed in the First Schedule of the Children and Young People’s Act 1933; or

- Has been convicted of or has received a formal police caution concerning sexual offences against children or young people.
- Is registered on the DBS children's barred list or the DBS adults' barred list.

### **3.0 WHAT TO DO IF A CHILD OR ADULT AT RISK DISCLOSES HARM TO YOU**

If a child or an adult at risk chooses to disclose to you that they have been abused follow these guidelines:

#### **Receive**

- Listen to the child or adult. Allow them time to speak and do not interrupt nor make suggestions;
- If you are shocked by what they are saying, try not to show it;
- Take what they say seriously;
- Accept what the child or adult says;
- DO NOT ask for (other) information;
- Do not interrogate or question other than to clarify your understanding. If the matter is to be investigated further it will be so done by trained professionals;
- Do not ask them to keep repeating an answer. Apart from anything else, they may begin to think that you don't believe them.

#### **Reassure**

- Stay Calm and reassure the child or adult that they have done the right thing in talking to you. No matter how difficult it is to listen to them - think of how hard it must be to say it. Some things are very difficult to talk about, you've been chosen because they feel they can talk to you. If you show anger, disgust, disbelief then they may stop talking for fear of upsetting you further or feel that your negative feelings are being directed towards them;
- Be honest with the child or adult so do not make promises you can't keep;
- Do not promise confidentiality – you have a duty to refer the child or adult who is at risk;
- Acknowledge how hard it must have been for the child or adult to tell you what happened.

#### **React**

- React to the child or adult only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate them for details;
- Explain what you have to do next and to whom you have to talk;
- Explain and if possible seek agreement that you will have to discuss the situation with someone else and will do so on a 'need to know' basis.

#### **Record**

- Make some brief notes at the time and write them up more fully as soon as possible;
- Take care to record timing, setting and personnel as well as what was said;
- Be objective in your recording – include statements and observable things rather than your interpretations or assumptions.

## **Act Now**

- Discuss the matter with your Supervisor/Line Manager (see Appendix One - Allegations and Report Management Flowchart) and inform the THE CHICHESTER BIKE PROJECT Safeguarding Officer.

## **4.0 SUPPORT FOR THOSE WHO REPORT ABUSE**

Any staff making a complaint or allegation or expressing concern should be reassured that:

- they will be taken seriously; and
- their comments will usually be treated confidentially, but their concerns may be shared with the appropriate authorities if they or others are at significant risk.

## **5.0 CODE OF CONDUCT FOR STAFF AND VOLUNTEERS**

Staff are required to abide by this Code of Conduct to safeguard children and adults at risk.

- DO treat all children and young people with the respect they deserve;
- DO make sure any suspicions or allegations are recorded and reported in accordance with the reporting and allegation management flowchart;
- DO NOT get personally involved – leave it to the professionals.

## **6.0 PHYSICAL CONTACT**

Physical contact must be kept to a minimum when working with children or adults at risk. Staff should ensure that the touch and physical contact they use is not exploitative and is not open to misunderstanding.

Children and adults at risk should be encouraged to say what they find acceptable and unacceptable in the way they are approached by adults or their colleagues in the group.

### **Do not:**

- reach over from behind to demonstrate any art activity but demonstrate from the front. If you need to attract someone's attention touch them somewhere between their elbow and shoulder.
- subject children or adults at risk to constant criticism, bullying or unrealistic pressure;
- engage in rough physical games or horse play;
- use touch in an intrusive or sexual manner;
- make sexually suggestive comments, even in jest;
- do things of a personal nature that children and adults at risk can do for themselves; and
- restrain a child using physical force.

## **7.0 WORKING WITH AN INDIVIDUAL CHILD / ADULT AT RISK**

- You should plan never to be alone in a building, car or a closed room with a child / adult at risk.

- In exceptional circumstances where a member of staff may be alone with a child for a short period, ensure that other staff are aware of the situation and that they support this action and that it takes place in clear view of the rest of the group e.g. designated office or room with a clear glass window. The door must always be left open.

## **8.0 RUNNING ACTIVITIES**

- Any group of children should be supervised by at least two responsible adults on all activities. For some groups this will mean parents staying with children they have brought to the group activity until named leaders for that activity have arrived.
- It is important to know who the leaders are on all activities.
- Children under five attending workshops must always be accompanied by a parent or guardian.
- Hirers of the community buildings managed by THE CHICHESTER BIKE PROJECT should have their own safeguarding policy, as stated in our Booking Terms and Conditions.

## **9.0 COMPUTER BASED ACTIVITIES**

- Always supervise the use of your computer, e-mail and internet by a child or adult at risk.
- Place the computer where everyone can use it and see it, rather than out of sight in the corner of a room or in another room.
- Ensure that the child or adult at risk does not give out personal details over the internet e.g. surname, address, phone number or e-mail address and never arrange a face to face meeting with anyone they come into contact with on the internet.
- Encourage the child or adult at risk to report anything they come across which they feel is abusive or offensive.
- Explore the use of filters which block access to certain sites (although remember these are unlikely to be fool proof and cannot replace supervision).

## **10.0 WORKSHOPS**

When bookings are taken for workshops with children and adults at risk emergency contact details must be taken including phone number and name of the parent, guardian, partner, family member or carer. Any health or allergy issues should also be requested when booking workshops from the parent, guardian, partner, family member or carer.

## **11.0 PRIVACY & PHOTOGRAPHS**

- Consent must be obtained when taking photographs of participants in THE CHICHESTER BIKE PROJECT activities. If the participant is a child their parent/carers permission is needed. In all instances please use the photographic consent form.
- Consent must be sought from the child's parent / guardian to publish photographs.

## **12.0 RESOURCES & EQUIPMENT**

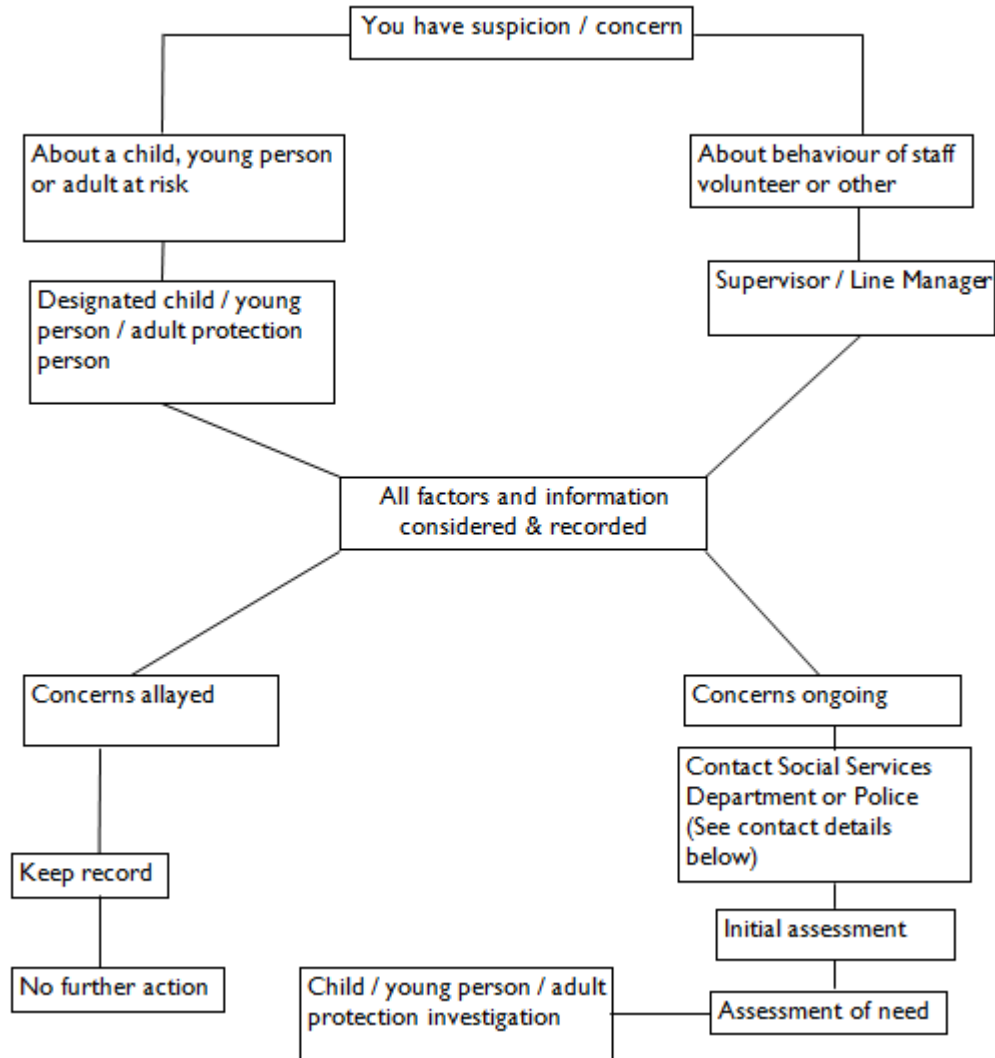
- Minimise the prospect of injury by checking all equipment and playing surfaces
- Do not employ excessive or inappropriate training methods; use only age appropriate language, media products and activities in working with children and adults at risk. Sexually explicit materials are never appropriate.
- Under no circumstances give medication, alcohol, tobacco, alcohol or other drugs to children or adults at risk.
- Do not lend or borrow personal money or property to or from a child or adult at risk.
- Do not accept responsibility for any valuables on behalf of a child or adult at risk.
- Do not give or receive personal gifts from a child or adult at risk. However gifts may be provided by THE CHICHESTER BIKE PROJECT as part of a planned activity.

## **13.0 OUTSIDE OF WORK**

- Adults/leaders should know the safe arrangements for children to get home after the activity.
- Adults should be discouraged from meeting individually with children outside work related activities and should not take a child or young person to their home.
- If a child or young person is not collected from an activity you should not give lifts home in your car.
- Personal relationships between a member of staff and a child or adult at risk who participate in THE CHICHESTER BIKE PROJECT 's activities are prohibited. This includes relationships through social networking sites.
- It is also prohibited to enter into a personal relationship with a child or adult at risk who has been a participant in any THE CHICHESTER BIKE PROJECT 's activities over the past 12 months.

## APPENDIX ONE - REPORTING & ALLEGATION MANAGEMENT

It is not the responsibility of THE CHICHESTER BIKE PROJECT 's staff to determine whether abuse is actually taking place however there is a responsibility to act on any concerns through contact with the appropriate authorities. THE CHICHESTER BIKE PROJECT assures all staff that it will fully support and protect anyone, who in good faith reports his or her concerns.





## **APPENDIX TWO - CONTACT NUMBERS**

Who To Contact If Concerned About An Adult Or Child:

### **Safeguarding For Adults At Risk In West Sussex**

If you are concerned or have a concern about someone else about harm or abuse and think the danger is immediate:

**Phone the police now on 999**

If it is less urgent, you can either:

**Phone Sussex Police on 101**

Or contact:

**West Sussex Adult Social Care Services** in one of the following ways:

**Phone: 01243 642555** (Mon –Fri 0900 – 1700 hours)

**Phone: 01903 694422** (Out of office hours)

.....

### **Safeguarding For Children At Risk In West Sussex**

MASH, Multi Agency Safeguarding Hub, is the single point of contact for all safeguarding concerns regarding children and young people in West Sussex. You can contact via phone, email or complete an online form on the West Sussex County Council here:

<https://www.westsussex.gov.uk/education-children-and-families/keeping-children-safe/request-support-or-raise-a-concern-about-a-child/>

Email: [wschildrenservices@westsussex.gov.uk](mailto:wschildrenservices@westsussex.gov.uk)

Phone: 01403 229 900

Concerns about inappropriate behaviour of an adult working or volunteering with children are handled by the Local Authority Designated Officer (LADO). Report any such concerns using the LADO referral form on the West Sussex Safeguarding Partnership website. If you want to speak to LADO for advice, contact the team:

Email: [lado@westsussex.gov.uk](mailto:lado@westsussex.gov.uk)

Phone: 0330 022 26450

## Chichester Community Development Trust Social Media Policy: January 2024

### Introduction

This policy sets out the principles that CCDT staff are expected to follow when using social media.

The internet provides a range of social media tools that allow users to interact with one another, for example Facebook, Twitter, Blogs and websites. It is your responsibility to ensure that the age policies regarding access to social networking are adhered to.

Staff members must be conscious at all times of the need to keep their personal and professional lives separate

#### **1. Scope of this Policy**

This policy applies to all CCDT staff.

This policy covers personal use of social media as well as the use of social media for official CCDT purposes, including sites hosted and maintained on behalf of CCDT.

This policy applies to personal web space such as social networking sites (for example Facebook, MySpace), blogs, micro blogs such as Twitter, chat rooms, forums, podcasts, open access online encyclopedias such as Wikipedia, social bookmarking sites such as del.icio.us and content sharing sites such as flickr and YouTube. The internet is a fast moving technology and it is impossible to cover all circumstances of emerging media – the principles set out in this policy must be followed irrespective of the medium.

#### **2. Legal Framework**

CCDT is committed to ensuring that all staff members provide a confidential service that meets the highest standards. All individuals working on behalf of CCDT are bound by a legal duty of confidence and other laws to protect the confidential information they have access to during the course of their work. Disclosure of confidential information on social media is likely to be a breach of a number of laws and professional codes of conduct, including but not limited to:

- The Human Rights Act 1998
- Common law duty of confidentiality
- The Data Protection Act 1998

Confidential information includes, but it is not limited to:

- Person-identifiable information, e.g. volunteer and employee records protected by the Data Protection Act 1998

- Information divulged in the expectation of confidentiality
- Any commercially sensitive information such as information relating to commercial proposals or current negotiations
- Politically sensitive information

Staff members should also be aware that other laws relating to libel, defamation, harassment and copyright may apply to information posted on social media, including:

- Defamation Acts 2013
- Protection from Harassment Act 2014
- Criminal Justice and Public Order Act 1994
- Malicious Communications Act 1998
- Communications Act 2003
- Copyright, Designs and Patents Act 1988

CCDT could be held vicariously responsible for acts of their employees in the course of their employment. For example, staff members who harass co-workers online or who engage in cyber bullying or discrimination on the grounds of race, sex, disability, etc. or who defame a third party while at work may render CCDT liable to the injured party.

### **3. Principles: Be Professional, Respectful and Responsible**

You must be conscious at all times of the need to keep your personal and professional lives separate. You should not put yourself in a position where there is a conflict between your work for CCDT and your personal interests.

You must not engage in activities involving social media that might bring CCDT into disrepute.

You must not represent your personal views as those of CCDT.

You must not discuss personal information about volunteers, CCDT staff and other professionals you may interact with as part of your job on social media.

You must not use social media and the internet in any way to attack, insult, abuse or defame staff, their family members, colleagues, professionals, other organisations or CCDT.

You must be accurate, fair and transparent when creating or altering online sources of information on behalf of CCDT.

### **4. Personal Use of Social Media**

Information staff members have access to as part of their employment, including personal information about volunteers and their family members, must not be discussed on their personal web space.

Permission must be given for photographs, videos or any other types of image of volunteers to be put on social networking sites.

CCDT email addresses and other official contact details must not be used for setting up personal social media accounts or to communicate through such media.

Caution is advised when inviting work colleagues to be 'friends' in personal social networking sites. Social networking sites blur the line between work and personal lives and it may be difficult to maintain professional relationships or it might be just too embarrassing if too much personal information is known in the work place.

Staff members are strongly advised to ensure that they set the privacy levels of their personal sites as strictly as they can and to opt out of public listings on social networking sites to protect their own privacy. Staff members should keep their passwords confidential, change them often and be careful about what is posted online; it is not safe to reveal home addresses, telephone numbers and other personal information. It is a good idea to use a separate email address just for social networking so that other contact details are not given away

#### **5. Using Social Media on Behalf of CCDT**

Staff should avoid communicating with each other or volunteers via instant messaging as unlike phone records these conversations are not stored and cannot be traced.

Official CCDT sites must be created only according to the requirements specified by the Trust Director and in accordance with Appendix A. Sites created must not breach the terms and conditions of social media service providers, particularly with regard to minimum age requirements.

Staff members must at all times act in the best interests of CCDT when creating, participating in or contributing to social media sites.

#### **6. Monitoring of Internet Use**

CCDT monitors usage of its internet and email services without prior notification or authorisation from users.

Users of CCDT email and internet services should have no expectation of privacy in anything they create, store, send or receive using CCDT's IT system.

#### **7. Breaches of the Policy**

Any breach of this policy may lead to disciplinary action being taken against the staff member/s involved in line with CCDT Disciplinary Policy and Procedure.

A breach of this policy leading to breaches of confidentiality, or defamation or damage to the reputation of CCDT or any illegal acts or acts that render CCDT liable to third parties may result in disciplinary or dismissal.

## **Appendix A: Requirements of creating social media sites on behalf of CCDT**

### **CREATION OF SITES**

Staff members participating in social media for work purposes must decide whether the overall investment is likely to be worthwhile for achieving the proposed outcome.

Staff members must consider how much time and effort they are willing to commit to the proposed site. They should be aware that maintaining a site is not a one-off task, but involves a considerable time commitment.

The Trust Director must take overall responsibility to ensure that enough resources are provided to keep the site refreshed and relevant. It is important that enough staff members are trained and are able to maintain and moderate a site in case of staff absences or turnover.

There must be a careful exit strategy and a clear plan from the outset about how long the site will last. It must not be neglected, creating a potential risk to the Trust's brand and image.

Consideration must also be given to how the success of the site will be evaluated to assess whether the site has achieved the proposed objectives.

### **APPROVAL FOR CREATION OF OR PARTICIPATION IN WEBSITE**

CCDT social media sites can be created only by or on behalf of the Trust. Site administrators and moderators must be CCDT employees or other authorised people.

Approval for creation of sites for work purposes, whether hosted by the Trust or hosted by a third party such as a social networking site, must be obtained from the Trust Director.

Approval for participating, on behalf of CCDT, on sites created by third parties must be obtained from the Trust Director.

Content contributed to own or third-party hosted sites must be discussed with and approved by the Trust Director.

Be aware that the content or site may attract media attention. All media enquiries must be forwarded to the Trust Director immediately. Staff must not communicate with the media without the advice or approval of the Trust Director.

### **CONTENT OF WEBSITE**

Information provided must be worthwhile and accurate; remember what is published on the site will reflect on CCDT's image, reputation and services.

Stay within the law and be aware that privacy, data protection, libel, defamation, harassment and copyright law may apply to the content of social media.

Staff members must respect their audience and be sensitive in the tone of language used and when discussing topics that others may find controversial or objectionable.

Permission must be sought from the relevant people before citing or referencing the work of service providers, partners or other agencies.

CCDT hosted sites must always include the logo to ensure transparency and confidence in the site. The logo should, where possible, link back to the relevant page on the CCDT website.

Staff members participating in CCDT hosted or other approved sites must identify who they are.

Personal opinions should not be expressed on official sites.

#### CONTRIBUTORS AND MODERATION OF CONTENT

Careful consideration must be given to the level of engagement of contributors – for example whether users will be able to add their own text or comments or upload images.

The content and postings in CCDT hosted sites must be moderated. Moderation is the responsibility of the team that sets up or initiates the site.

The team must designate at least two approved Administrators whose role it is to review and moderate the content, including not posting or removing of comments which breach the Terms of Use and House Rules. It is important that there are enough approved moderators to provide cover during leave and absences so that the site continues to be moderated.

For third-party hosted sites such as social networking sites used for work purposes, the responsibility for protection and intervention lies first with the host site itself. However, different sites may have different models of intervention and it is ultimately the responsibility of the staff members creating the site to plan for and implement additional intervention. Behaviour likely to cause extreme offence, for example racist or homophobic insults, or likely to put a young person or adult at risk of harm must never be tolerated. Such comments must never be posted and will be removed immediately and appropriate authorities, for example the Police, informed in the case of illegal content or behaviour.

Any proposal to use social media to advertise for contributors to sites must be approved by CCDT's Trust Director.

## Chichester Community Development Trust Supervision Policy: January 2024

### 1.0 INTRODUCTION

CCDT is committed to providing all staff with high quality support and supervision. This is an essential part of performance management within the organisation. All staff will receive one to one supervision on a regular basis as well as a probationary review and an annual appraisal

### 2.0 DEFINITION OF SUPERVISION

As defined in this policy, supervision is a regular series of meetings between a staff member and their line manager for the purpose of discussing work related issues.

### 3.0 PURPOSE OF SUPERVISION

- to provide an opportunity for the staff member to discuss their work with their line manager
- to plan work and agree goals, targets and courses of action
- to provide the staff member with support, guidance and direction on difficult issues
- to identify development and training needs and agree ways in which these can be met
- to discuss the staff member's progress in meeting agreed goals and targets
- to discuss shortfalls in performance, corrective action and consequences
- to exchange and share information about work and organisational issues
- to enhance the working relationship between the staff member and their line manager
- to enable the line manager to support the staff member's career development

### 4.0 FREQUENCY OF SUPERVISION

Supervision meetings should normally take place monthly with the expectation that there will be a minimum of 10 meetings per year. In certain circumstances, there may be a need for meetings to be more frequent. For example if:

- The staff member is still in their probationary period
- The staff member's performance is giving cause for concern

### 5.0 THE ENVIRONMENT FOR SUPERVISION

Supervision should take place in a comfortable setting within the workplace that is private and not liable to interruption.

Only the staff member and the line manager should attend the meeting unless both decide it would be appropriate for a third person to be present. Typically more formal action requiring a third party would be the subject of a separate meeting.

## **6.0 PREPARATION AND DURATION OF SUPERVISION**

The staff member and the line manager should prepare in advance for the meeting, with issues they wish to place on the agenda being notified beforehand, or agreed at the start of the meeting.

Both should check that actions from previous supervision sessions have been carried out.

## **7.0 CONTENT OF SUPERVISION**

The agenda for supervision should be agreed at the start of each meeting.

The content of the agenda should always include the following:

An opportunity for the staff member to talk about how they are feeling about their job. Although supervision focuses on work issues, the staff member should also have the opportunity to discuss any personal issues that may be affecting their performance at work.

- Feedback to the staff member on their performance and attitude at work. This should include positive feedback on work that has been done well and constructive criticism if there is a need for improvement.
- The opportunity for the staff member to give constructive feedback to the line manager and to comment on working relationships.
- A review of progress against agreed goals/ targets and actions from previous meetings
- Discussion on the staff member's development and training needs and how these can be met.
- Monitoring of annual leave plans, Time Off In Lieu and sick leave.

Additional items may be added to the agenda by agreement.

## **8.0 LINKS TO PROBATIONARY REVIEWS AND APPRAISAL**

Where supervision is used effectively, a staff member will never be presented with any issues at a probationary review or appraisal that have not been raised in supervision.

The line manager should ensure that probationary reviews or appraisals provide a summary of supervision issues that have been discussed.

The forms used for probationary reviews and annual appraisals also describe the processes involved.

## **9.0 RECORDING OF SUPERVISION MEETINGS**

The line manager may make notes during the meeting and will ensure that any agreed actions or decisions are presented to the staff member. Training needs should also be recorded.



## **10.0 RETENTION OF SUPERVISION NOTES AND CONFIDENTIALITY**

The staff member and the line manager may keep copies of supervision notes.

Supervision notes for individuals who have left the organisation should be retained by the line manager for six months after the leaving date, and then shredded or deleted from electronic systems.

The line manager must make it clear that records of these meetings are open to review by senior colleagues and that issues raised in supervision cannot always be kept confidential if they relate to work. Some problems cannot be resolved without discussion with others in the organisation.

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## THE CHICHESTER BIKE PROJECT

### Environmental Policy 2024

Sustainable development is the simple idea of ensuring a better quality of life for everyone, both now and for generations to come. THE CHICHESTER BIKE PROJECT is a community development trusts and a fundamental aspect is the notion of stewardship. The idea that we are responsible for our environment whilst we live on the Earth is important and the community that are within our developments are already familiar with the idea of responsible land management. Local Councils are (indirectly) key partners of the THE CHICHESTER BIKE PROJECT and responsible for the delivery of national strategies at a local level. A key strategic objective of THE CHICHESTER BIKE PROJECT is: "Encourage a greener future for its communities." As an important organisation within the local communities, THE CHICHESTER BIKE PROJECT has a role delivering the sustainability message to their communities. It is essential that the actions of the THE CHICHESTER BIKE PROJECT; help to transform the future lives of its communities through brighter employment prospects, play a part in transforming all of our futures through responsible environmental management and support sustainable development within the community.

THE CHICHESTER BIKE PROJECT recognises that the nature and scale of its activities impacts on the environment and that it has a responsibility to manage its activities in a way that reduces negative environmental impacts and increases positive impacts. THE CHICHESTER BIKE PROJECT is, therefore, committed to carbon reduction and improving its environmental performance through an environmental management system. The implementation of this policy will enable it to do so.

The following areas of environmental management fall within the scope of this policy.

- Use of energy
- Use of water
- Use of resources
- Emissions from transport
- Waste
- Contamination of land
- Loss of biodiversity

To meet our environmental responsibilities, and to reduce our carbon footprint, THE CHICHESTER BIKE PROJECT will engage in the following actions:

- Comply with all relevant legal requirements and other management standards and guidelines
- Develop, implement and maintain an environmental management system, aiming to meet the requirements for certification to the ISO14001 standard (or current iteration)
- Set targets in relation to key indicators and actions
- Optimise energy efficiency to reduce emissions of greenhouse gases
- Optimise water use efficiency
- Be efficient in the use of resources
- Reduce the negative environmental impacts of travel

- Increase reuse and recycling, and reduce waste
- Prevent pollution and contamination of land and water and continually improve our environmental performance
- Manage and improve the biodiversity value of the campus
- Give appropriate consideration to environmental criteria when purchasing products and services and where possible select contractors and suppliers who can demonstrate environmental management and performance in line with this policy
- Raise awareness of appropriate environmental issues amongst members of the business and provide relevant training
- Use internal audits to develop an initial baseline, monitor compliance with the environmental management system reporting to the THE CHICHESTER BIKE PROJECT directors relation to targets set
- Increase general awareness of environmental responsibilities amongst students and staff through internal communications, education for sustainable development and staff development.

THE CHICHESTER BIKE PROJECT s work with and within the community contributes to the local Council's objectives. Within the organisation itself THE CHICHESTER BIKE PROJECT aims to develop its strong, community ethos. Within the local community THE CHICHESTER BIKE PROJECT will position itself as an exemplar organisation and work with local stakeholders towards a sustainable community. Within the region it aims to be a proactive and responsive stakeholder in promoting sustainable development. In order to meet these aims we will:

- Communicate effectively with our local community stakeholders, including employers, to increase the involvement of THE CHICHESTER BIKE PROJECT contributing to the sustainable community.
- As a stakeholder THE CHICHESTER BIKE PROJECT will maintain and develop appropriate local and regional partnerships and networks - • Encourage residents to organise or contribute to local community events and to undertake volunteering as part of a community commitment to sustainable development • Support local markets, ethical and fair trade and local initiatives within the community where appropriate.
- Increase access to facilities for local community agencies and groups to make the best use of resources.
- Use external benchmarking, for example the LSIS Reaching Forward Index, to set targets and monitor progress against national criteria.

## Chichester Community Development Trust Training & Development Policy: January 2022

### Introduction

CCDT is committed to ensuring that all staff and volunteers have access to learning, development and training opportunities which enables them to be suitably knowledgeable and skilled to carry out their role within CCDT, and to develop their talents in any ways that fit with the organisation's development to meet its strategic objectives.

### **1. Policy Aims**

The main aims of this policy are to:

- Ensure that employees and volunteers are supported and enabled to meet the changing demands of the Trust and its service users so that the Trust achieves its strategic objectives
- Facilitate employee/volunteer development and/or personal development through assisting them to broaden, deepen and thereby further enhance their existing skill base.
- Provide a working environment where continuous learning and development take place that help staff to gain more enjoyment from their roles, increase motivation and enhance staff retention.

### **2. Equal Opportunities**

CCDT is committed to ensuring equality of learning opportunity, hence no employee or volunteer will be excluded from learning on the grounds of gender (including gender reassignment), age, marital status, disability, racial grounds (race, colour, nationality – including citizenship – ethnic or national origin), sexual orientation, religion or belief, responsibility for dependants, trade union membership or employment status.

Part time and fixed term employees will have equal access to learning and development opportunities appropriate to their post and volunteers will be given access to relevant training.

### **3. Responsibilities**

#### **3.1 Employees**

CCDT believes that employee development is most effective when the individual employee takes responsibility for identifying any opportunities for self-development which will enhance work performance through increased skills and knowledge.

Learning needs and opportunities will also be identified through the support, supervision and appraisal process, and through internal assessments to meet business need.

We expect all employees to also take a proactive approach to furthering organisational wide learning and development.

The Trust Director should be notified of all learning undertaken for inclusion in a central log. This should also include top level comments on the quality and cost effectiveness of training from participants which is made available to all staff when considering booking training.

### **3.2 Trust Director**

The Trust Director is responsible for assisting staff and volunteers to identify learning needs and for ensuring that they review these with staff on a regular basis during support and supervision sessions. The employee's log of learning should also be discussed at these sessions.

The Trust Director has a responsibility to monitor and evaluate the effectiveness of learning for employees who have undergone training and development. The Trust Director should seek feedback on any training, including quality and cost effectiveness. The Trust Director should then ensure that employees implement the skills that they have gained through training and ensure that feedback on training is shared with other staff members.

### **3.3 Board & Trustees**

The Board of Trustees is responsible for agreeing the learning and development budget on an annual basis. The learning budget is controlled by the Chairman in association with the Trust Director.

Trustees also have a responsibility to attend appropriate training in order for them to perform their legal duties.

## **4. Routes to Learning and Development**

Options for learning & development may include:

- On the job learning including learning from other members of staff via job shadowing, mentoring, in house skill sharing, staff away days etc.
- Secondments and placements/visits to other trusts/ organisations
- Setting up job development opportunities such as public speaking, in house presentations at team meetings
- Attending internal or external training days/workshops
- Attending conferences, forums, networking meetings
- An external course of study
- Web based e learning
- Self-directed study – such as books, manuals, online information

CCDT is committed to sharing the learning and lessons gained by staff and volunteers throughout the Trust. This will be accomplished in a number of ways:

- Giving time in team meetings to share core lessons from training
- Sharing brief course details and notes on the extranet so
- Networking with partner and same sector organisations and incorporating their literature, reports and research documents into office resource libraries

## **5. Key Professional and Skills Based Learning**

The organisation aims to prioritise learning that focuses on areas which:



- Enable us to fulfil our strategic objectives
- Pertain to any organisational statutory/contractual obligations
- Are essential in order to generate and maintain income
- Enable effective responses and management of legislative changes
- Ensure IT skills meet business need
- Are essential to ensure the quality of service provision
- Enable employees to meet their responsibilities in completing continuous professional development required by relevant professional bodies
- Enable management development in relation to those who have managerial/supervisory responsibilities

## **6. Core Learning**

There are specific areas of learning which are essential for all employees in order to understand the various activities undertaken within CCDT. Training will be initiated during the induction period but will be a continuous programme of learning and development.

## **7. Recording, Monitoring and Evaluating Learning**

All staff members are responsible for ensuring that a central record of employee learning is created and maintained. The Trust Director will ensure that all learning and development activities are monitored and evaluated in terms of suitability, effectiveness and value for money.

The Trust Director has responsibility for reporting on the effectiveness of any staff development programmes to the Board meeting once a year.

## **8. Performance Management**

Performance management is an ongoing communication process, which involves both the Trust Director and the employee in:

- Identifying and describing essential job functions and relating them to the strategic and operational objectives of the organisation
- Developing realistic and appropriate performance standards
- Giving and receiving feedback about performance
- Participating in constructive performance appraisals
- Planning learning and development opportunities to sustain, improve or build on employee work performance.

Regular meetings/communications between staff and line manager facilitates this process.

## **9. Appraisals**

Annual appraisals are an essential component of CCDT's performance management framework and are supported by regular support and supervision sessions between the Trust Director and employees throughout the course of the year.

The appraisal scheme allows for every employee to be formally appraised through a structured discussion on work performance over the previous year and which, must also incorporate the employee's learning and development needs for the following year.

It is an opportunity to build on strengths and address areas, which require support, thereby enhancing the potential skill base of the individual employee.

CCDT has a culture of effective informal mentoring on an ongoing basis, this is based around continuous support. The formal aspects to this however are:

- Supervision sessions are held at a minimum of 6 week intervals between all staff and the Trust Director on an individual basis.
- A full Annual Appraisal is then carried out by the Trust Director through discussion with each employee on an annual basis.

A Personal Development Plan for the year is then created.

## CCDT Youth Projects Safeguarding Policy

### Safeguarding & Child Protection Policy

This policy was adopted on: 17<sup>th</sup> June 2024

The policy will next be reviewed on: 17<sup>th</sup> June 2025

Safeguarding lead: Sarah Nute. 01243 537526. sarah@chichestercdt.org.uk

### INTRODUCTION:

Safeguarding children and child protection applies to all children up to the age of 18.

**Safeguarding** is the action taken to promote the welfare of children and protect them from harm.

**Safeguarding** means:

- protecting children from abuse and maltreatment
- preventing harm to children's health or development
- ensuring children grow up with the provision of safe and effective care
- taking action to enable all children and young people to have the best outcomes.

**Child protection is part of the safeguarding process.** It focuses on protecting individual children identified as suffering from, or likely to suffer, significant harm. This includes child protection procedures which detail how to respond to concerns about a child.

Safeguarding children is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.

The purpose of this policy is to inform staff<sup>1</sup>, parents and volunteers about our youth activities' responsibilities for safeguarding children and to enable everyone to have a clear understanding of how these responsibilities should be carried out.

We recognise that all adults, including temporary staff and volunteers have a full and active part to play in protecting children from harm and that the child's welfare is our paramount concern.

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<sup>1</sup> Wherever the word "staff" is used, it covers ALL staff on site, including ancillary and supply staff, and volunteers working with children

All staff members believe that our youth activities should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child.

### **SAFEGUARDING CULTURE IN OUR YOUTH ACTIVITY WORK**

#### **Child Protection Statement**

Chichester Community Development Trust takes its responsibility to safeguard children extremely seriously. We will ensure that all staff & volunteers involved in our youth programmes maintain an attitude of 'it could happen here' and feel able to raise concerns either about a child at risk or a member of staff whose behaviour may present a risk to a child.

Our youth activities will

1. Have safeguarding at the heart of everything we do.
2. Maximise opportunities to teach our children / young people how to keep safe both in the real and virtual world.
3. Support the child's development in ways that will foster security, confidence and independence;
4. Provide an environment in which children and young people feel safe, secure, valued, respected and confident.
5. Ensure that ALL of our children / young people know a member of staff they can communicate with if they are worried about something.
6. Where there is a safeguarding concern staff and volunteers should ensure the child's wishes and feelings are taken into account when determining what action to take and what services to provide. Systems should be in place for children to express their views and give feedback. Ultimately, all systems and processes should operate with the best interests of the child at heart.
7. Make sure all our staff, including volunteers know how to contact child protection agencies should they need to.
8. Emphasise the need for good levels of communication between all members of staff and volunteers and other agencies should they need to be brought in;
9. Have and regularly review, a structured procedure within the Trust which will be followed by all members of CCDT in cases of suspected abuse;
10. Ensure that all adults within our youth activities who have access to children have been recruited and checked as to their suitability.

## **Voice of the Child – Working Together to Safeguard Children 2018**

CCDT recognises the findings in Working Together to Safeguard Children 2018, where children expressed that they wanted an effective safeguarding system to be:

- vigilant: to have adults notice when things are troubling them
- understanding and actioned: to understand what is happening; to be heard and understood; and to have that understanding acted upon
- stable: to be able to develop an ongoing stable relationship of trust with those helping them
- respectful: to be treated with the expectation that they are competent rather than not
- informed and engaged: to be informed about and involved in procedures, decisions, concerns and plans
- explained: to be informed of the outcome of assessments and decisions and reasons when their views have not met with a positive response
- supported: to be provided with support in their own right as well as a member of their family
- advocated: to be provided with advocacy to assist them in putting forward their views
- protective: to be protected against all forms of abuse and discrimination and the right to special protection and help if a refugee

We will use this information to support the training of our staff and review this and other policies as appropriate.

### **YOUTH ACTIVITY COMPLAINTS:**

Complaints by parents about any aspect of youth activities MUST be reviewed to ensure there are no allegations against staff, including volunteers, contained within the complaint which require referral to LADO.

Allegations against member of staff, including volunteers and youth group leaders or their assistants require:

1. An immediate written record of the allegation using the informant's words including time, date and place where the alleged incident took place, brief details of what happened, what was said and who was present.
2. This record should be signed, dated and immediately passed on to the Director of Chichester Community Development Trust.
3. The recipient of an allegation must not unilaterally determine its validity and failure to report it in accordance with procedures is a potential disciplinary matter. The Board or Directors will not investigate the allegation themselves, or take written or detailed statements, but will assess and decide whether to refer the concern to the LADO. If there is any doubt as to whether to refer, advice should be taken from the LADO.

4. If there are concerns that a child is at risk, the matter must be immediately reported to MASH.
5. Any records generated during such matters must be retained securely, away from other child protection and personnel records and only be accessed by those who need to for investigation/review purposes.
6. Guidelines contained within the Pan Sussex Child Protection and Safeguarding Procedures in respect of managing allegations made against people who work or volunteer with children, found [here](#) , must be followed on each occasion.
7. If there is any doubt, then advice must be taken from the LADO.

### **When to be concerned a child is at risk of abuse**

CCDT recognises that all children and young people are vulnerable to abuse. Our charity is determined that all staff and volunteers will be aware of the main categories of abuse and the signs and symptoms so they can respond quickly and effectively by informing the Designated Safeguarding Lead where there are concerns.

#### **Abuse:**

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

#### **Physical Abuse:**

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

#### **Emotional Abuse:**

The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental ability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child although it may occur alone.

**Sexual Abuse:**

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact activities such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet) by establishing a close relationship or friendship. Sexual abuse is not solely perpetrated by adult males; women can also commit acts of sexual abuse as can other children.

**Neglect**

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment), protect a child from physical and emotional harm or danger, ensure adequate supervision (including the use of inadequate care-givers), or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

**Recognising Physical Abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

**Indicators in the child****Bruising**

It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non-accidental unless there is evidence, or an adequate explanation provided:

- bruising in or around the mouth
- two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- repeated or multiple bruising on the head or on sites unlikely to be injured accidentally for example the back, mouth, cheek, ear, stomach, chest, under the arm, neck, genital and rectal areas
- variation in colour possibly indicating injuries caused at different times
- the outline of an object used e.g. belt marks, handprints or a hairbrush
- linear bruising at any site particularly on the buttocks, back or face

- bruising or tears around or behind, the earlobe/s indicating injury by pulling or twisting
- bruising around the face
- grasp marks to the upper arms, forearms or leg
- petechial haemorrhages (pinpoint blood spots under the skin) commonly associated with slapping, smothering/suffocation, strangling and squeezing

### Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. It is unlikely that a child will have had a fracture without the carers being aware of the child's distress. If the child is not using a limb, has pain on movement and/or swelling of the limb, there may be a fracture.

There are grounds for concern if:

- the history provided is vague, non-existent or inconsistent
- there are associated old fractures
- medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement.

Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick.

Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually witnessed, the child will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

### Mouth Injuries

Tears to the frenulum (tissue attaching upper lip to gum) often indicates force feeding of a baby or a child with a disability. There is often finger bruising to the cheeks and around the mouth. Rarely, there may also be grazing on the palate.

### Poisoning

Ingestion of tablets or domestic poisoning in children under 5 is usually due to the carelessness of a parent or carer but it may be self-harm even in young children.

### Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child. A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite.

### Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded.



Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid.

Old scars indicating previous burns/scalds, which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

The following points are also worth remembering:

- A responsible adult checks the temperature of the bath before the child gets in.
- A child is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet.
- A child getting into too hot water of his or her own accord will struggle to get out and there will be splash marks.

### Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, or unusually shaped, may suggest abuse.

Emotional / behavioural presentation:

- refusal to discuss injuries
- admission of punishment which appears excessive
- fear of parents being contacted and fear of returning home
- withdrawal from physical contact
- arms and legs kept covered in hot weather
- fear of medical help
- aggression towards others
- frequently absent from school
- an explanation which is inconsistent with an injury
- several different explanations provided for an injury.

Indicators in the parent:

- may have injuries themselves that suggest domestic violence
- not seeking medical help/unexplained delay in seeking treatment reluctant to give information or mention previous injuries
- absent without good reason when their child is presented for treatment
- disinterested or undisturbed by accident or injury
- aggressive towards child or others
- unauthorised attempts to administer medication
- tries to draw the child into their own illness
- past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
- parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids

- observed to be intensely involved with their children, never taking a much-needed break nor allowing anyone else to undertake their child's care.
- may appear unusually concerned about the results of investigations which may indicate physical illness in the child
- wider parenting difficulties may (or may not) be associated with this form of abuse
- parent/carer has convictions for violent crimes.

#### Indicators in the family/environment:

- marginalised or isolated by the community
- history of mental health, alcohol or drug misuse or domestic violence
- history of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

#### Recognising perplexing cases which may indicate a possibility of fabricated or Induced Illness (FFI)

1. Professionals may be concerned at the possibility of a child suffering [significant harm](#) as a result of having illness fabricated or induced by their carer. Possible concerns are:
  - discrepancies between reported and observed medical conditions, such as the incidence of fits
  - attendance at various hospitals, in different geographical areas
  - development of feeding/eating disorders, as a result of unpleasant feeding interactions
  - the child developing abnormal attitudes to their own health
  - non-organic failure to thrive - a child does not put on weight and grow and there is no underlying medical cause
  - speech, language or motor developmental delays
  - dislike of close physical contact
  - attachment disorders
  - low self esteem
  - poor quality or no relationships with peers because social interactions are restricted
  - poor attendance at school and under-achievement.
2. These cases are very complex and for a case to be considered as FFI is after careful and detailed review by a consultant paediatrician. Please see Pan-Sussex Child Protection Procedures for further information [here](#).

#### Recognising Emotional Abuse

1. Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person.

2. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
3. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning or preventing the child participating in normal social interaction.
4. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.
5. Some level of emotional abuse is involved in all types of maltreatment of a child though it may occur alone.

Indicators in the child:

- developmental delay
- abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- aggressive behaviour towards others
- child scapegoated within the family
- frozen watchfulness, particularly in pre-school children
- low self-esteem and lack of confidence
- withdrawn or seen as a 'loner' - difficulty relating to others
- over-reaction to mistakes
- fear of new situations
- inappropriate emotional responses to painful situations
- neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
- self-harm
- fear of parents being contacted
- extremes of passivity or aggression
- drug/solvent abuse
- chronic running away
- compulsive stealing
- low self-esteem
- air of detachment – 'don't care' attitude
- social isolation – does not join in and has few friends
- depression, withdrawal
- behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention
- low self-esteem, lack of confidence, fearful, distressed, anxious
- poor peer relationships including withdrawn or isolated behaviour.

Indicators in the parent:

- domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to abuse
- abnormal attachment to child e.g. overly anxious or disinterest in the child
- scapegoats one child in the family
- imposes inappropriate expectations on the child e.g. prevents the child's developmental exploration or learning, or normal social interaction through overprotection
- wider parenting difficulties may, or may not, be associated with this form of abuse.

Indicators of in the family/environment:

- lack of support from family or social network
- marginalised or isolated by the community
- history of mental health, alcohol or drug misuse or domestic violence
- history of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate caregivers)
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Indicators in the child

Physical presentation:

- failure to thrive or, in older children, short stature
- underweight
- frequent hunger
- dirty, unkempt condition
- inadequately clothed, clothing in a poor state of repair
- red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold
- swollen limbs with sores that are slow to heal, usually associated with cold injury
- abnormal voracious appetite
- dry, sparse hair
- recurrent/untreated infections or skin conditions e.g. severe nappy rash, eczema or persistent head lice/scabies/diarrhoea
- unmanaged / untreated health/medical conditions including poor dental health
- frequent accidents or injuries.

Development:

- general delay, especially speech and language delay
- inadequate social skills and poor socialization.

Emotional/behavioural presentation:

- attachment disorders
- absence of normal social responsiveness
- indiscriminate behaviour in relationships with adults
- emotionally needy
- compulsive stealing
- constant tiredness
- frequently absent or late at school
- poor self esteem
- destructive tendencies
- thrives away from home environment
- aggressive and impulsive behaviour
- disturbed peer relationships
- self-harming behaviour.

Indicators in the parent:

- dirty, unkempt presentation
- inadequately clothed
- inadequate social skills and poor socialisation
- abnormal attachment to the child e.g. anxious
- low self- esteem and lack of confidence
- failure to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene
- failure to meet the child's health and medical needs e.g. poor dental health; failure to attend or keep appointments with health visitor, GP or hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy
- child left with adults who are intoxicated or violent
- child abandoned or left alone for excessive periods
- wider parenting difficulties may or may not be associated with this form of abuse.

Indicators in the family/environment:

- history of neglect in the family
- family marginalised or isolated by the community
- family has history of mental health, alcohol or drug misuse or domestic violence
- history of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- family has a past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement
- dangerous or hazardous home environment including failure to use home safety equipment; risk from animals

- poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating
- lack of opportunities for child to play and learn.

#### Recognising Sexual Abuse

1. Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.
2. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.
3. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).
4. Sexual abuse is not solely perpetrated by adult males, women can also commit acts of sexual abuse, as can other children.

#### Indicators in the child -

##### Physical presentation:

- urinary infections, bleeding or soreness in the genital or anal areas
- recurrent pain on passing urine or faeces
- blood on underclothes
- sexually transmitted infections
- vaginal soreness or bleeding
- pregnancy in a younger girl where the identity of the father is not disclosed and/or there is secrecy or vagueness about the identity of the father
- physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing.

##### Emotional/behavioural presentation:

- makes a disclosure
- demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
- inexplicable changes in behaviour, such as becoming aggressive or withdrawn
- self-harm - eating disorders, self-mutilation and suicide attempts
- poor self-image, self-harm, self-hatred
- reluctant to undress for PE
- running away from home
- poor attention / concentration (world of their own)
- sudden changes in school work habits, become truant
- withdrawal, isolation or excessive worrying

- inappropriate sexualised conduct
- sexually exploited or indiscriminate choice of sexual partners
- wetting or other regressive behaviours e.g. thumb sucking
- draws sexually explicit pictures
- depression.

Indicators in the parents:

- comments made by the parent/carer about the child
- lack of sexual boundaries
- wider parenting difficulties or vulnerabilities
- grooming behaviour
- parent is a sex offender.

Indicators in the family/environment:

- marginalised or isolated by the community
- history of mental health, alcohol or drug misuse or domestic violence
- history of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- past history of childhood abuse, self-harm, or a culture of physical chastisement
- family member is a sex offender.

## **REFERRALS:**

Should anything that raises alarm occur during youth focussed activities provide by CCDT then referral pathways exist to ensure appropriate safeguarding measures are taken. Organisations to be contacted and their details are:

### **West Sussex Multi-Agency Safeguarding Hub (MASH):**

Tel: 01403 229900

(Out of Hours – 0330 222 6664)

[MASH@westsussex.gov.uk](mailto:MASH@westsussex.gov.uk)

Referrals to MASH

Referrals to MASH should be made on the following web-based forms which can be accessed here:

- Adults - <https://www.westsussex.gov.uk/raiseaconcernaboutanadult>
- Children's - [www.westsussex.gov.uk/Raiseaconcernaboutachild](https://www.westsussex.gov.uk/Raiseaconcernaboutachild)

Referrals can also be made by telephone to 01403 229900

### **Local Authority Designated Officers (LADO):**

The LADO's for West Sussex area:

- Miriam WILLIAMS
- Donna TOMLINSON

Assistant LADO:

- Sally ARBUCKLE

#### LADO Contact Details

LADO should be contacted either by email: [LADO@westsussex.gov.uk](mailto:LADO@westsussex.gov.uk) or by phone, LADO Consultation Contact No. 0330 222 6450 (Mon – Fri 9.00am – 5.00pm)



# **Chichester Community Development Trust**

The Water Tower,  
Blomfield Drive,  
Graylingwell Park,  
Chichester, PO19 6BZ

01243 537526

## **Food Safety Policy and Procedures**

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## Policy Statement

The proprietor and management of **Chichester Community Development Trust** recognise their moral and legal duty to comply with food safety regulations and guidelines in order to ensure the production of a safe food, thereby preventing harm or injury to the consumer.

By working to the guidelines set within this policy and by maintaining a system of monitoring, review and revision, the company is determined and confident that food safety hazards and risk will be reduced to an acceptable level.

The person accepting overall responsibility for the maintenance of food safety at **Chichester Community Development Trust** Ltd is ..... the *Proprietor* of the business. The role of *Food Safety Manager* will be undertaken by the ..... and as such will ensure that equipment, work processes and general facilities are maintained to a safe and hygienic standard by a process of hazard analysis and control. He will ensure that all control measures implemented are monitored and recorded together with corrective action taken.

**Signed** .....

**Dated** .....

*Proprietor*

**Signed** .....

**Dated** .....

*Food Safety Manager*

## Organisational Structure, Management and Responsibilities

The persons accepting overall responsibility for food safety are:

Name	Signed .....
Designation	Date.....

Name	Signed .....
Designation General Manager	Date.....

Name	Signed .....
Designation Food Safety manager	Date.....

Roles and Responsibilities	
<b>Proprietor</b>	
<b>General Manager</b>	
<b>Chef</b>	
<b>Sous Chef</b>	
<b>Housekeeping</b>	
<b>Bar Supervisor</b>	
<b>Maintenance</b>	
<b>Reception</b>	
<b>PR and marketing</b>	
<b>Office administration</b>	
<b>Accounts</b>	

This Hazard Analysis Food Safety Manual demonstrates the commitment of Chichester Community Development Trust as a food business to ensuring safe food is prepared on its' premises, and off-site during transport and delivery.

Our aim is to implement and maintain the highest standards of food hygiene and safety.

We intend that all food products are safe, wholesome and comply with current legislation in that they will not “render harm or injury to the consumer”

We will ensure that Chichester Community Development Trust team will take every reasonable precaution and exercise due care in all stages of food preparation, to achieve the best standard and enable the company to claim and prove Due Diligence. We will use the HACCP system of analysis and recording.

We will work with suppliers, staff and customers to review, maintain and if possible, improve food safety standards, and therefore understand that food safety systems must continually be reviewed and developed.

All staff are suitably trained and instructed in safe and hygienic food handling. We rely on them to take individual responsibility for food safety and to put into practice safe and hygienic food handling procedures.

Supervisory and management staff will be trained appropriately and are responsible for ensuring that company standards, policies and procedures will be adhered to, at all times, on and off site.

We work with local Enforcement Officers and follow their recommendations whenever possible.

We operate a quality system in that our managers investigate and record all complaints, and where necessary take corrective action. If appropriate this will be discussed with the Environmental Health Department.

This Food Safety Policy will be freely and easily available for all staff to refer to. The Proprietor/Food Safety Manager will communicate with staff orally, in writing and with the use of food safety material such as posters and pamphlets in order to inform, maintain and reinforce the efficient work practice and high standards of food hygiene.

Training of staff will include instruction on the food safety aspects of any specific task as well as instruction on the task itself. A task will not be considered undertaken effectively if food safety guidelines are not followed. It is the policy of this company to ensure that on-going food safety training and information is reviewed, monitored and updated. Through training, all staff will be aware of their individual responsibility to ensure production of safe food. On-going food safety comment and review will be encouraged on a day-to-day basis.

It is the responsibility of the Proprietor/ Manager to consult with staff and encourage them to report and share information and concerns. Staff will be made aware of their obligation to report any problems with food items, packaging, equipment, fixtures and fittings to the Proprietor/ Manager

A **hazard analysis** of all food products will be carried out quarterly by the Food Safety Manager. The Food Safety Manager and will also complete a hazard analysis when and if:

- a) there are changes in the nature and/or scale of operation or work assignment,
- b) there are any changes to staff circumstances,
- c) food is contaminated, microbiologically, physically or chemically during production,
- d) a member of staff identifies a possible food concern,

e) A customer makes a complaint or returns a food product.

All checks will be recorded. The Proprietor/ Manager will be responsible for identifying action to remove or control any hazards identified.

The Proprietor/ Manager will be responsible for approving corrective action taken and ensuring that it is implemented.

A record will be kept of safety concerns raised, corrective actions planned and improvements completed.

Reported food safety complaints and food safety incidents will also be reviewed and any comments or concerns from staff will be addressed and acted upon.

The record will include the planned date of the hazard analysis system review.

Signed .....

Proprietor

Dated .....

Signed .....

Food Safety Manager

Dated .....

## **Company Standards**

Standards are documented and identified within the Food Safety System, for each specific area of work.

1. Food Supplies – supply and delivery
2. Personnel
3. Work Environment
4. Work Practice
5. Food Processing
6. Allergens
7. Acrylamides
8. Cellars
9. Cleaning and Disinfection
10. Waste management
11. Pest Control
12. Food complaints



## **Monitoring and Controls – General Procedures**

To verify their commitment to food safety the owners, managers and staff of Chichester Community Development Trust adhere to a HACCP system to ensure food safety.

Procedures are in place to which comply with the principles of HACCP

Record sheets are maintained:

Daily records kept for a period of 12 weeks.

Supplier records kept for a period of six months.

Staff training records kept for duration of employment, and three years thereafter.

All other records stored for three years, or more, as legally required.

Controls and procedures are documented in detail within the following sections of the manual.

Food Hygiene audits are undertaken by a member of the senior management team on a monthly basis.

Supervisors have a planned system of checks which cover all areas on a weekly basis.

## Prevention of contamination – flow charts

Flow charts have been prepared for:-

Hot food – meat dishes

Hot food - fish dishes

Hot foods – sauces, vegetables and sundries

Hot food – rice

Cold food – sauces, desserts and sundries

## **Food Supplies**

Only stipulated CCDT preferred suppliers and contractors may be used for the purchase of provisions and services. The company will use local suppliers wherever possible.

It is important that suppliers and contractors are carefully chosen in order to be confident about the safety of raw and ready-made products bought in.

### **Choosing Suppliers**

The selection of suppliers will be based on:

- Verification that they have a HACCP system in place.
- Length of time the supplier / contractor has been in business.
- Provision of fully detailed and reference invoices.
- Certificates of quality assurance.
- Rapid respond to customer concerns.
- Hygienic storage, transportation and packaging of their goods.
- Recommendation from other businesses.

### **Audits and Visits to Suppliers**

Formal audits of each supplier may be undertaken. where practicable suppliers may be visited as necessary to satisfy that conditions are established and maintained regarding compliance with standards. Records of visits will be kept.

### **Safe Food Handling**

- Suppliers will maintain a food safety management system
- All suppliers will understand what the company's service expectations are.
- Delivery vehicles will be monitored.
- Delivery time, temperature and quality spot checks will be carried out and records kept.
- Information will be regularly reviewed and records amend as required to keep records up to date.

### **Corrective Action**

If the food that is supplied has not been handled safely, deliveries will be rejected. In this case the supplier will be notified immediately of concerns and records kept on monitoring forms.

Company/Name	Equipment and Trade	Telephone

## **Personnel**

### **Training**

It is a legal requirement that all food handlers are supervised and instructed and/or trained.

Food Hygiene Regulations require: -

“The proprietor of a food business shall ensure that food handlers engaged in the food business are supervised and instructed and/or trained in food hygiene matters commensurate with their work activities”.

The legal requirement applies to a ‘food handler’. For the purposes of this guide to the training requirement, ‘Food Handler’ means any person involved in a food business who handles or prepares food whether open (unwrapped) or packaged. (Food includes drink and ice).

The training needed will relate to the actual job of the individual but will include personnel who are competent regarding the implementation and monitoring of the food safety management system (HACCP).

### **Responsibilities**

#### **Management**

Management will ensure that:

- sufficient resource is available for the training of employees.
- the company’s requirements for training are met.
- employee’s training needs are reviewed.
- all employees are inducted into the business and made aware of food safety practices and routines, personal hygiene and personal protective equipment.
- employees are trained in the relevant sections of this Manual and any other relevant information.
- standards are monitored on an on-going basis;
- they undertake practical training of employees; and maintain records of all training.

## **Training to be undertaken**

### **Food Hygiene Rules / Induction**

Before commencing work, all staff will receive induction information regarding basic food safety and hygiene principles, including information regarding food allergy and intolerance.

### **Hygiene Awareness Instruction**

The Manager is responsible for ensuring that staff are trained to use safe food handling methods commensurate with their individual job role.

### **Level 2 Award in Food Safety in Catering**

To be taken within 3 months of starting employment or as soon as possible thereafter.

Refresher courses will be attended every 3 years as a minimum requirement.

### **Formal Training to Level 3 Food Hygiene Certificate**

For those who also have a supervisory role e.g. Head Chef.

### **HACCP Training**

For those who also have a supervisory role e.g. Head Chef.

### **Supervision**

The Manager will routinely observe staff as they are carrying out their work to ensure safe methods are maintained.

If staff are not following a safe method properly, the Manager may arrange for further training and ensure the all staff understand why it is important to follow the rules.

### **Record Keeping**

Details of all food hygiene training and instruction undertaken will be kept on each member of staffs' personnel file.

Training records will be available for inspection, if required, by a visiting EHO.

## **Personal Hygiene**

It is the responsibility of the Manager to ensure staff are clean and well presented at all times. Appropriate changing facilities will be provided for changing and storing outdoor clothing.

It is the Managers' responsibility to ensure staff facilities are kept clean and tidy.

Protective clothing should not be worn outside food preparation areas.

Hand basins will be maintained in all areas providing hot and cold water, antibacterial soap and disposable paper towels to enable staff to maintain standards for hand hygiene.

- Daily baths or showers must be taken by all staff prior to starting work in order to maintain hygiene and prevent body odour. Deodorants/anti-perspirants are both permissible and desirable, however no strong perfume or after shave is allowed.
- All staff must arrive at work clean, keep themselves clean throughout the day maintaining the highest level of professional appearance by wearing prescribed clean protective clothing.
- As a minimum standard long hair must be tied back or secured. In food preparation areas, ideally, hats will be worn (at the discretion of the Manager), adequately cover hair and a hairnet should be used, if required, so not to pose a risk of contamination.
- Beards and moustaches must be kept clean and neatly trimmed at all times, otherwise men should be clean shaven.
- Staff will ensure their hands are washed thoroughly (using the wash hand basin and bactericidal soap) before starting work, before handling food, after using the toilet, after handling raw foods or waste, after every break, after blowing their nose, coughing or sneezing, and often during the day.

- Staff will not commence work if they cannot comply with the company Fitness to Work Policy. See following page.
- Staff will ensure cuts and sores are covered with a waterproof, blue dressing.
- Staff will not smoke, eat, chew gum or drink in a food room and never cough or sneeze over food.
- Staff will not wear nail varnish or false nails. Fingernails must not be bitten or picked but must be kept short and clean.
- Jewellery presents a risk of bacterial and physical contamination. Bar staff may wear discreet jewellery subject to management approval. Earrings and other piercings must not be worn. For food preparation staff only a plain, band ring is acceptable.
- Outdoor clothing and personal effects must not be brought into any food areas.

### **Illness and Fitness to Work**

High standards of personal hygiene must be practised by food handlers to prevent cross contamination and the spread of infection.

Staff should be 'fit for work' at all times. This means that they must not be suffering from, or carrying, an illness or disease that could compromise food safety.

The Manager must determine the risk to food safety of food handling staff who exhibit symptoms of coughs and colds etc. working with food. Staff that are ill may be allocated other non-food tasks. Food handling staff must not work if they are suffering from diarrhoea and / or vomiting. They should stay at home or go home straightaway.



Staff shall report to the manager before starting work, or as soon as possible: If they are suffering from, vomiting, diarrhoea, septic skin lesions (boils, infected cuts etc., however small), discharge from ear, nose and any other site. They will also report after returning from a holiday during which they or any member of the party suffered from vomiting and / or diarrhoea.

The following requirements should be met before returning to work following illness

due to common causes of gastro-intestinal infection:

- 48 hours since last episode of sickness or diarrhoea.
- Doctor has approved return to food handling duties.

### **First aid**

First Aid boxes are located:

Kitchen, Front bar, Back bar, Downstairs function room.

A list of First Aiders is displayed behind the front bar.

The Manager is responsible for ensuring that personnel responsible for First Aid are available and ensuring that the first aid box is kept stocked.

Blue waterproof adhesive plasters should be used by food handlers to cover all cuts, blemishes, grazes, sores etc. on the skin.

### **Medical Questionnaire**

In order to maintain current information about the general health of employers, all staff shall complete a medical questionnaire and a copy kept on the member of staff's personnel file.

A 'Return to Work' record will also be kept for all staff returning to work after a period of illness or holiday taken out of the UK.

### **Visitors**

The Manager is to ensure that non-catering staff and other visitors to food rooms do not pose risks to food safety.

## **Work Environment**

### **Design and Construction**

The structure of premises will be maintained in a sound condition with no significant defects and sufficient space for all activities, such as storage, preparation, cooking, service/display, staff changing, etc.

A potable, mains supply of piped hot and cold water will be available to each area for washing food, inclusion as an ingredient (including ice making) cleaning and hand washing. Grease traps will be installed to external drainage where necessary.

Sufficient space will allow for good food hygiene practices including a good linear workflow assisting in the prevention of cross-contamination in food storage and preparation areas and easy access allowing for effective cleaning.

Dry goods and vegetable storage will be maintained in a good state of repair and adequately ventilated to provide cool, dry conditions.

Ventilation will be capable of removing excess heat, steam and odours from cooking processes, refrigeration equipment, dishwashing, etc.

Sufficient storage racking or shelves, capable of being effectively cleaned, will be available to allow all food and equipment to be kept clear of the floor.

All surfaces, equipment, facilities and services will be serviced and maintained as necessary.

All surfaces coming into direct contact with food or food vessels and utensils will be suitable for intended use, made from suitable materials, easily cleaned, durable and non-reactive to food ingredients and maintained in a sound condition.

Surfaces will be sound, resistant to the formation of mould and have finishes not prone to flaking or the shedding of debris. Floors will be durable, resistant to hot liquids and slip-resistant.

Equipment will be positioned, or mobile, to allow access for effective cleaning.

Monitoring and maintenance will ensure that refrigeration equipment maintains refrigeration at or below 5°C and freezers at or below -18°C. There will be sufficient capacity to allow efficient storage.

An adequate number of wash hand basins with hot and cold water supply will be located so that staff have convenient access to them. Liquid anti-bacterial soap and paper towel dispensers will be provided at each basin.

### **Work Practice**

All staff will comply with the company standards and procedures for safe food handling

All food preparation areas will be kept clean and tidy, "clean as you go"

A cleaning schedule will be used to maintain high standards of hygiene in all food preparation areas.

Liquid spills will be cleaned up immediately. Food debris removed.

Refuse i.e. raw food, waste food and packaging will be kept in suitable receptacles and removed from the food preparation areas when full or at the end of each working shift.

Externally waste will be stored on hard standing in lidded containers until collection.

The Food Safety Manager or will undertake regular maintenance inspections of premises.

## Food processing

### Delivery

It is essential that a member of the catering staff is always available to receive food on delivery. Food deliveries left unattended in an outside location is unacceptable.

Before accepting a delivery, the vehicle must be checked to determine its suitability for carrying the delivered goods.

Food must be examined and the following checked before being placed into storage

- Labelled dates - Including product description, “use by/best before”  
Allergens etc.
- Storage - Separate raw and cooked foods.  
Suitable, clean containers and packaging.
- Temperatures packs. - Checked using a probe thermometer between food  
Chilled 0° to 5°C (maximum acceptable 8°C)  
Frozen -18°C or below
- Signs of thawing - mass Soft, frozen liquid in packaging; products in a solid
- Quality - Organoleptic checks carried out
- Quantities - Are quantities as originally ordered and recorded on the delivery note?

A record should be completed for each delivery. If the food is delivered in an unsatisfactory condition, it must be rejected.

## **Storage**

Food deliveries must be stored properly as soon as possible under appropriate conditions. FIFO (first in - first out) - new stock should be stored behind old to encourage use of the oldest stock first. Goods with expired date codes will be removed from the premises or will be segregated and clearly labelled "not for use".

Loose outer packaging should, wherever possible, be removed from food deliveries before the food is stored. Chilled stock usually has a life of 3 to 4 days on arrival. These dates will be checked daily.

Food which is prepared in house in advance of use must also be adequately labelled. Product description and production date will be shown. If food is frozen in-house the wrapping or container will also include the date of freezing.

In order to assist effective cleaning and pest inspection, sufficient shelving or racking will be available to avoid storing goods on the floor (unless kept in a suitable container (such as a Grundy Bin)

Refrigerated and frozen raw meat should be stored separately labelled '*Raw Meat Only*'. If fully separate facilities are not available, the raw foods must be kept below and apart from other foods.

Once opened, food must be stored fully wrapped or covered with food-grade material.

Non-food items should be kept out of food storage and preparation areas as far as possible. Personal possessions should be stored in lockers and admin equipment, folders, pens, paperclips etc. confined to the office. Unnecessary glass should be kept out of food rooms. All light fittings will be covered with diffusers. Glass tube thermometers and drinking glasses should be kept out of food production areas.

## **Storage - Temperature Control**

Food storage areas and equipment must be kept within the following specifications:

- Ambient stores within 10°C to 25°C
- Fridges to operate within 0°C to 5°C
- Freezers to target operation at or below - 22°C to provide adequate tolerance to ensure consistent operation below critical limit of -18°C.

All refrigeration and freezer equipment will have a temperature display on the casing or have an internal thermometer that is easily visible on inspection.

Temperatures of all refrigeration storage equipment will be recorded in writing twice a day.

These thermometers will be regularly verified with the use of an electronic probe thermometer.

Each kitchen area will have an adequate number of electronic probe thermometers, spare batteries and a supply of disinfectant wipes.

Where appropriate, thermometers suitable for monitoring a Sous Vide process will be used including micro-probe and waterproof, vacuum-maintaining tape.

The accuracy of Probe Thermometers will be checked on a weekly basis to ensure accuracy and the check recorded.

All “high risk” foods will be stored under refrigeration, including:

- cooked foods
- smoked foods
- soft cheeses
- prepared salads

and those not stable at ambient temperature including:

- raw meat

- uncooked dough
- fresh pasta products
- raw eggs
- all other foods with label instructions requiring refrigeration

### **Thawing of frozen food**

Thawing of frozen food will ideally be carried out under refrigeration or in a rapid thaw cabinet and not at ambient room temperature. Thawing must be planned to ensure sufficient time for foods to completely defrost prior to cooking, particularly high-risk foods e.g. poultry. High-risk food will not be permitted to thaw outside refrigeration.

Cold, running water may be used for small items such as prawns to be immediately cooked or consumed.

A microwave defrost facility may be used to defrost food which is to be fully cooked or reheated immediately, as part of the same process.

Any food found to be fully or partially thawed must not be re-frozen.

### **Preparation**

#### ***THIS IS A CRITICAL STAGE IN SAFE FOOD PRODUCTION***

Food will not be left at ambient temperature during preparation, transfer, equipment defrost/breakdown and waiting periods for longer than necessary.

Only a minimum quantity of temperature-sensitive/high risk food for use should be outside temperature control.

All staff will be required to comply with company procedures and routines for safe food production:

- a) Adhere to strict standards of personal hygiene and hand washing routines
- b) Prepare food in designated, cleaned and sanitised areas
- c) Sanitise all knives and utensils
- d) Follow a “clean as you go” system to minimise the risk of physical contamination from packaging etc.
- e) Separate raw and cooked food products

- f) Prepare food on designated colour coded boards
- g) Check date codes and condition of all foods prior to use
- h) Thoroughly clean raw food, such as salads
- i) Ensure food is not left at room temperature for lengthy periods of time
- j) Wrap, label, date and refrigerate all prepared food items

## **Cooking**

Ideally, food will be cooked to order and served hot immediately.

Food will be thoroughly cooked to a combination of time and temperature in order to be effective in destroying pathogens. Ideally cooking will be accomplished as quickly as possible and a minimum core temperature of 75°C must be achieved.

Quantities to be cooked must not be so large as to make it difficult.

Foods which are an exception to the above must be identified and staff trained in the controls to ensure the safety of the final product.

An electronic probe thermometer will be used to monitor or verify that this is being achieved.

Final cooking temperatures of a selection of foods will be recorded daily.

Foods such as poultry, pork, rolled joints and products made from minced meat, such as burgers and sausages will be thoroughly cooked, unless dish specific verified controls are identified.

Whole cuts of beef and lamb, to be served pink/rare will be fully sealed on the outside.

## **Cooling**

If cooked food is to be chilled it must be cooled as rapidly as possible before being refrigerated. This will not exceed 90 minutes when it has cooled to near ambient temperature.



This may be achieved by any of the following :

- use of a blast chiller
- breaking down food into smaller quantities after cooking
- placing pans into sinks of cold, iced water
- pouring food into shallow trays
- covering food in a cool, well-ventilated area.

Sample cooling times for a selection of foods will be taken and recorded daily.

### **Reheating**

If reheating of food is necessary a core temperature of 75°C must be achieved, carried out once only.

Food which has been reheated and not used will be discarded at the end of a service session.

### **Holding / Display**

Hot food on heated display or hot storage will be kept at a minimum temperature of 63°C.

Hot food displayed or stored out of temperature control will be held below 63°C for no longer than 2 hours.

Cold food on display or in cold storage will be kept at 0 to 5°C

Cold food on display or stored out of temperature control will be kept above 5°C for no longer than 4 hours.

**Note – food is only permitted one display period out of temperature control, no matter how short. Exceeding these recommended guidelines,**

## Allergy and Intolerance

Chichester Community Development Trust do not guarantee that any of their products are free of food allergens, however the company is committed to meeting the needs of guests who may have special dietary requirements. This includes food allergy and intolerance, or other medically guided dietary restrictions.

The company understands that the food businesses operator must make allergen information available to the individual consumer, although for a function the menu may be dictated by the organisers (e.g. wedding - by the bride and groom), the ingredients are dictated by the event caterers.

Chichester Community Development Trust will inform the guests of the 14 common allergens that appear as ingredients in their food.

Dependent upon the nature of the event, this may be indicated on the menu (which of the 14 allergens appear in each dish) or they can tell the guests orally.

Where the guests are to be advised orally, a clearly visible, prominent notice or sign will be displayed, e.g. on the wall, menu and/or seating plan which will say:

*“FOOD ALLERGIES and INTOLERANCES. Please speak to our staff about the ingredients in your meal, when making your order. Thank you”*

Food allergy and intolerance awareness training will enable service staff to efficiently give confidence to customers when making their menu selection.

The Manager will ensure that:

- a) Labelling is checked for allergens - staff are trained to look at all the ingredients (including pre-packed ingredients, for example spice blends such as garam masala often contain mustard and sesame) and list each allergen in each dish.

b) Procedures are in place to prevent cross-contamination during storage, and preparation of food. Staff will use standard recipe cards and a matrix.

- Customers with food allergies will be identified when they book a meal or function, particularly when food is served as a buffet.
- At the time of order, service staff alert kitchen staff that the food they are to prepare is for somebody who is allergic to certain ingredients.
- The chef is able to provide guidance to staff highlighting which dishes contain what type of allergenic ingredient.
- Staff will not just remove the 'offending' allergen from a prepared dish and send it back on the same plate.
- Thorough cleaning will be carried out before and afterward handling possible allergens.
- Oils used for the cooking or preparation of possible allergens will not be re-used.
- Foods that contain allergenic ingredients are sufficiently separated from food containing allergenic ingredient, and enough utensils will be provided to prevent cross contamination.
- all procedures listed above are adhered to
- any issues or concerns are reported to the Manager

## Acrylamides

Acrylamide is a chemical substance formed naturally by a reaction between amino acids and sugars, typically in foods with high starch content, when cooked at high temperatures (above 120°C) such as in frying, roasting, toasting, grilling and baking. Acrylamide has the potential to cause cancer in humans; legislation is in place to reduce acrylamide levels in food.

Chichester Community Development Trust is committed to producing a safe food product and understands that the food business operator must ensure that all team members are aware of acrylamide as a food safety hazard and how it may be formed in the foods they produce.

Foods that maybe affected by acrylamides are:

Raw potato products – e.g chips, french fries, sliced potato crisps.

Bread products – e.g loaves, rolls, baguettes, toast, naan

Sweet bakery products – e.g scones, crumpets

Savoury bakery products – e.g crackers, crispbreads

The Food Safety Manager will ensure that food production teams:

- a) store raw potatoes that are going to be fried or roasted above 6°C (not in the fridge), in a cool, dark place.
- b) do not accept burned or over-baked products from a supplier
- c) use the most appropriate frying oil
- d) cut foods to similar sizes so that they cook evenly e.g chips
- e) soak cut potatoes in cold water for 30 – 120 minutes to remove excess sugars, rinse in clean water and drain  
OR soak for a few minutes in warm water, rinse and drain  
OR blanch before cooking

- f) when making dough products, extend the yeast fermentation time to help keep acrylamide levels lower
- g) cook food according to the manufacturers' instructions
- h) deep fry potato products using oil below 175°C, (not overfilling the baskets) to a golden yellow or lighter colour, to keep acrylamide levels lower and allow even cooking
- i) filter and change oils as required
- j) Bake bread and other bakery products to a golden yellow or lighter colour
- k) not over toast or burn foods
- l) dispose of foods that are over-cooked or burnt
- m) report any issues or concerns to the supervisor

All staff will be required to comply with company procedures and routines for safe food production of their foods.

## **Ice Storage and Service**

Ice is classified as a food under food hygiene regulations and therefore must be treated in the same manner as other food items. Ice may become contaminated with food poisoning organisms which may be passed on to consumers.

The water used for ice machines must meet drinking water standards and will be connected to a “direct” wholesome water supply (not via a storage tank).

Sources of contamination of ice include inadequate cleaning and poor hygiene practices when handling the ice. It is important that ice does not become contaminated by airborne particles, food handlers or dirty utensils.

Ice machines will be sited in areas free from dirt and dust, preferably off the ground and away from any sources of heat. There should be sufficient space and ventilation around the machine to allow for efficient air movement and ease of access.

Machines require servicing at least twice a year. Servicing should include cleaning and sterilising the internal ice making plates.

The exterior of the ice machine will be kept clean. The ice compartment will be cleaned at least weekly and immediately should there be any sign of mould or slime. After switching the machine off and removing and disposing of all ice, the compartment must be thoroughly cleaned and sanitised in accordance with manufacturers' instructions.

Staff should wash their hands before dispensing ice from the machine. Hands or a glass tumbler must not be used to collect ice. A clean scoop should be used. The door should be closed after collection.

The ice scoop should not be left in the machine but kept in a clean place in a clean lidded container and washed and sanitised daily.

Ice buckets and tongs should be in good condition and be washed daily.

Self-service of ice by customers is not recommended.

## **Cleaning and Disinfection**

### ***THIS IS A CRITICAL STAGE IN SAFE FOOD PRODUCTION***

Cleaning routines will be designed, implemented and monitored using a written cleaning schedule outlining the frequency of cleaning required together with the cleaning materials, equipment and methods to be used for each area and each piece of equipment.

#### **Cleaning Chemicals and Equipment**

Only cleaning products suitable for use in commercial food premises will be used that, when correctly applied to the manufacturer's specification, leave no toxic residue or perfume that may taint food.

The selected cleaning materials will be safe for the user and all staff will be aware of safe cleaning procedures. Safety Data Sheets will be available for each cleaning chemical and suitable personal protective equipment will be readily available where applicable.

Cleaning chemicals will be stored in their original, labelled containers and stored separately from food. If chemicals are to be diluted or decanted, the spray bottle or other receptacle must be clearly labelled. Only cleaning products required for immediate use will be kept in food areas.

Separate cleaning equipment will be used for food and non-food areas.

Disposable cloths will be used as preference. If used, washable cloths will be colour coded and laundered daily. Cleaning equipment will be kept clean and stored separately from food.

#### **Cleaning Standards**

Cleaning routines will be implemented and monitored with the aid of a cleaning schedule together with daily opening and closing check sheets.



Slicers and other potentially dangerous machinery and equipment should have warning signs displayed near to them. These items are to be cleaned only by trained, authorised personnel.

All staff will be trained, instructed and monitored in cleaning methods and procedures.

External areas will be kept visually clean and tidy, free from any build-up of debris that would inhibit efficient cleaning or harbour pests.

Internal areas will be kept visually clean. Surfaces and equipment that may come into contact with food or hands will also require disinfection. A 'Clean as you go' policy will be enforced in all areas with any spillage being cleaned immediately.

Floors will be maintained in a sound condition, free from obstruction, spillage and be dry. Warning signs will indicate recently washed, wet areas.

Stored items will be kept off the floor wherever possible to assist in efficient cleaning.

All staff will work according to the cleaning schedule.

Any items – surfaces or equipment in contact with food will be cleaned **and disinfected**.

A range of suitable, food safe cleaning agents/chemicals will be purchased and staff trained in correct and safe usage.

A range of suitable and sufficient cleaning equipment will be provided for use in all work areas, colour coded if appropriate.

The Food Safety Manager will undertake regular hygiene audits.

## **Dishwashing**

To maintain their efficiency, dishwashers will be regularly serviced and the dosing regularly checked. The inside of the machine should be cleaned on a daily basis to help prevent the build-up of scale or mould.

### **Dishwasher Check**

- Water softener / salt levels correct.
- Correct detergent dosing.
- Correct rinse-aid dosing.
- Wash cycle 50'C - 60'C.
- Rinse cycle over 82'C.  
(Check display thermometer, monitor with probe).
- Sufficient racks / Good condition.
- Items air dried before stacking / storing.
- Emptied daily & filters cleaned.

## **Manual Washing**

A two-sink method is necessary for manual washing, one for washing, the other for rinsing.

Wash temperatures should be at 60°C, the rinse temperature being high enough to allow fast air drying of washed items, with an adequate area of drying rack available to accomplish this.

Disposable paper towels will ideally be used for drying or polishing.

## **Waste Management**

A sufficient number of internal bins will be provided. Lidded bins will be foot operated. Bin bags will be taken to the external refuse store throughout the day before they are overflowing and at the end of each session.

External refuse containers will be pest-proof with sufficient capacity to contain all refuse produced with the lids of the containers closed. Refuse will not be stored on the floor in bags or in unsuitable containers such as cardboard boxes.

External refuse storage areas will be kept clear of debris and washed down weekly, or more frequently as required.

## **Waste Control**

Waste must be separated into food waste, recycling and general refuse.

Recycled waste must be separated into categories as stipulated by the collector and tidily stored in designated areas.

Food waste must be collected in bins lined with plastic sacks. Sacks then stored for collection in external bins. External bins must have tight fitting lids to be kept closed at all times.

Internal bins must be cleaned daily.

External bins and stand areas must be cleaned after each emptying.

Waste returned from functions must be sorted as above.

Waste oil must be clearly labelled and stored in the appropriate area until collection.

## **Pest Control**

A proactive approach to pest control management will be maintained.

Buildings, guttering and drains will be maintained in a good state of repair and any damaged surfaces made good. Any defects should be reported immediately.

External areas that may attract pests, providing harbourage, shelter, nesting material and access to food and water will be identified and addressed. The perimeter of each building will be kept clear of 'stored' items and unnecessary clutter. Vegetation close to buildings will be kept clear where possible with a distinct perimeter area maintained separating buildings and vegetation. Accumulation of static/stagnant water will be avoided.

All refuse will be stored in external bins with the lids firmly closed. The area around waste bins will also be kept clear of debris, being swept and cleaned in accordance with the cleaning schedule.

Waste must be collected frequently dependant on volume of waste produced. Cardboard waste will be flattened to reduce volume.

All buildings will be adequately proofed including close-fitting external doors open to food storage or preparation areas.

All food and non-food storage areas will be well lit to allow thorough cleaning and inspection.

Goods will be stored off the ground and, where possible, clear of the walls allowing adequate gangways between stacks to allow for inspection.

A pest control service contract will be maintained by the company to cover each of its venues.

The selection of pest control contractor will be based on:

- Their experience within food premises
- Their guaranteed response times
- Accreditation & references
- Insurance
- Approved methods and materials
- COSHH / Risk assessment
- A proactive approach to the task.

Any baiting laid down for pests must only be carried out by the contracted pest controller. The contractor is required to supply the manager or head chef with a 'Bait Map' indicating where bait boxes are located throughout the premises.

A report of each inspection carried out, with adequately details of actions taken, will be provided by the contractor to the manager or head chef after each inspection.

External doors to food preparation areas will be kept closed. Windows in food rooms that open directly to the outside will be fitted with fly screens.

Electronic fly killers will be carefully positioned over a floor area to cover each section and will be regularly cleaned and serviced.

Cleaning in accordance with the schedule will also provide the opportunity for staff to actively look for early signs of pest infestation. Areas and stores that are infrequently used will also be inspected regularly.

Staff will report signs of potential pest infestation to the manager.

A daily record of pest control monitoring will be maintained.

Pest Control records will be available at each venue for inspection by a visiting EHO.

## **Food complaints**

It is the policy of Chichester Community Development Trust that all complaints are logged, investigated, and any corrective action necessary, taken and recorded.

The Proprietor or Manager will personally contact the complainant