

Durham Community Action



Voluntary, Community and Social Enterprise (VCSE) Safeguarding Report

Supporting children, young people and vulnerable adults
with needs and/or risk

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Executive Summary

This report, delivered by Durham Community Action (DCA) in partnership with the Durham Safeguarding Children Partnership (DSCP) and Durham Safeguarding Adults Partnership (DSAP), explores how Voluntary, Community and Social Enterprise (VCSE) organisations and groups contribute to safeguarding across County Durham. It draws on data from a survey, focus group discussions, and interviews with organisations supporting children, young people, families, and vulnerable adults.

The findings confirm that VCSE organisations play a crucial role within local safeguarding systems. They provide early help, build trusted relationships, and offer responsive support that often reaches those who do not engage with statutory services. This work aligns closely with the national ambitions outlined in the *MacAlister Review (2022)* and highlighted by other system partners such as the NHS Confederation, which recognises the value of the VCSE sector within an integrated system.

Despite this strong contribution, the findings identified a number of challenges which include capacity, training access, communication barriers, feeling undervalued and complexity of language and processes.

Encouragingly, organisations are showing resilience. Some organisations have developed their own internal policies and training to strengthen early identification and prevention. Examples of strong practice include embedded 'cause for concern' processes, anti-bullying policies, internal support for volunteers, and partnership work with health, education, and local authority teams.

Stronger collaboration between the statutory and voluntary sectors will help to build confidence, and trust across the safeguarding system.

In summary, VCSE organisations are vital partners in keeping children, young people, and vulnerable adults safe. With the right support, recognition, and training, VCSE organisations can continue strengthening safeguarding systems in County Durham.

Introduction

Durham Community Action (DCA) is recognised as the leading infrastructure organisation for County Durham; we provide advice, support and assistance to frontline groups operating in the VCSE Sector and to various communities of interest.

We apply our knowledge and expertise within the VCSE into sector led networks, and multi-agency partnerships in County Durham including the Durham Safeguarding Adults Partnership and the Durham Safeguarding Children's Partnership.

The Safeguarding Partnerships consist of the core statutory safeguarding partners (Durham County Council, Durham Constabulary and Northeast and North Cumbria Integrated Care Board (NHS) working with wider partners to ensure that children and adults are safe in County Durham. By working together organisations are better able to identify and respond to the needs of adults and children and young people.

Durham Community Action works with [Durham Safeguarding Children Partnership](#) (DSCP) and [Durham Safeguarding Adults Partnership](#) (DSAP) by providing a voice for the VCSE sector so they can understand how local community groups and organisations are responding to adults and/or children and young people's needs or risks.

Background

This background sets out the context for DCA's work with DSCP and DSAP to strengthen how community insight informs safeguarding priorities.

Earlier this year, DCA was invited by the DSCP to review performance indicators that the Think Tank could use to support the priorities set out in the DSCP Strategic Business Plan 2025–2027. This plan outlines a shared vision to keep children and young people safe, using evidence and insight from a range of partners to understand how well priorities are being met.

Working with DSCP and DSAP, DCA developed a plan to gather insight from VCSE organisations and community groups. This ensures the work of the sector in County Durham is recognised and contributes to local safeguarding priorities.

Nationally, there is increasing recognition of the role VCSE organisations play in supporting children, young people, families and adults. The MacAlister Review ([2022](#)) and guidance from the NHS Confederation ([2022](#)) both highlight the importance of integrated working between public services and the VCSE sector, particularly in prevention and early intervention. These priorities align closely with local ambitions in County Durham to strengthen community-based support.

During the Covid-19 pandemic, [mutual aid groups](#) in County Durham mobilised volunteers to support community wellbeing and vulnerable adults. Many continued this work during the aftermath of Storm Arwen; these examples demonstrate the sector's ability to build trusted relationships with vulnerable individuals in communities and respond to local needs in crisis.

Recent data from the English Indices of Deprivation ([IoD 2025](#)) show that County Durham experiences higher levels of health and disability deprivation than 94% of local authority districts in England. With deprivation closely linked to increased risk, this reinforces the importance of effective cross-sector collaboration to keep children, young people, families and vulnerable adults safe.

This context highlights the importance of continued collaboration with VCSE partners to strengthen safeguarding practice and inform local priorities.

Methodology

Our overarching question for this work was **“How do VCSE organisations and community groups support children, young people and/or adults with needs and risk?”**

We wanted to show the important work that VCSE organisations do, how this links to DSCP and DSAP’s priorities, and whether more support is needed to help organisations in their role working with local communities.

We know that some organisations and groups may feel unsure about their role in supporting people with needs and risk. Because of this, we planned our data collection carefully so that everyone could take part in a way that felt comfortable. Despite this approach we still struggled to engage organisations, through our experience we know some organisations feel unsure or uncomfortable discussing this topic. We also know that capacity is an issue for organisations and this can prevent engagement. This is an important point to be acknowledged and considered moving forward.

We shared an anonymous online survey using Survey Monkey. This gave organisations and groups the chance to share their experiences and views. The survey was open from August to the end of October 2025.

We also offered organisations the chance to talk to us directly, either in person or in writing. These conversations were written up afterwards and stored securely.

In addition, we ran a focus group that brought together organisations supporting children, young people and adults. This gave people the opportunity to share ideas and discuss what works well and what challenges they face. Notes from the focus group were written up and saved securely.

The survey gave us both numbers (quantitative data) and written comments (qualitative data). We looked at the numbers to spot trends and relationships, and we looked at the written comments to find common themes and ideas.

For the interviews and focus group, we focused on the stories and examples people shared. We used thematic analysis, looking for key themes and patterns across everything that was said.

All information collected was kept anonymous and stored securely. No individuals or organisations are named in the findings.

Survey Findings

The survey findings within this report represent a mixture of both qualitative and quantitative data collected from VCSE organisations and groups who support children, young people and vulnerable adults.

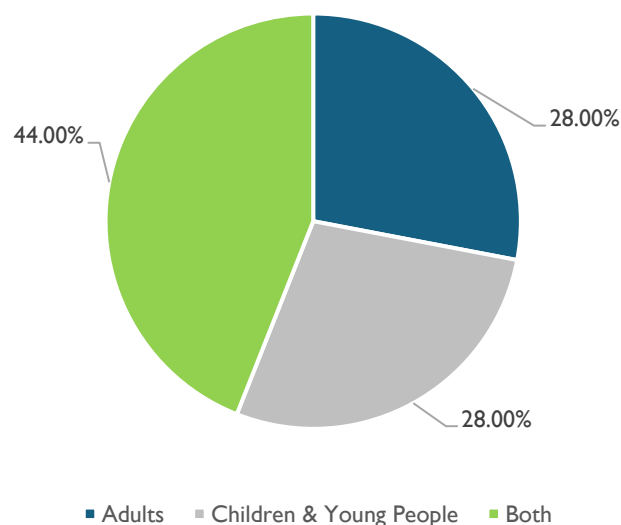


A total of 32x surveys were returned. Unfortunately, 18x surveys were blank so these were not included in the final total.

A total of **14x organisations** completed the online survey.

The data below shows how many organisations (who completed the survey) support either children, adults or both. 14 organisations shared responses, 44% of organisations support both children, young people and adults.

Q1. Does your organisation support children, young people and/or adults?



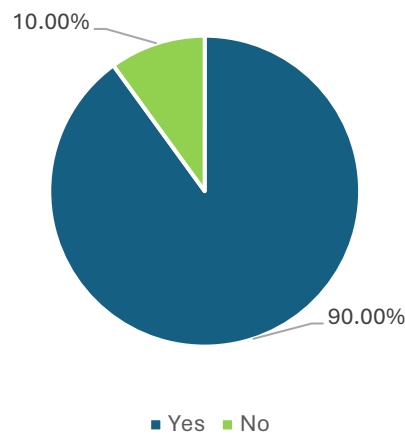
Organisations supporting children and young people

The data below shows the results for all questions related to 10x organisations supporting children and young people. The types of organisations ranged from large and small youth charities to a community centre, to an entirely volunteer ran organisation. 7 out of 10 organisations said they had at least one safeguarding lead.

Early Help

Q2. Prior to this survey, was your organisation or community group aware of the Durham's Early Help Offer?

A total of **10x organisations** answered this question and **2x** shared other comments.



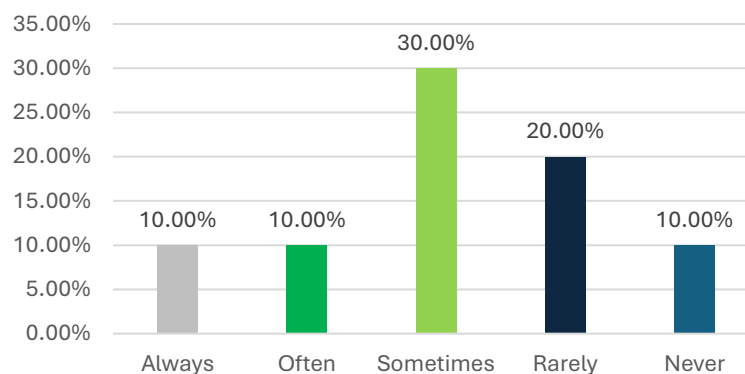
Comments shared:

"Know of it but would like to have more information."

"We are aware of Early Help, of the Family Hubs and importance of safeguarding, but not the full scope of the strategy."

Q3. Does your organisation or community group actively use and promote Durham's Early Help offer so parents, carers and young people can access support available?

A total of **10x organisations** answered this question and **3x** shared other comments.



Comments shared:

“Unsure on what exactly they offer and who we can refer for help.”

“We utilise the service ourselves and if circumstances arose, we do signpost families to the Early Help service.”

“Didn't know how they could help or how we could refer.”

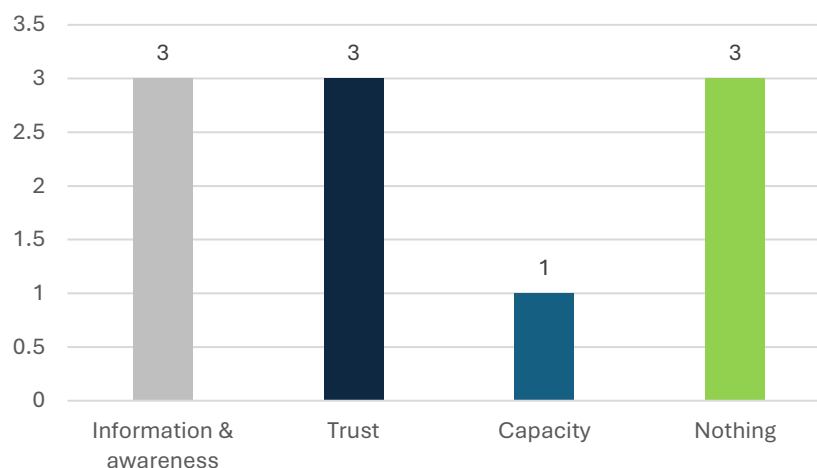
Q4. What, if anything, gets in the way of you promoting Durham’s Early Help offer?

A total of **10x organisations** answered this question providing comments.

3x organisations stated **nothing** gets in the way of them promoting the Early Help offer.

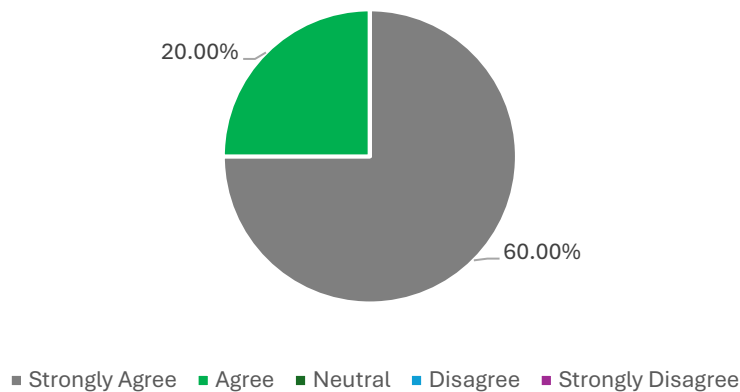
However, 3x organisations indicated barriers in relation to **trust**, stating families don’t feel comfortable using Early Help, and organisations are concerned about damaging relationships. Furthermore, 1x of these organisations suggested that partnership working is a barrier.

Moreover, 3x organisations indicated **information and awareness** is a barrier, with 1x of these organisations feeling unsure or feeling staff are not aware. Finally, 1x organisation indicated **time** can be a barrier.



Q5. Do you agree with this statement: my organisation or community group is confident at identifying needs or risk impacting children and young people?

A total of **10x** organisations answered this question and **2x** left comments, all organisations indicated they were confident



Comments shared:

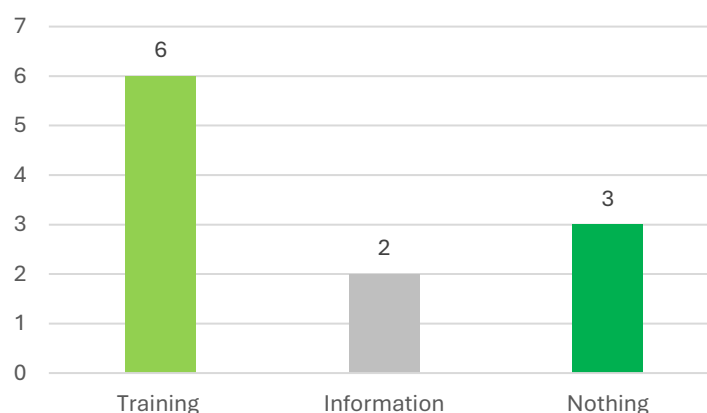
“All organisation members are trained in safeguarding, and we have 2 safeguarding leads.”

“Over 25 years’ experience of working with and for children and young people”

Q6. If relevant, is there any information or support which would help your organisation or community group to feel more confident in identifying early signs of need or risk impacting children and young people?

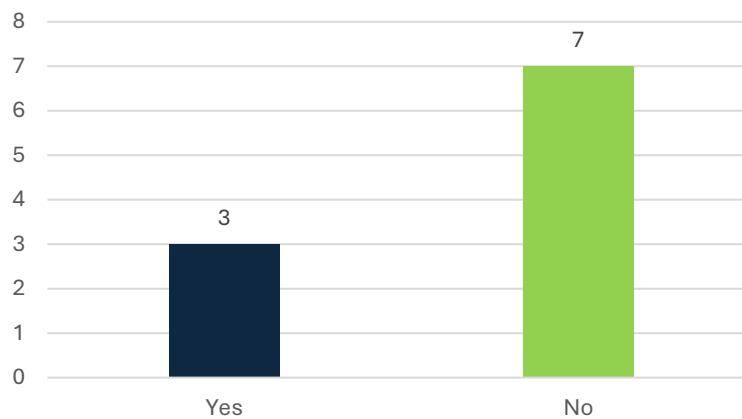
A total of 10x organisations answered this question, sharing open comments.

3x organisations indicated **nothing** else needed to support their organisation to feel more confident. However, **6x** organisations indicated more **training** would be useful with a focus on refresher training, training to spot early signs of risk and training suitable for younger volunteers. Furthermore, **2x** organisations suggested **information updates** would be useful.



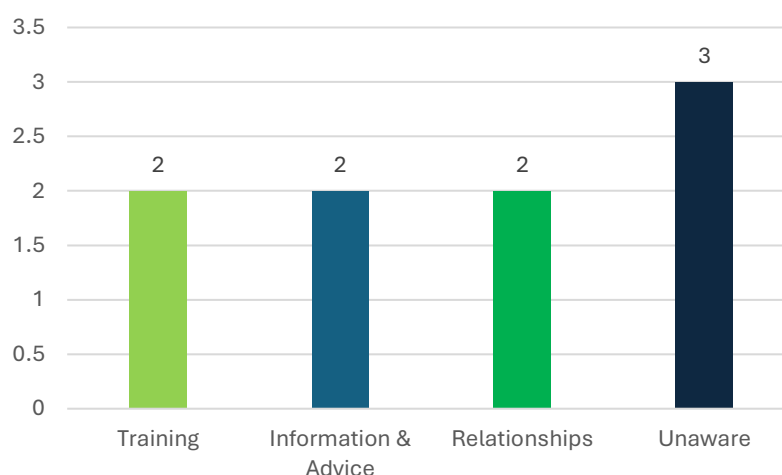
Q7. A Lead Practitioner may undertake early help assessments and/or co-ordinate support for the child and family, e.g. through Team Around the Family (TAF) meetings ‘Have you ever taken the role of Lead Practitioner for a child/family?’

A total of 10x organisations answered this question.



Q8. Is there any support that you would find helpful around the role of Lead Practitioner?

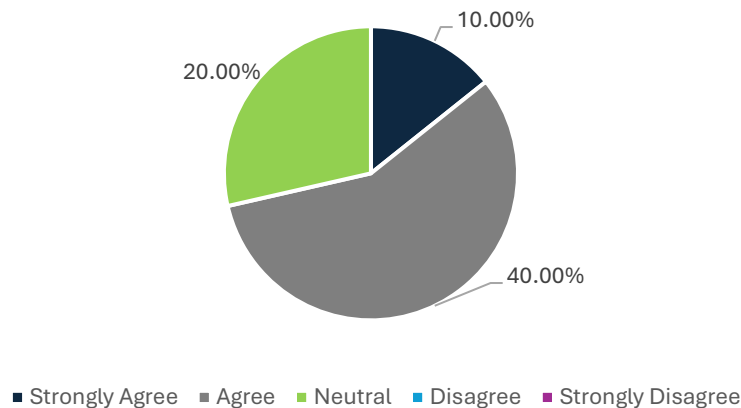
A total of 10x organisations answered this question. 1x organisation indicated they don’t need any other support and felt confident in the role of a lead practitioner. However, 3x organisations seemed **unaware** this was an option, 2x indicated **training** would be helpful, particularly in terms of being able to attend TAF meetings, 2x indicated **information and advice** would be helpful and 2x indicated their **working relationship** with the local authority improving would be helpful, with one stating they felt undervalued.



Trauma Informed Practice

Q9. Do you agree with this statement: my organisation or community group practice in a trauma informed way?

10x organisations answered this question, and 3x left open comments. 6x organisations said they practice in a trauma informed way, whereas other organisations indicated uncertainty due to understanding or staff ability.



Comment shared:

“No training but would like to think we could learn more to be able to do this.”

“Neutral as this is dependent on our team’s knowledge of trauma informed practice. At the moment we have a staff member with a social work degree so they have that particular knowledge, but not all workers would.”

“Would like more information on how I can support our families better in this area.”

Q10. If relevant, what information or support would help your organisation or community group to feel more confident in practicing in a trauma-informed way?

A total of 10x organisations answered this question leaving open comments.

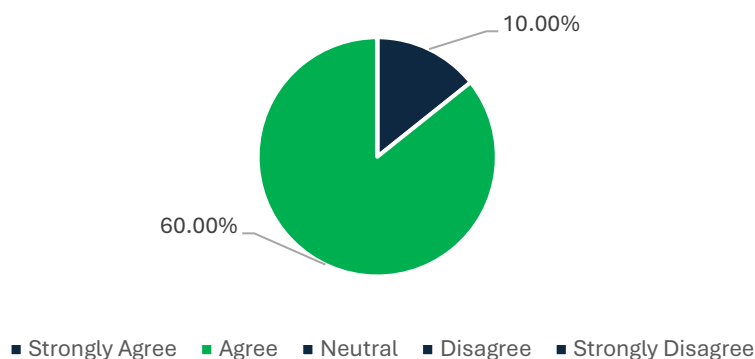
9x organisations indicated **training** would be helpful to support their confidence, with 1x organisation stating training to support first time interactions with young people where no relationship has formed would be useful. 1x organisation said no to this question.



Harm outside of home

Q11. Do you agree with this statement; my organisation or community group are aware of the signs of harm outside of the home and are confident on the steps to take to disrupt or minimise the risks of this?

A total of 10x organisations answered this question, and 3x left other comments. All organisations have indicated they are aware of signs of harm outside of home, but a few organisations feel more training would be useful, particularly in digital risks.



Comments shared:

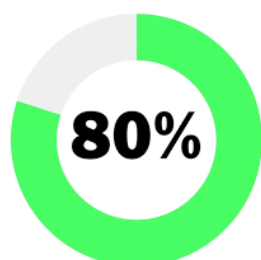
“More regular training sessions”

“Would like more support in helping families and my organisation recognize and support this.”

“Our confidence to disrupt or minimise risk would depend on the type of harm being experienced, for example harm threatened or actually taking place in the local community or public spaces may be easier to spot, assess and intervene than harms perpetrated online or within peer groups.”

Q12. If relevant, what information or support would help your organisation or community group to feel more confident in working with children and young people at risk of harm outside the home?

A total of 10x organisations answered this question leaving open comments. 8x organisations indicate more **training** would be helpful, different training formats suitable for young volunteers, training on digital risks and sexual exploitation. 1x organisation said nothing would help them and 1x organisation said feeling more valued would help them.

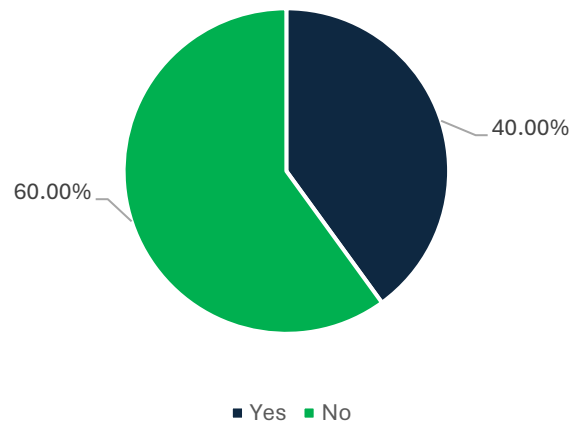


**Said training would increase
their confidence identifying
signs of harm outside of home**

Working with Durham Safeguarding Children Partnership

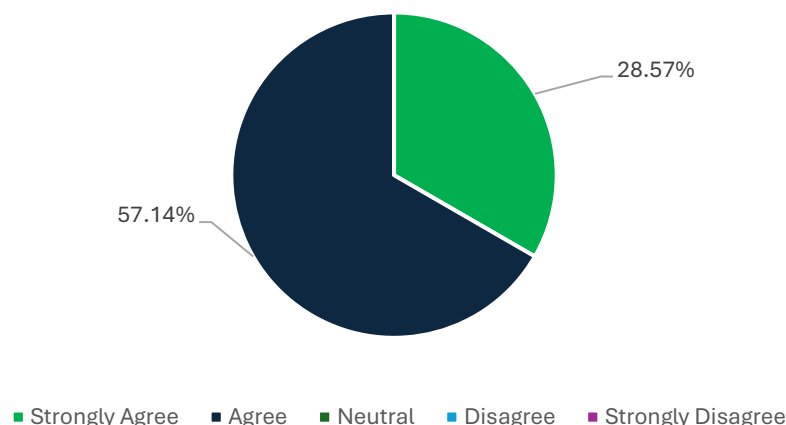
Q13. Does your organisation feel you are able to input into Durham Safeguarding Children Partnership work and that you have the relevant information from the partnership about training and updates?

A total of 10x organisations answered this question.



Q14. Do you agree with this statement; my organisation or community group is confident on when and how to share information relating to safeguarding children, young people?

A total of 10x organisations answered this question, and 1x left another comment. 9x organisations indicated they were confident on when and how to share information relating to safeguarding children. 1x organisation doesn't feel information is returned to them.



Comment shared: "Agree, however it isn't done the other way around. we have little to no access to information about young people who access our services."

Good Practice and Barriers

We wanted to provide VCSE organisations and groups with an opportunity to highlight their valuable work and mention any other barriers.

Q15. Do you have any good practice examples on how your organisation approaches safety and wellbeing for children, young people?

A total of 6x organisations answered this question leaving open comments. 1x organisation said they had no examples to share and 5x organisations shared examples such as **internal training, tools such as diary logs** and a **positive internal culture** to capture concerns which help to build a picture over time.

Example comment:

Diary logs where we note any signs of concerning behaviour or notable comments or incidents which are not enough to cause alarm for referral but would help to build a picture if this was to change in the future. We have a culture of 'never do nothing'.

Q16. Are there any barriers your organisation or community group face when responding to concerns about safety and wellbeing related to children & young people?

A total of 6x organisations answered this question leaving open comments. 4x organisations skipped this question. 2x organisations said there were no barriers. 1x organisation indicated **time** was a barrier and 3x organisations indicated that **working relationships** was a barrier, with a particular emphasis on **feeling undervalued** and a **lack of communication** from statutory providers.

Example comment:

Lack of information sharing between services and the youth sector not been 'seen' or 'valued' as a key stakeholder.

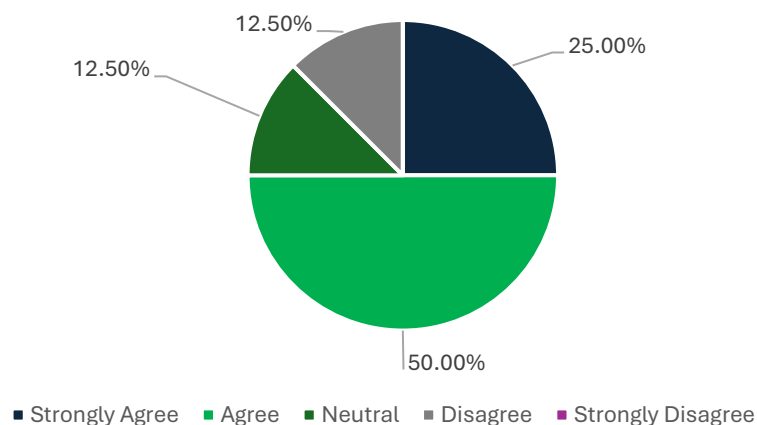
Organisations supporting vulnerable adults

The data below shows the results for all questions related to 8x organisations supporting vulnerable adults. 2x organisations supporting children and young people indicated they also supported adults but didn't complete the adult survey questions. The types of organisations were harder to distinguish with more organisations not stating their name, but included a community centre, larger charities working with families and a community interest company. 4 out of 10 organisations said they had at least one safeguarding lead.

Mental Health Capacity Act

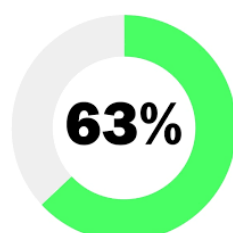
Q1. Do you agree with this statement: my organisation or community group feel confident in understanding the standards on how to use the Mental Health Capacity Act?

A total of 8 organisations answered this question. 6x organisations felt confident understanding the standards of the Mental Health Capacity Act, 1x organisation were neither confident or unconfident and 1x organisation felt unconfident.



Q2. If relevant, what information or support would help your organisation or community group to feel more confident in understanding the Mental Health Capacity Act?

A total of 8x organisations answered this question leaving open comments. 2x organisations felt nothing would increase their confidence. 5x organisations indicated **training** would increase their confidence, particularly training updates on policy changes, and 1x organisation indicated **case studies** would increase their confidence.

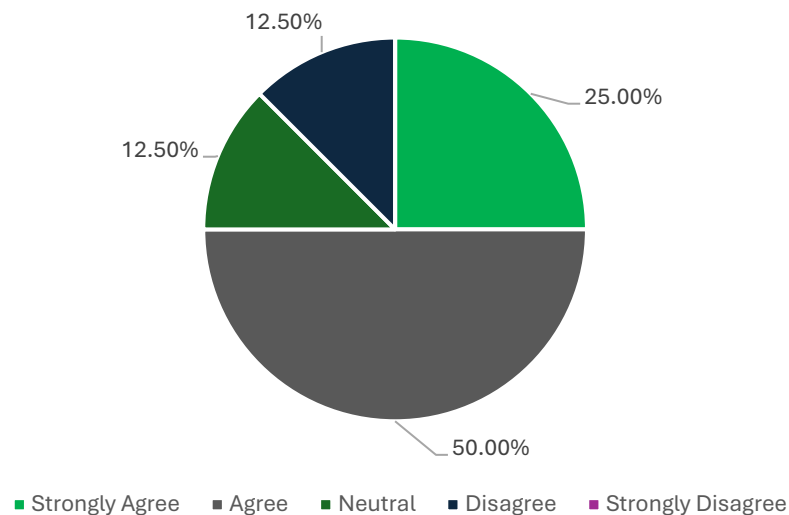


Said training would help them feel more confident understanding the mental health capacity act

Self-Neglect and Early Prevention

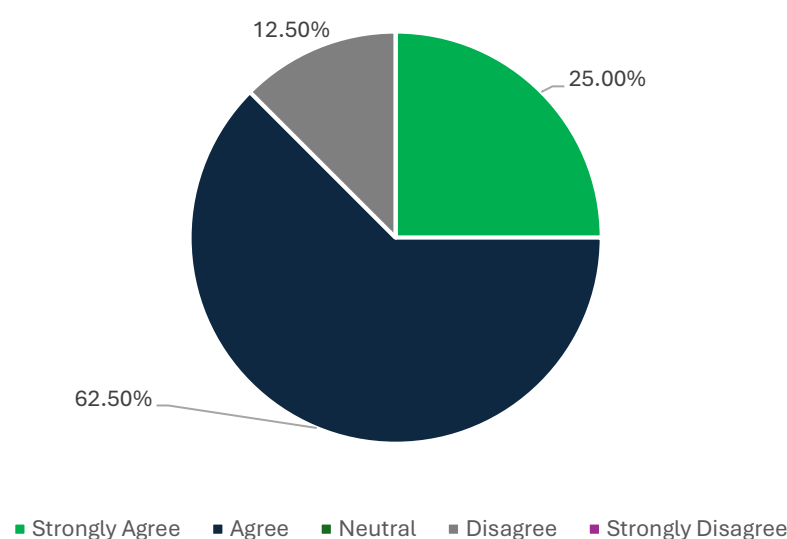
Q3. Do you agree with this statement: my organisation or community group is confident in identifying signs of self-neglect when working with vulnerable adults?

A total of 8x organisations answered this question, with 6x organisations indicating they are confident in identifying signs of self-neglect. 1x organisation felt neither confident or unconfident, and 1x organisation felt unconfident.



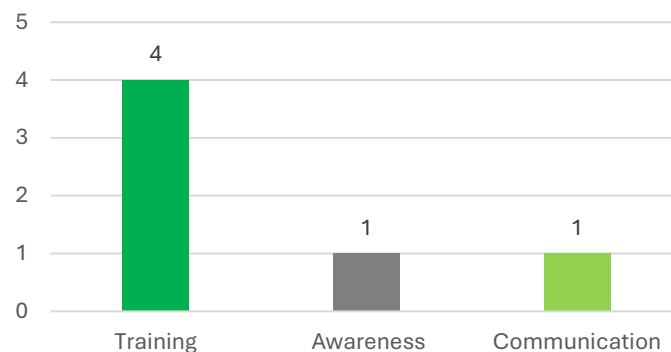
Q4. Do you agree with this statement: my organisation or community group is confident at identifying needs or risk impacting vulnerable adults?

A total of 8x organisations answered this question, with 6x organisations indicating they are confident in identifying needs or risk. 1x organisation felt unconfident.



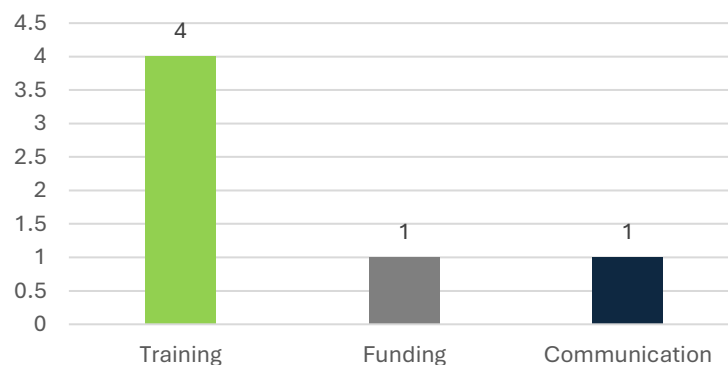
Q5. If relevant, is there any information or support which would help your organisation or community group to feel more confident in identifying early signs of need or risk impacting vulnerable adults?

A total of 8x organisations answered this question leaving open comments, with 2x organisations stating nothing would help them feel more confident in identifying early signs of need or risk. 4x indicated **training**, particularly in policy updates would help them feel more confident. 1x organisation felt better **communication** between multi-agency professional would increase their confidence and 1x organisation indicated that more **awareness** was needed in the community to support individuals understand how to manage medication they need.



Q6. If relevant, what information or support would help your organisation or community group feel more confident in identifying signs of self-neglect in vulnerable adults?

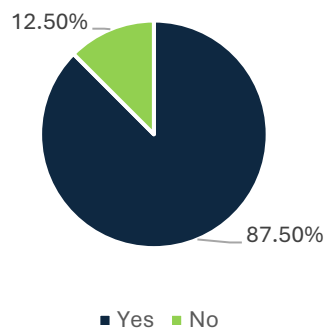
A total of 8x organisations answered this question leaving open comments, with 2x organisations stating nothing would help them feel more confident in identifying signs of self-neglect. 4x indicated **training**, particularly in refresher training and policy updates would help them feel more confident. 1x organisation felt better **communication** between multi-agency professional would increase their confidence and 1x organisation indicated that more **funding** was needed to support individuals in the community develop life skills and understanding of self-care.



Working with Durham Adult Safeguarding Partnership

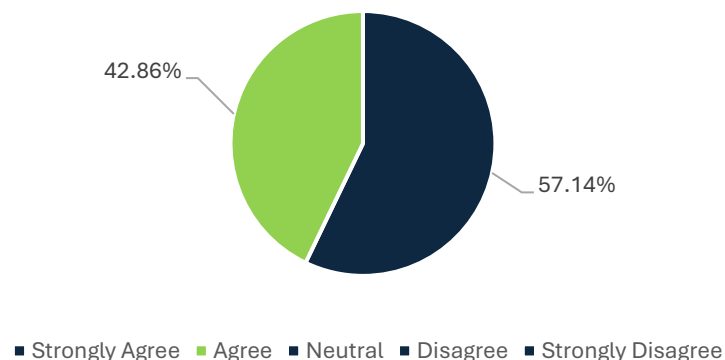
Q7. Does your organisation feel you are able to input into Durham Safeguarding Adult Partnership work and that you have the relevant information from the partnership about training and updates?

A total of 8x organisations answered this question. 7x organisations felt able to input into DSAP's work. 1x organisation felt like they were unable to input into DAP's work.



Q8. Do you agree with this statement; my organisation or community group is confident on when and how to share information relating to safeguarding adults?

8x organisations answered this question, and all 8x organisations felt confident on when and how to share information relating to safeguarding adults.



Good Practice and Barriers

Q9. Do you have any good practice examples on how your organisation approaches safety and wellbeing for adults?

A total of 7x organisations answered this question leaving open comments and 1x organisation skipped this question. 1x organisation said they had no examples to share and 6x organisations shared examples such as **regular staff training**, adherence to **policy and procedures**, **risk management systems** and **collaboration** with other agencies/organisations.

Example comment shared:

Yes, collaboration with Sensory Team, ensure clients has full understanding reason of our confidentially feel trusted to service and clients that they feel open to approach for any service for support.

Q10. Are there any barriers your organisation or community group face when responding to concerns about safety and wellbeing relate to adults?

A total of 7x organisations answered this question leaving open comments. 4x organisations said there were no barriers, with one stating lines of communication between agencies has been effective. However, 3x organisations indicated **communication** was a barrier, with 1x organisation mentioning better information sharing between social workers, care workers and care homes was needed. 1x of these organisations stated some clients don't feel comfortable sharing intimate details straight away and another stated that language barriers was an issue particularly for those clients who required British Sign Language or English isn't their first language.

Example comment shared:

Communications - British Sign Language (BSL) due to some clients struggling with English as their first language is BSL.

Q11. Any other comments you would like to share?

A total of 7x organisations answered this question leaving open comments. 5x organisations had no other comments to share. 1x organisation indicated more **training videos** in BSL would be useful and help support clients understanding. 1x organisation indicated **waiting times** for external referrers can sometimes hold up their internal risk assessment process.

Example comment shared:

External referrer's sometimes do not complete
risk assessments which can hold up the
process.

Focus Group

A two-hour focus group was conducted with 6x organisations taking part. The organisations who participated included a community centre, foodbank, larger charities supporting adults, and smaller charities supporting children and young people. Participants included both senior and frontline professionals.

The focus group participants were asked these key questions:

1. What is your name, which organisation or community group are you from, and who do you support?
2. When you hear the word safeguarding, what thoughts or feelings come to mind?
3. When you hear the language and terms used around safeguarding, what thoughts or feelings come up for you?
4. When you think about safeguarding resources, training, and information available to organisations and groups, what thoughts or experiences come to mind?
5. When you think about the process of seeking advice or reporting safeguarding concerns, what thoughts or experiences come to mind about how well it meets your organisation's needs?
6. When you think about making a referral or contacting the safeguarding teams, what thoughts or experiences come to mind?
7. Are there any other thoughts, experiences or anything else you would like to discuss that we haven't covered in today's focus group?

Participants discussed the organisations they represent and the ways they support their communities. Even within this small group, it was clear that the voluntary sector's contribution is nuanced, far-reaching, and deeply rooted in local needs.

Community support and reach

The organisations represented provide a wide range of services and activities within their communities. Three organisations support young people, reaching hundreds of young people per year. A community centre hosts a range of activities and clubs, reaching children, young people, adults with learning disabilities, and older people. Two further organisations work with adults and older people in their communities, often supporting entire families.

Most organisations deliver work that addresses disparities and inequalities faced by the individuals they support. As a result, they are likely to meet, and build trusted relationships with, vulnerable children, young people, and adults.

Safeguarding pressures and capacity

Some participants said they feel under pressure and find the safeguarding process daunting, suggesting that capacity can be a challenge for many organisations.

One participant stated: *“My heart sinks, the time it takes, the energy required both physically and mentally, the phone calls, sometimes at 9pm when I’m at home with my family, and I’ll be required to switch back to professional mode, this weighs on you. Younger staff and volunteers rely on you; they have a lack of training and confidence.”*

Language, understanding, and communication

Participants highlighted that language and terminology can be a challenge when discussing safeguarding.

Some mentioned difficulties in understanding and awareness, particularly when working with young people around mental health or allegations.

Others said that parents sometimes do not understand what “safeguarding” means and may raise concerns that are not considered safeguarding issues.

One participant commented on the time spent clarifying issues: *“Sometimes we have to spend time communicating with both families and young people and spend time fact finding.”*

Overcoming challenges

Participants shared examples of how they are tackling these issues within their organisations. Two participants have implemented ‘cause for concern’ systems, which capture low-level concerns from staff to ensure early intervention and prevention.

Another organisation has implemented an anti-bullying policy and encourages staff to follow up on concerns, emphasising the importance of maintaining a positive organisational culture.

Feeling devalued and excluded

Some participants said they feel “devalued”, “irrelevant”, and not involved once referrals are made to safeguarding. They expressed a desire to collaborate more closely and felt they could add value to Team Around the Family (TAF) meetings if allowed.

One participant said: *“As a professional, I’ve needed to become more vocal to be listened too. I feel like I have to be prepared to fight to get something done. What about smaller organisation or groups who don’t have this confidence?”*

Another said: *“Volunteers and staff make multiple reports about vulnerable adults to social care direct and we get no help; we just get told the case is closed.”*

A further participant shared concerns about communication with schools: *“Why do schools make a young person disclose to them again, even though we’ve received the disclosure and reported it, it makes us feel undervalued and it’s not good for the young person.”*

Training, Resources, and Support

When asked about training and support, many participants said more training would be useful.

They suggested:

- More training on lower-level safeguarding scenarios.
- Training delivered in different formats and at different times.
- Short training videos suitable for volunteers and young volunteers.

The main concern was that current training options are not accessible or suitable for volunteers. One participant said: *“The online training course offered is always booked up, then all volunteers have left to do is a workbook which isn’t good enough.”*

Some organisations are developing their own internal training and resources.

Collaboration

Participants said collaboration with the Local Authority Designated Officer (LADO) for advice and reporting is generally positive, with one stating: “LADO element process generally positive – one of the officers is excellent.”

However, others said that initial telephone calls to make reports were not effective, and that follow-up communication was often lacking. Some also mentioned duplication of effort within the triage process.

Collaboration with other agencies was mixed,

One participant said: *“Sometimes I go to police and housing to get help, and I get passed around, feel like duty of care is being passed around.”*

Another said: *“GP’s are good at picking things up and helping.”*

Concerns About Making Referrals

Participants expressed concern about making safeguarding referrals for several reasons, including:

- Feeling less respected than other sectors.
- Pressure and reputational risk.
- The emotional toll and sense of responsibility.

Participants said that training videos, more advice, mental health support, and external support would be helpful. One participant shared: *“Information about what to do next, charities have to report high level safeguarding incidences to their funders and the charity commission, I nearly missed this once, and its low to process, ...just having someone to sit down with to reflect on what happened and to say this is what you need to do next would be helpful.”*

The same participant added that their response to a safeguarding incident ultimately strengthened their relationship with their funder.

This focus group highlighted the vital role of voluntary organisations in safeguarding and community wellbeing. In some scenarios these organisations are finding solutions to challenges through innovation. They are embedded in their communities and often act as trusted points of contact for vulnerable individuals. However, they face challenges relating to capacity, training, communication, and collaboration.

Improving access to training, ensuring better communication, and offering support to staff and volunteers could help strengthen safeguarding confidence and outcomes across the voluntary sector.

Interviews and other insight

Interview

We interviewed 1x organisation that supports vulnerable adults and families.

The interview findings highlight several key themes related to safeguarding practice, partnership working, service delivery challenges, and organisational learning within the voluntary and community sector (VCS) setting.

Training

Staff access safeguarding training through the DCA, as well as suicide awareness training provided by the DCC Public Health team. A trauma-informed approach underpins service delivery, supported by Rockpool training. Staff and volunteers are confident in identifying and escalating concerns, with clear policies and procedures in place for escalation, including examples of collaborative responses with local police and housing providers.

Partnerships and working with others

Strong relationships exist with a range of partners, including the Public Health team, Durham Office of the Police and Crime Commissioner, and County Durham SARC. The organisation works closely with other VCS bodies such as Investors in Children, If U Care Share, and RSACC. Collaboration through the Domestic Abuse Forum and Team Around the Family (TAF) meetings is valued, though the lack of consistent VCS representation within some multi-agency spaces was mentioned as a gap. Professional relationships with GPs have developed into examples of good practice. Despite a long history of service delivery, staff report that they are sometimes still asked to reintroduce their organisation to safeguarding partners.

Referrals and information sharing

The organisation receives referrals from other organisations and projects, but has ceased accepting self-referrals due to safeguarding and information-sharing concerns. A significant challenge is the lack of complete information on clients during referral, which can impact safeguarding assessments and service planning. The organisation has systems in place for reporting and following up information-sharing issues.

Good Practice

The organisation is not a mental health specialist service and therefore faces limitations when working with individuals with more complex mental health needs, such as psychosis. They adapt internal group structures to prevent the formation of cliques and maintaining a safe environment. Other examples of practice, include collaborative safeguarding working with police and housing providers, support vulnerable adults within the Gypsy, Roma and Traveller community and delivering effective trauma-informed workshops.

Funding and capacity

Funding constraints remain a challenge, directly affecting service continuity. A current example is the loss of the counselling service following the end of Ministry of Justice funding. Despite these pressures, the VCS network surrounding the Crees is described as “invaluable” for peer support, shared problem-solving, and bridging gaps when statutory pathways are unclear.

Overall, the organisation demonstrates strong safeguarding awareness, adaptive service delivery, and collaborative working, but faces ongoing barriers related to incomplete information, funding uncertainty, and recognition within multi-agency systems.

Other insight

1x organisation supporting older adults was unable to join the focus group and opted to share some feedback via email. Both paid staff members and volunteers support older people in the community.

They said:

Referrals can be problematic, involving a number of phone calls, emails and chasing up. We rarely receive any updates – even to let us know if contact has been made or an investigation has taken place. This makes it difficult for volunteers or staff to have confidence in the system.

Conclusion

This report highlights the crucial role that VCSE organisations play in safeguarding children, young people, families and vulnerable adults across County Durham. The insight gathered through surveys, interviews and the focus group demonstrate the sector's strong commitment to protecting and supporting individuals at risk, often through trusted relationships developed in our communities.

The findings highlight the innovative and preventative work of VCSE organisations. However, findings also show that many continue to face barriers relating to capacity, access to training, communication and collaboration. Smaller organisations and volunteer-led groups can find safeguarding processes complex and daunting. Despite these challenges, many are developing their own internal systems, policies and training to strengthen confidence and support their teams.

Partnership working remains both a strength and an area for improvement. Positive relationships with the Local Authority Designated Officer (LADO) and some statutory partners demonstrate what effective collaboration can achieve. However, inconsistent communication, duplication of processes, and limited feedback after referrals can leave organisations feeling undervalued or excluded from safeguarding pathways.

VCSE organisations would like accessible and flexible safeguarding training, particularly for volunteers and young people involved in the community. Furthermore, practical advice and external support for VCSE organisations was also highlighted. Addressing these needs would build confidence, resilience and capacity of VCSE organisations.

Overall, the evidence gathered through this work reinforces the importance of the VCSE sector as an equal safeguarding partner in County Durham. By strengthening cross-sector collaboration, improving communication, and ensuring access to appropriate training and support, safeguarding outcomes for children, young people and adults in County Durham can continue to improve through a shared approach.

Recommendations

The findings in this report highlight key opportunities for the *Durham Safeguarding Children Partnership (DSCP)*, *Durham Safeguarding Adults Partnership (DSAP)* and *Durham Community Action (DCA)* to strengthen collaboration with the VCSE sector. The following recommendations are based on the insight gathered through the survey, interviews and focus group.

Recommendation 1: Strengthen communication and feedback between statutory partners and the VCSE sector

- Develop consistent communication channels to ensure VCSE organisations receive updates and feedback following safeguarding referrals.
- Encourage more routine opportunities for VCSE representatives to participate in *Team Around the Family (TAF)* processes and partnership discussions.

Recommendation 2: Enhance training and capacity-building opportunities

- Increase access to safeguarding training suitable for volunteers, young people, and smaller community groups.
- Develop training videos and learning modules to complement online and face-to-face delivery, involving the sector in their development.
- Provide refresher and scenario-based training on, statutory responsibilities, early intervention, lower-level concerns, trauma-informed practice and harm outside the home.

Increase general awareness and understanding through information sharing

Recommendation 3. Consider additional emotional and practical support for VCSE organisations

- Create opportunities for debrief and reflection following safeguarding incidents, particularly for smaller or volunteer-led groups.
- Promote and encourage mental health and wellbeing support for those involved in emotionally demanding safeguarding work.
- Consider a peer-support forum coordinated by DCA.

Recommendation 4. Recognise and value VCSE organisations as an equal partner

- Involve more VCSE representatives in strategic planning, consultation and evaluation within DSCP and DSAP.
- Promote awareness of the sector's unique reach and contribution in addressing local inequalities and supporting early help.

Recommendation 5: Improve accessibility of safeguarding information and guidance

- Ensure safeguarding guidance, referral processes and resources are clear, consistent and easy to navigate for organisations of all sizes and levels of understanding.
- Provide information in inclusive formats such as British Sign Language (BSL) or plain English, where appropriate.

Recommendation 6. Continue to use community insight to inform safeguarding priorities

- Use this feedback to inform *DSCP* and *DSAP* business planning and performance monitoring.
- Demonstrate the impact of community engagement by sharing outcomes and improvements publicly with the sector.

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