

## Child Protection and Safeguarding Policy

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## Statement of intent

### **Safeguarding children is the responsibility of everyone.**

*‘Every child deserves the best possible start in life and the support that enables them to fulfil their potential. A secure, safe and happy childhood is important in its own right.’ (Statutory Framework for the Early Years Foundation Stage EYFS)*

Safeguarding at St Chads Community Project is considered everyone’s responsibility, as such our setting aims to create the safest environment which every child can achieve their full potential. St Chads Community Project is committed to safeguarding and promoting the physical, mental and emotional welfare of every child, both inside and outside of the charity premises. We implement a whole-organisation preventative approach to managing safeguarding concerns, ensuring that the wellbeing of children is at the forefront of all action taken.

We will do this by working in partnership with other agencies in accordance with **‘Working Together to Safeguard Children’ - March 2018**. Seeking to establish effective working relationships with parents/ carers and other colleagues, to develop and provide activities and opportunities that will help to equip children with the skills they need. This will include materials and learning experiences that will encourage our children to develop essential life skills and protective behaviours. We are aware that many children are the victims of different kinds of abuse and that they can be subjected to social factors that have had an adverse impact upon their lives, including domestic abuse, substance misuse, bullying and ritualistic abuse. We aim to create a safe environment where children can thrive and adults can work with the security of clear guidance.

### **Our aims**

This policy sets out a clear and consistent framework for delivering this promise, in line with safeguarding legislation and statutory guidance. It will be achieved by:

- Valuing, listening to and respecting children.
- Ensuring that the Board of Trustees, CEO, staff, volunteers, parents, service users and visitors are familiar with this policy and associated procedures. They understand their responsibilities under safeguarding legislation and statutory guidance, are alert to the signs of child abuse, and know to refer concerns to the Designated Safeguarding Lead.
- Having a copy of this document available to all trustees, staff, volunteers, parents, service users and visitors.
- Teaching children how to keep safe and recognise behaviour that is unacceptable.
- Providing effective management for staff and volunteers through one-to-one support, so that all staff and volunteers can follow policies and associated procedures confidently and competently.

- Identifying and making provision for any child that has been subject to, or is at risk of, abuse, neglect, or exploitation.
- Share concerns and relevant information with agencies who need to know and involving children, parents, carers and families appropriately.
- Using the charity's procedures to manage any allegations against staff and volunteers appropriately.
- Creating a culture of safer recruitment by adopting procedures that help deter, reject or identify people who might pose a risk to children.
- Ensuring that the CEO and any new staff and volunteers are only appointed when all the appropriate checks have been satisfactorily completed.
- Creating a safeguarding culture where staff, volunteers, children and their families, treat each other with respect and are comfortable about sharing concerns.

## Acronyms

This policy contains a number of acronyms used in the Education and Childcare sector. These acronyms are listed below alongside their descriptions.

Acronym	Long form	Description
CCE	Child criminal exploitation	A form of abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into taking part in criminal activity in exchange for something the victim needs or wants, for the financial advantage or other advantage of the perpetrator or facilitator, and/or through violence or the threat of violence.
CSCS	Children’s social care services	The branch of the local authority that deals with children’s social care.
CSE	Child sexual exploitation	A form of sexual abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity in exchange for something the victim needs or wants, for the financial advantage, increased status or other advantage of the perpetrator or facilitator, and/or through violence or the threat of violence.
DBS	Disclosure and barring service	The service that performs the statutory check of criminal records for anyone working or volunteering in a childcare setting.
DfE	Department for Education	The national government body with responsibility for children’s services, policy and education, including early years, schools, higher and further education policy, apprenticeships and wider skills in England.
DPO	Data protection officer	The appointed person with responsibility for overseeing data protection strategy and implementation to ensure compliance with the UK GDPR and Data Protection Act.
DSL	Designated safeguarding lead	A member of the senior staff team who has lead responsibility for safeguarding and child protection throughout the charity.
EHC plan	Education, health and care plan	A funded intervention plan which coordinates the educational, health and care needs for children who have

		significant needs that impact on their learning and access to education. The plan identifies any additional support needs or interventions and the intended impact they will have for the child.
ESFA	Education and Skills Funding Agency	An agency sponsored by the Department for Education with accountability for funding education and skills training for children, young people and adults.
FGM	Female genital mutilation	All procedures involving the partial or total removal of the external female genitalia or other injury to the female genital organs. FGM is illegal in the UK and a form of child abuse with long-lasting harmful consequences.
UK GDPR	UK General Data Protection Regulation	Legislative provision designed to strengthen the safety and security of all data held within an organisation and ensure that procedures relating to personal data are fair and consistent.
HBA	'Honour-based' abuse	So-called 'honour-based' abuse involves crimes that have been committed to defend the honour of the family and/or community.
HMCTS	HM Courts and Tribunals Service	HM Courts and Tribunals Service is responsible for the administration of criminal, civil and family courts and tribunals in England and Wales. HMCTS is an executive agency, sponsored by the Ministry of Justice.
IICSA	Independent Inquiry into Child Sexual Abuse	The Independent Inquiry into Child Sexual Abuse is analysing case files from the Disclosure and Barring Service to learn more about the behaviours of perpetrators who have sexually abused children in institutions, and to understand institutional responses to these behaviours.
KCSIE	Keeping children safe in education	Statutory guidance setting out schools and colleges' duties to safeguard and promote the welfare of children.
LA	Local authority	A local government agency responsible for the provision of a range of services in a specified local area, including education.
LAC	Looked-after children	Children who have been placed in local authority care or where children's services have looked after children for more than a period of 24 hours.

LGBTQ+	Lesbian, gay, bisexual, transgender and queer plus	Term relating to a community of people, protected by the Equality Act 2010, who identify as lesbian, gay, bisexual or transgender, or other protected sexual or gender identities.
NPCC	The National Police Chiefs' Council	The National Police Chiefs' Council is a national coordination body for law enforcement in the United Kingdom and the representative body for British police chief officers.
PLAC	Previously looked-after children	Children who were previously in local authority care or were looked after by children's services for more than a period of 24 hours. PLAC are also known as care leavers.
SENCO	Special educational needs coordinator	A statutory role within all educational and childcare settings maintaining oversight and coordinating the implementation of the organisation's special educational needs policy and provision of education to children with special educational needs.
VSH	Virtual school head	Virtual school heads are in charge of promoting the educational achievement of all the children looked after by the local authority they work for, and all children who currently have, or previously had, a social worker.

## Definitions

The terms “**children**” and “**child**” refer to anyone under the age of 18.

Child protection guidance points out that even if a child has reached 16 years of age and is:

- Living independently,
- In further education,
- A member of the armed forces,
- In hospital or in custody in the secure state,

They are still legally children and should be given the same protection and entitlements as any other child (DfE 2018a).

For the purposes of this policy, “**safeguarding and protecting the welfare of children**” is defined as:

- Providing help and support to meet the needs of children as soon as problems emerge.
- Protecting children from maltreatment, whether that is within or outside the home, including online.
- Preventing the impairment of children’s mental and physical health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

For the purposes of this policy, “**consent**” is defined as having the freedom and capacity to choose to engage in sexual activity. Consent may be given to one sort of sexual activity but not another, and can be withdrawn at any time during sexual activity and each time activity occurs. A person only consents to a sexual activity if they agree by choice to that activity, and has the freedom and capacity to make that choice. Children under the age of 13 can never consent to any sexual activity. The age of consent is 16.

For the purposes of this policy, “**sexual violence**” refers to the following offences as defined under the Sexual Offences Act 2003:

- **Rape:** A person (A) commits an offence of rape if they intentionally penetrate the vagina, anus or mouth of another person (B) with their penis, B does not consent to the penetration, and A does not reasonably believe that B consents.
- **Assault by penetration:** A person (A) commits an offence if they intentionally penetrate the vagina or anus of another person (B) with a part of their body or anything else, the penetration is sexual, B does not consent to the penetration, and A does not reasonably believe that B consents.

- **Sexual assault:** A person (A) commits an offence of sexual assault if they intentionally touch another person (B), the touching is sexual, B does not consent to the touching, and A does not reasonably believe that B consents.
- **Causing someone to engage in sexual activity without consent:** A person (A) commits an offence if they intentionally cause another person (B) to engage in an activity, the activity is sexual, B does not consent to engaging in the activity, and A does not reasonably believe that B consents. This could include forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.

For the purposes of this policy, “**sexual harassment**” refers to unwanted conduct of a sexual nature that occurs online or offline, inside or outside of the charity. Sexual harassment is likely to violate a child’s dignity, make them feel intimidated, degraded or humiliated, and create a hostile, offensive, or sexualised environment. If left unchallenged, sexual harassment can create an atmosphere that normalises inappropriate behaviour and may lead to sexual violence. Sexual harassment can include, but is not limited to:

- Sexual comments, such as sexual stories, lewd comments, sexual remarks about clothes and appearance, and sexualised name-calling.
- Sexual “jokes” and taunting.
- Physical behaviour, such as deliberately brushing against someone, interfering with someone’s clothes, and displaying images of a sexual nature.
- Online sexual harassment, which may be standalone or part of a wider pattern of sexual harassment and/or sexual violence. This includes:
  - The consensual and non-consensual sharing of nude and semi-nude images and/or videos.
  - Sharing unwanted explicit content.
  - Upskirting.
  - Sexualised online bullying.
  - Unwanted sexual comments and messages, including on social media.
  - Sexual exploitation, coercion, and threats.

For the purposes of this policy, “**upskirting**” refers to the act, as identified in the Voyeurism (Offences) Act 2019, of taking a picture or video under another person’s clothing, without their knowledge or consent, with the intention of viewing that person’s genitals or buttocks, with or without clothing, to obtain sexual gratification, or cause the victim humiliation, distress or alarm. Upskirting is a criminal offence. Anyone, including children and staff, of any gender can be a victim of upskirting.

For the purposes of this policy, the “**consensual and non-consensual sharing of nude and semi-nude images and/or videos**”, colloquially known as “**sexting**”, is defined as the sharing between children of sexually explicit content, including indecent imagery. For the purposes



of this policy, “**indecent imagery**” is defined as an image which meets one or more of the following criteria:

- Nude or semi-nude sexual posing
- A child touching themselves in a sexual way
- Any sexual activity involving a child
- Someone hurting a child sexually
- Sexual activity that involves animals

## **1. Legal framework**

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

### **Legislation**

- Children Act 1989
- Children Act 2004
- Safeguarding Vulnerable Groups Act 2006
- Sexual Offences Act 2003
- Female Genital Mutilation Act 2003 (as inserted by the Serious Crime Act 2015)
- Apprenticeships, Children and Learning Act 2009
- Equality Act 2010
- Counter-Terrorism and Security Act 2015
- The UK General Data Protection Regulation (UK GDPR)
- Data Protection Act 2018
- The Childcare (Disqualification) and Childcare (Early Years Provision Free of Charge) (Extended Entitlement) (Amendment) Regulations 2018
- Voyeurism (Offences) Act 2019
- Domestic Abuse Act 2021

### **Statutory guidance**

- DfE (2015) ‘The Prevent duty’
- DfE (2018) ‘Working Together to Safeguard Children’
- DfE (2018) ‘Disqualification under the Childcare Act 2006’
- DfE (2024) ‘Keeping children safe in education 2024’
- HM Government (2020) ‘Multi-agency statutory guidance on female genital mutilation’
- HM Government (2021) ‘Channel Duty Guidance: Protecting people vulnerable to being drawn into terrorism’

- Home Office and Foreign, Commonwealth and Development Office (2022) 'Multi-agency statutory guidance for dealing with forced marriage and Multi-agency practice guidelines: Handling cases of forced marriage'

### **Non-statutory guidance**

- DfE (2015) 'What to do if you're worried a child is being abused'
- DfE (2017) 'Child sexual exploitation'
- DfE (2024) 'Information sharing'
- DfE (2024) 'Sharing nudes and semi-nudes: advice for education settings working with children and young people'

This policy operates in conjunction with the following charity policies:

- 13.7 Prevent Duty Policy
- 11.4 Child-on-child Abuse Policy
- 11.3 Anti-bullying – Children and Young People Policy
- 14.6 Online Safety Policy
- 14.1 Data Protection Policy
- 14.2 Records Management Policy
- 13.6 Whistleblowing Policy
- 13.8 Child Friendly Safeguarding Policy
- 13.9 Allegations of Abuse Against Staff Policy
- 1.1 Recruitment Policy
- 11.2 Behaviour Policy

## **2. Roles and responsibilities**

All staff have a responsibility to:

- Consider, at all times, what is in the best interest of the child.
- Maintain an attitude of 'it could happen here' where safeguarding is concerned.
- Provide a safe environment in which children can thrive.
- Be prepared to identify children who may benefit from early help.
- Be aware of the charity's systems which support safeguarding, including any policies, procedures, information and training provided upon induction.
- Be aware of the role and identity of the DSL and deputy DSL.
- Undertake safeguarding training, including online safety training, during their induction – this will be regularly updated.
- Receive and understand child protection and safeguarding (including online safety) updates, e.g. via email, as required, and at least annually.

- Be aware of the local early help process and understand their role in it.
- Be aware of, and understand, the process for making referrals to CSCS, as well as for making statutory assessments under the Children Act 1989 and their role in these assessments.
- Make a referral to CSCS and/or the police immediately, if at any point there is a **risk of immediate serious harm** to a child.
- Support social workers in making decisions about individual children, in collaboration with the DSL.
- Be aware of and understand the procedure to follow in the event that a child confides they are being abused, exploited or neglected.
- Be aware that a child may not feel ready or know how to tell someone that they are being abused, exploited or neglected, and/or may not recognise their experiences as harmful.
- Maintain appropriate levels of confidentiality when dealing with individual cases.
- Reassure victims that they are being taken seriously, that they will be supported, and that they will be kept safe.
- Speak to the DSL if they are unsure about how to handle safeguarding matters.
- Be aware of safeguarding issues that can put children at risk of harm.
- Be aware of behaviours that could potentially be a sign that a child may be at risk of harm.

Childcare practitioners, including the Head of Children Services, have a responsibility to:

- Safeguard children's wellbeing and maintain public trust in the childcare profession as part of their professional duties.

The Trustees in collaboration with the CEO and Head of Children Services has a duty to:

- Take strategic leadership responsibility for the charity's safeguarding arrangements.
- Ensure that the charity complies with its duties under the above child protection and safeguarding legislation.
- Guarantee that the policies, procedures, and training opportunities in the charity are effective and comply with the law at all times.
- Guarantee that the charity contributes to multi-agency working in line with the statutory guidance 'Working Together to Safeguard Children'.
- Confirm that the charity's safeguarding arrangements take into account the procedures and practices of the LA as part of the inter-agency safeguarding procedures.
- Understand the local criteria for action and the local protocol for assessment, and ensure these are reflected in the charity's policies and procedures.
- Comply with its obligations under section 14B of the Children Act 2004 to supply the local safeguarding arrangements with information to fulfil its functions.

- Ensure that staff working directly with children read at least Part one of KCSIE.
- Ensure that staff who do not work directly with children read either Part one or Annex A of KCSIE.
- Ensure that mechanisms are in place to assist staff to understand and discharge their role and responsibilities in regard to safeguarding children.
- Appoint a senior level trustee to work with the DSL on the charity's safeguarding arrangements.
- Appoint a member of senior staff to the role of DSL as an explicit part of the role-holder's job description.
- Appoint one or more deputy DSLs to provide support to the DSL, and ensure that they are trained to the same standard as the DSL and that the role is explicit in their job descriptions.
- Facilitate a whole-organisation approach to safeguarding; this includes ensuring that safeguarding and child protection are at the forefront and underpin all relevant aspects of process and policy development.
- Where there is a safeguarding concern, ensure the child's wishes and feelings are taken into account when determining what action to take and what services to provide.
- Ensure systems are in place, children to confidently report abuse, knowing that their concerns will be treated seriously, and they can safely express their views and give feedback; these systems will be well-promoted, easily understood, and easily accessible.
- Ensure that staff have due regard to relevant data protection principles that allow them to share and withhold personal information.
- Ensure that a member of the board is nominated to liaise with the LA and/or partner agencies on issues of child protection and in the event of allegations of abuse made against the CEO or another trustee.
- Guarantee that there are effective and appropriate policies and procedures in place.
- Ensure all relevant persons are aware of the charity's local safeguarding arrangements, including the board of trustees itself, the senior staff team and DSL.
- Make sure that children are taught about safeguarding, including protection against dangers online (including when they are online at home), through teaching and learning opportunities, as part of providing a broad and balanced curriculum.
- Adhere to statutory responsibilities by conducting pre-employment checks on staff who work with children, taking proportionate decisions on whether to ask for any checks beyond what is required.
- Ensure that staff are appropriately trained to support children to be themselves at the setting, e.g. if they are LGBTQ+.

- Ensure the charity has clear systems and processes in place for identifying possible mental health problems in children, including clear routes to escalate concerns and clear referral and accountability systems.
- Guarantee that volunteers are appropriately supervised.
- Make sure that at least one person on any appointment panel has undertaken safer recruitment training.
- Ensure that all staff receive safeguarding and child protection training updates, e.g. emails, as required, but at least annually.
- Ensure that all trustees receive appropriate safeguarding and child protection training upon their induction and that this training is updated regularly.
- Certify that there are procedures in place to handle allegations against trustees, staff, volunteers, trainees, apprentices and contractors.
- Confirm that there are procedures in place to make a referral to the DBS, where appropriate, if a person in regulated activity has been dismissed or removed due to safeguarding concerns or would have been had they not resigned.
- Guarantee that there are procedures in place to handle children's allegations against other children.
- Ensure that appropriate disciplinary procedures are in place, as well as policies pertaining to the behaviour of children and staff.
- Ensure that procedures are in place to eliminate unlawful discrimination, harassment and victimisation, including those in relation to child-on-child abuse.
- Guarantee that there are systems in place for children to express their views and give feedback.
- Establish an early help procedure and ensure all staff understand the procedure and their role in it.
- Introduce mechanisms to assist staff in understanding and discharging their roles and responsibilities.
- Make sure that staff members have the skills, knowledge and understanding necessary to keep LAC safe, particularly with regard to the children's legal status, contact details and care arrangements.
- Put in place appropriate safeguarding responses for children who go missing from the setting, particularly on repeat occasions, to help identify any risk of abuse, neglect or exploitation, and prevent the risk of their disappearance in future.
- Ensure that all members of the board have been subject to an enhanced DBS check.
- Create a culture where staff are confident to challenge senior staff over any safeguarding concerns.
- Be aware of their obligations under the Human Rights Act 1998, the Equality Act 2010 (including the Public Sector Equality Duty), and the local multi-agency safeguarding arrangements.

The senior staff team have a duty to:

- Ensure that the policies and procedures adopted by the board of trustees, particularly concerning referrals of cases of suspected abuse and neglect, are followed by staff.
- Provide staff with the appropriate policies and information upon induction.

The DSL has a duty to:

- Take lead responsibility for safeguarding and child protection, including online safety.
- Provide advice and support to other staff on child welfare, safeguarding and child protection matters.
- Take part in strategy discussions and inter-agency meetings, and/or support other staff to do so.
- Contribute to the assessment of children, and/or support other staff to do so.
- Be available either face to face or by telephone during working hours for staff to discuss any safeguarding concerns.
- Arrange, alongside the charity, adequate and appropriate cover for any activities outside of working hours or terms.
- Refer cases:
  - To CSCS where abuse and neglect are suspected, and support staff who may be involved in referrals to CSCS.
  - To the Channel programme where radicalisation concerns arise, and support staff who may be involved in referrals to the Channel programme.
  - To the DBS where a person is dismissed or has left due to harm, or risk of harm, to a child.
  - To the police where a crime may have been committed, in line with the National Police Chiefs' Council (NPCC) guidance.
- Act as a source of support, advice and expertise for all staff.
- Act as a point of contact with the safeguarding partners.
- Liaise with the CEO to inform them of issues, especially regarding ongoing enquiries under section 47 of the Children Act 1989 and police investigations.
- Liaise with the deputy DSLs to ensure effective safeguarding outcomes.
- Liaise with the case manager and the LA designated officers (LADOs) for child protection concerns in cases concerning staff.
- Liaise with staff on matters of safety, safeguarding and welfare, including online and digital safety.
- Liaise with staff when deciding whether to make a referral by liaising with relevant agencies so that children's needs are considered holistically.
- Liaise with the mental health first aider and, where available, the local mental health support team, where safeguarding concerns are linked to mental health.

- Promote supportive engagement with parents in safeguarding and promoting the welfare of children, including where families may be facing challenging circumstances.
- Work with the CEO and relevant strategic leads, taking lead responsibility for promoting positive outcomes by knowing the welfare, safeguarding and child protection issues that children in need are experiencing, or have experienced, and identifying the impact that these issues might be having on their attendance, engagement and achievement at the setting. This includes:
  - Ensuring that the charity knows which children have or had a social worker.
  - Understanding the academic progress and attainment of these children.
  - Maintaining a culture of high aspirations for these children.
  - Supporting practitioners to provide additional support or reasonable adjustments to help these children reach their potential.
  - Helping to promote positive outcomes by sharing the information about the welfare, safeguarding and child protection issues these children are experiencing with senior staff team and practitioners.
- Ensure that child protection files are kept up-to-date and only accessed by those who need to do so.
- Ensure that a child's child protection file is transferred as soon as possible, and within five days, when transferring to a new setting, and consider any additional information that should be shared.
- Ensure each member of staff has access to and understands the charity's Child Protection and Safeguarding Policy and procedures – this will be discussed during the staff induction process.
- Work with the board of trustees to ensure the charity's Child Protection and Safeguarding Policy is reviewed annually, and the procedures are updated and reviewed regularly.
- Ensure the charity's Child Protection and Safeguarding Policy is available publicly, and parents are aware that the charity may make referrals for suspected cases of abuse or neglect, as well as the role the charity plays in these referrals.
- Link with safeguarding partner arrangements to make sure that staff are aware of the training opportunities available and the latest local policies on safeguarding.
- Undergo training, and update this training at least every two years.
- Obtain access to resources and attend any relevant or refresher training courses.
- Encourage a culture of listening to children and taking account of their wishes and feelings; this includes understanding the difficulties children may have in approaching staff about their circumstances and considering how to build trusted relationships that facilitate communication.

- Support and advise staff and help them feel confident on welfare, safeguarding and child protection matters: specifically, to ensure that staff who may be involved during the referral processes are supported; and to support staff to consider how safeguarding, welfare and education are linked.
- Understand the importance of information sharing, including within the setting, with other settings, and with the safeguarding partners, other agencies, organisations and practitioners.
- Understand relevant data protection legislation and regulations, especially the Data Protection Act 2018 and the UK GDPR.
- Keep detailed, accurate, secure written records of safeguarding concerns, decisions made, and whether or not referrals have been made, and understand the purpose of this record-keeping.

### **3. Multi-agency working**

- The charity contributes to multi-agency working as part of its statutory duty. The charity is aware of and will follow the local safeguarding arrangements.
- The charity will be fully engaged, involved, and included in local safeguarding arrangements. Once the charity is named as a relevant agency by local safeguarding partners, it will follow its statutory duty to cooperate with the published arrangements in the same way as other relevant agencies. The charity will act in accordance with the safeguarding arrangements.
- The charity will work with CSCS, the police, health services and other services to protect the welfare of children, through the early help process and by contributing to multi-agency plans to provide additional support.
- Where a need for early help is identified, the charity will allow access for CSCS from the host LA and, where appropriate, a placing LA, for that LA to conduct (or consider whether to conduct) a section 17 or 47 assessment.
- The charity also recognises the particular importance of inter-agency working in identifying and preventing CSE.

#### **Information sharing**

- The charity recognises the importance of proactive information sharing between professionals and local agencies in order to effectively meet children's needs and identify any need for early help.
- Considering the above, staff will be aware that whilst the UK GDPR and the Data Protection Act 2018 place a duty on settings to process personal information fairly and lawfully, they also allow for information to be stored and shared for safeguarding

purposes – data protection regulations do not act as a barrier to sharing information where failure to do so would result in the child being placed at risk of harm.

- Staff members will ensure that fear of sharing information does not stand in the way of their responsibility to promote the welfare and safety of children. If staff members are in doubt about sharing information, they will speak to the DSL or deputy DSLs.

#### **4. Early help**

Early help means providing support as soon as a problem emerges, at any point in a child's life. Any child may benefit from early help, but in particular, staff will be alert to the potential need for early help for children who:

- Are disabled, have certain health conditions, or have specific additional needs.
- Have SEND, regardless of whether they have a statutory EHC plan.
- Have mental health needs.
- Are young carers.
- Show signs of being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines.
- Are frequently missing or going missing from care or from home.
- Are at risk of modern slavery, trafficking, or sexual or criminal exploitation.
- Are at risk of being radicalised or exploited.
- Have family members in custody or is affected by parental offending.
- Are in a family circumstance presenting challenges for them, such as drug and alcohol misuse, adult mental health problems, or domestic abuse.
- Misuse drugs or alcohol.
- Have returned home to their family from care.
- Are at risk of HBA, such as FGM or forced marriage.
- Are privately fostered.
- Are persistently absent from education, including persistent absences for part of a session.
- Show early signs of abuse and/or neglect in other ways.

The charity will not limit its support to children affected by the above and will be mindful of a variety of additional circumstances in which children may benefit from early help, for example, if they are:

- Bereaved.
- Viewing problematic or inappropriate online content or developing inappropriate relationships online.
- Have recently returned home to their family from care.

- Missing education, or are persistently absent from their school, or not in receipt of full-time education.

Staff will be mindful of all signs of abuse, neglect and exploitation and use their professional curiosity to raise concerns to the DSL.

The Head of Children Services in collaboration with the DSL will take the lead where early help is appropriate. This includes liaising with other agencies and setting up an inter-agency assessment as appropriate. The local early help process will be followed as required.

Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner. Any such cases will be kept under constant review and consideration given to a referral to CSCS for assessment for statutory services if the child's situation is not improving or is worsening.

## 5. Abuse, neglect and exploitation

The generic term '**child abuse**' is used to describe various ways in which children can be harmed or mistreated. There are many different ways in which children can be harmed, but all have a common factor, that the child feels under-valued and worthless.

For the purposes of this policy, "**abuse**" is defined as a form of maltreatment of a child which involves inflicting harm or failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing the ill treatment of others – this can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse. Children may be abused in a family, institutional or community setting by those known to them or by others, e.g. via the internet. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by one or multiple adults or other children. In summary:

- Abuse may be carried out deliberately or unknowingly.
- Abuse may be a single act or repeated acts.
- Abuse can happen anywhere, perpetrators can be known or trusted by the child or by others.

For the purposes of this policy, "**physical abuse**" is defined as a form of abuse which may involve actions such as hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical abuse can also be caused when a parent fabricates the symptoms of, or deliberately induces, illness in a child.

For the purposes of this policy, "**emotional abuse**" is defined as the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. This may involve conveying to a child that they are worthless, unloved,

inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child the opportunities to express their views, deliberately silencing them, 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children, such as interactions that are beyond their developmental capability, overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying, including cyberbullying, causing the child to frequently 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, but it may also occur alone.

For the purposes of this policy, "**sexual abuse**" is defined as abuse that involves forcing or enticing a child to take part in sexual activities, not necessarily involving violence, and regardless of whether the child is aware of what is happening. This may involve physical contact, including assault by penetration, or non-penetrative acts, such as masturbation, kissing, rubbing, and touching outside of clothing. It may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can be perpetrated by people of any gender and age.

For the purposes of this policy, "**neglect**" is defined as the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in serious impairment of a child's health or development. This may involve a parent or carer failing to provide a child with adequate food, clothing or shelter (including exclusion from home or abandonment); failing to protect a child from physical or emotional harm or danger; failing to ensure adequate supervision (including through the use of inappropriate caregivers); or failing to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

All staff will be aware of the indicators of abuse, neglect and exploitation and understand that children can be at risk of harm inside and outside of the charity, inside and outside of home, and online. All staff will be aware that abuse, neglect, exploitation and other safeguarding issues are rarely standalone events that can be given a specific label, and multiple issues often overlap one another; therefore, staff will be vigilant and always raise concerns with the DSL. All staff, especially the DSL and deputy DSLs, will be aware that safeguarding incidents and/or behaviours can be associated with factors outside the setting and/or can occur between children outside of these environments; this includes being aware that children can be at risk of abuse or exploitation in situations outside their families (extra-familial harms). All staff will be aware of the appropriate action to take following a child being identified as at potential risk of abuse and, in all cases, will speak to the DSL if they are unsure.



All staff will be aware that technology is a significant component in many safeguarding and wellbeing issues, including online abuse, cyberbullying, and the sharing of indecent images.

## 6. Specific safeguarding issues

There are certain specific safeguarding issues that can put children at risk of harm – staff will be aware of these issues.

Appendix A of this policy sets out details about specific safeguarding issues that children may experience and outlines specific actions that would be taken in relation to individual issues.

## 7. Child-on-child abuse

For the purposes of this policy, “**child-on-child abuse**” is defined as abuse between children.

The charity has a zero-tolerance approach to abuse, including child-on-child abuse, as confirmed in the Child Protection and Safeguarding Policy’s statement of intent.

All staff will be aware that child-on-child abuse can occur between children of any age and gender, both inside and outside of the setting, as well as online. All staff will be aware of the indicators of child-on-child abuse, how to identify it, and how to respond to reports. All staff will also recognise that even if no cases have been reported, this is not an indicator that child-on-child abuse is not occurring. All staff will speak to the DSL if they have any concerns about child-on-child abuse.

All staff will understand the importance of challenging inappropriate behaviour between peers, and will not tolerate abuse as “banter” or “part of growing up”.

Child-on-child abuse can be manifested in many different ways, including:

- Bullying, including cyberbullying and prejudice-based or discriminatory bullying.
- Abuse in intimate personal relationships between peers – sometimes known as ‘teenage relationship abuse’.
- Physical abuse – this may include an online element which facilitates, threatens and/or encourages physical abuse.
- Sexual violence – this may include an online element which facilitates, threatens and/or encourages sexual violence.
- Sexual harassment, including online sexual harassment, which may be standalone or part of a broader pattern of abuse.
- Causing someone to engage in sexual activity without consent.
- The consensual and non-consensual sharing of nude and semi-nude images and/or videos.



- Upskirting.
- Initiation- and hazing-type violence and rituals, which can include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group, and may also include an online element.

All staff will be clear as to the charity's policy and procedures regarding child-on-child abuse and the role they have to play in preventing it and responding where they believe a child may be at risk from it.

Children will be made aware of how to raise concerns or make a report and how any reports will be handled. This includes the process for reporting concerns about friends or peers. Children will also be reassured that they will be taken seriously, be supported, and kept safe.

The charity's procedures for managing allegations of child-on-child abuse are outlined in the 11.4 Child-on-child Abuse Policy. Staff will follow these procedures, as well as the procedures outlined in the charity's 11.3 Anti-bullying Policy – Children and Young People.

## **8. Online safety and personal electronic devices**

The charity will adhere to the Online Safety Policy at all times.

All children will be made aware of online risks and taught how to stay safe online.

Through training, all staff members will be made aware of:

- Children's attitudes and behaviours which may indicate they are at risk of potential harm online.
- The procedure to follow when they have a concern regarding a child's online activity.

The charity will ensure that suitable filtering systems are in place on ICT equipment to prevent children accessing inappropriate material.

Staff will be aware of the filtering systems in place and will know how to escalate concerns where they are identified.

Further information regarding the charity's approach to online safety can be found in the 14.6 Online Safety Policy.

### **Communicating with parents**

As part of the usual communication with parents, the charity will reinforce the importance of children being safe online.

The charity will also make it clear to parents what their children are being asked to do online whilst in the setting.

### **Reviewing online safety**



The charity will carry out an annual review of its approach to online safety, supported by an annual risk assessment that considers and reflects the risks faced by children.

### **Personal electronic devices**

The use of personal electronic devices, including mobile phones and cameras, by staff and children is closely monitored by the charity.

Photographs and videos of children will be carefully planned before any activity with particular regard to consent and adhering to the charity's Data Protection Policy. The Head of Children Services will oversee the planning of any events where photographs and videos will be taken.

Where photographs and videos will involve children who are LAC, adopted children, or children for whom there are security concerns, the head of children services will liaise with the DSL to determine the steps involved. The DSL will, in known cases of children who are LAC or who have been adopted, liaise with the children's social workers, carers or adoptive parents to assess the needs and risks associated with the children.

Staff will report any concerns about children's or other staff members' use of personal electronic devices to the DSL, following the appropriate procedures.

### **Upskirting**

Under the Voyeurism (Offences) Act 2019, it is an offence to operate equipment for the purpose of upskirting. "**Operating equipment**" includes enabling, or securing, activation by another person without that person's knowledge, e.g. a motion-activated camera.

Upskirting will not be tolerated by the charity. Any incidents of upskirting will be reported to the DSL, who will then decide on the next steps to take, which may include police involvement.

## **9. Consensual and non-consensual sharing of indecent images and videos**

The charity will ensure that staff are aware to treat the consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth produced sexual images) as a safeguarding concern.

Staff will receive appropriate training regarding child sexual development and will understand the difference between sexual behaviour that is considered normal and expected for the age of the child, and sexual behaviour that is inappropriate and harmful. Staff will receive appropriate training around how to deal with instances of sharing nudes and semi-nudes in the community, including understanding motivations, assessing risks posed to children depicted in the images, and how and when to report instances of this behaviour.



Staff will be aware that creating, possessing, and distributing indecent imagery of children is a criminal offence, regardless of whether the imagery is created, possessed, and distributed by the individual depicted; however, staff will ensure that children are not unnecessarily criminalised.

Where a member of staff becomes aware of an incidence of sharing nude and/or semi-nude images and/ or video's, they will refer this to the DSL or deputy DSL as soon as possible.

## **10.Context of safeguarding incidents**

Safeguarding incidents can occur outside of the charity and can be associated with outside factors. All staff, particularly the DSL and deputy DSLs, will always consider the context of safeguarding incidents. Assessment of children's behaviour will consider whether there are wider environmental factors that are a threat to their safety and/or welfare. The charity will provide as much contextual information as possible when making referrals to CSCS.

## **11. Children potentially at greater risk of harm**

The charity recognises that some groups of children can face additional safeguarding challenges, and understands that further barriers may exist when determining abuse and neglect in these groups of children. Additional considerations for managing safeguarding concerns and incidents amongst these groups are outline below.

### **Children who need social workers**

Children may need social workers due to safeguarding or welfare needs. These needs can leave children vulnerable to further harm and educational disadvantage.

As a matter of routine, the DSL will hold and use information from the LA about whether a child has a social worker in order to make decisions in the best interests of the child's safety, welfare, and educational outcomes.

Where a child needs a social worker, this will inform decisions about safeguarding, e.g. responding to unauthorised absence, and promoting welfare, e.g. considering the provision pastoral or academic support.

### **Home-educated children**

Parents may choose elective home education (EHE) for their children. In some cases, EHE can mean that children are less visible to the services needed to safeguard and support them.

## **LAC and PLAC**

Children most commonly become looked after because of abuse and/or neglect. Because of this, they can be at potentially greater risk in relation to safeguarding. PLAC, also known as care leavers, can also remain vulnerable after leaving care.

The Board of trustees in collaboration with the CEO will ensure that staff have the skills, knowledge and understanding to keep LAC and PLAC safe. This includes ensuring that the appropriate staff have the information they need, such as:

- Looked after legal status, i.e. whether they are looked after under voluntary arrangements with consent of parents, or on an interim or full care order.
- Contact arrangements with parents or those with parental responsibility.
- Care arrangements and the levels of authority delegated to the carer by the authority looking after the child.

The DSL will be provided with the necessary details of child's social workers and the VSH, and, for PLAC, personal advisers.

## **Children with SEND**

When managing safeguarding in relation to children with SEND, staff will be aware of the following:

- Certain indicators of abuse, such as behaviour, mood and injury, may relate to the child's disability without further exploration; however, it should never be assumed that a child's indicators relate only to their disability.
- Children with SEND can be disproportionately impacted by issues such as bullying, without outwardly showing any signs.
- Communication barriers may exist, as well as difficulties in overcoming these barriers.

When reporting concerns or making referrals for children with SEND, the above factors will always be taken into consideration. When managing a safeguarding issue relating to a child with SEND, the DSL will liaise with the setting's SENCO, as well as the child's parents where appropriate, to ensure that the child's needs are met effectively.

## **LGBTQ+ children**

The fact that a child may be LGBTQ+ is not in itself an inherent risk factor for harm; however, staff will be aware that LGBTQ+ children can be targeted by other individuals. Staff will also be aware that, in some cases, a child who is perceived by others to be LGBTQ+ (whether they are or not) can be just as vulnerable as children who identify as LGBTQ+.

Staff will also be aware that the risks to these children can be compounded when they do not have a trusted adult with whom they can speak openly with. Staff will endeavour to reduce



the additional barriers faced by these children and provide a safe space for them to speak out and share any concerns they have.

### **Children requiring mental health support**

All staff will be made aware that mental health problems can, in some cases, be an indicator that a child has suffered, or is at risk of suffering, abuse, neglect or exploitation.

## **12. Use of the charity premises for non-charity activities**

Where the charity hires or rents out the charity's facilities or the charity's premises to organisations or individuals, e.g. for providers to run community or extracurricular activities, it will ensure that appropriate arrangements are in place to keep children safe.

Where the charity provides the activities under the direct supervision or management of charity staff, child protection arrangements will apply. Where activities are provided separately by another body, this may not be the case; therefore, the charity will seek assurance that the body concerned has appropriate safeguarding and child protection policies and procedures in place, including inspecting these as needed. The charity will also ensure that there are arrangements in place to liaise with the body on these matters where appropriate. The charity will ensure safeguarding requirements are included in any transfer of control agreement, i.e. a lease or hire agreement, as a condition of use and occupation of the premises, and specify that failure to comply with this would lead to termination of the agreement.

### **Extracurricular activities and clubs**

External bodies that host extracurricular activities and clubs at the premises, e.g. other charities or companies, will work in collaboration with the charity to effectively safeguard children and adhere to local safeguarding arrangements.

Staff and volunteers running extracurricular activities and clubs are aware of their safeguarding responsibilities and promote the welfare of children. Paid and volunteer staff understand how they should respond to child protection concerns.

All national governing bodies of sport that receive funding from either Sport England or UK Sport must aim to meet the Standards for Safeguarding and Protecting Children in Sport.

## **13. Work experience**

Where the charity has children conduct work experience at the setting, an enhanced DBS check will be obtained if the child is over the age of 16.

## **14. Concerns about children**

If a member of staff has any concern about a child's welfare, or a child has reported a safeguarding concern in relation to themselves or a peer, they will act on them immediately by speaking to the DSL or deputy DSL.

Staff will be aware that children may not feel ready or know how to tell someone that they are being abused, exploited or neglected, and/or they may not recognise their experiences as harmful. Staff will be aware that this must not prevent them from having professional curiosity and speaking to the DSL, or deputy DSL, if they have a concern about a child.

All staff members are aware of the procedure for reporting concerns and understand their responsibilities in relation to confidentiality and information sharing, as outlined in the communication and confidentiality section of this policy.

Where the DSL is not available to discuss the concern with, staff members will contact the deputy DSL with the matter. If a referral is made about a child by anyone other than the DSL, e.g. Deputy DSL the DSL will be informed as soon as possible.

The LA will make a decision regarding what action is required within one working day of the referral being made and will notify the referrer. The DSL is required to monitor a referral if they do not receive information from the LA regarding what action is necessary for the child. If the situation does not improve after a referral, the DSL will ask for reconsideration to ensure that their concerns have been addressed and that the situation improves for the child.

If Early help is appropriate, the case will be kept under constant review. If the child's situation does not improve, a referral will be considered. All concerns, discussions and decisions made, as well as the reasons for making those decisions, will be recorded in writing by the DSL and kept securely in the safeguarding file located in the DSL's office and a copy saved online.

If a child is in immediate danger, a referral will be made to CSCS and/or the police immediately. If a child has committed a crime, such as sexual violence, the police will be notified without delay.

Where there are safeguarding concerns, the charity will ensure that the child's wishes are always taken into account, and that there are systems available for children to provide feedback and express their views. When responding to safeguarding concerns, staff members will act calmly and supportively, ensuring that the child feels like they are being listened to and believed.

An inter-agency assessment will be undertaken where a child and their family could benefit from coordinated support from more than one agency. These assessments will identify what

help the child and family require in preventing needs escalating to a point where intervention would be needed.

## **15. What to do when there is a disclosure of abuse**

It might not be fully clear why a child decides to tell someone they're being abused. Staff will be aware that factors such as the abuse getting worse, being unable to cope with the abuse, wanting justice or hoping to protect siblings can all contribute to their decision to do so.

If a child tells a member of staff they've been abused, staff will ensure that they:

- Compose themselves quickly, stay calm, won't over-react and will listen carefully.
- Limit distractions such as people who could interrupt the discussion.
- Allow the child to share what they want.
- Understand their role is to listen rather than try to investigate by asking lots of questions, asking leading questions, making assumptions, paraphrasing or offering alternative explanations.
- Will not ask a child to repeat what they have said unnecessarily.
- Offer emotional support to the child; this can include telling them that they believe them and will take action to help them.
- Explain to the child that although they may want them to keep it a secret, it's very important to report it. The staff member will not promise to keep what they have been told a secret at any time.
- Explain to the child the next steps which will be taken, letting them know that they will need to tell someone else, which should include immediately reporting what has been told to the DSL or Deputy DSL.
- Reassure the child that it is not their fault, they won't get into trouble and that they have done the right thing in telling them.
- Remind children that they can contact Childline for free and confidential help at any time.
- Inform the DSL or Deputy DSL as soon as possible.
- Make an accurate written record of the allegation, disclosure or incident and will ensure that it is a true reflection of what was said. They will not try to interpret any of the information which was said to them or improvise. They will record this using the charity's 'Safeguarding Disclosure Form' and must include their signature, role, date and time.
- Act immediately in accordance with the procedure in this policy and won't attempt to deal with it by themselves.
- Do not disclose or 'gossip' with colleagues or anyone else about what has been said to them by the child.

## 16. Managing referrals

The reporting and referral process outlined in the Appendix C Reporting Safeguarding Concerns Process Flowchart will be followed accordingly.

All staff members, in particular the DSL, will be aware of the LA's arrangements in place for managing referrals. The DSL will provide staff members with clarity and support where needed. When the DSL makes a referral to CSCS or other external agencies, information will be shared in line with confidentiality requirements and will only be shared where necessary to do so.

The DSL will work alongside external agencies, maintaining continuous liaison, including multi-agency liaison where appropriate, in order to ensure the wellbeing of the children involved. The DSL will work closely with the police to ensure the charity does not jeopardise any criminal proceedings, and to obtain help and support as necessary.

Where a child has been harmed or is in immediate danger or at risk of harm, the referrer will be notified of the action that will be taken within one working day of a referral being made. Where this information is not forthcoming, the referrer will contact the assigned social worker for more information.

The charity will not wait for the start or outcome of an investigation before protecting the victim and other children: this applies to criminal investigations as well as those made by CSCS. Where CSCS decide that a statutory investigation is not appropriate, the charity will consider referring the incident again if it is believed that the child is at risk of harm. Where CSCS decide that a statutory investigation is not appropriate and the charity agrees with this decision, the charity will consider the use of other support mechanisms, such as early help.

At all stages of the reporting and referral process, the child if age appropriate will be informed of the decisions made, actions taken and reasons for doing so. Discussions of concerns with parents will only take place where this would not put the child or others at potential risk of harm. The charity will work closely with parents to ensure that the child, as well as their family, understands the arrangements in place, such as in-setting interventions, is effectively supported, and knows where they can access additional support.

## 17. Visitors

### **Visitors who represent other organisations, agencies and are self-employed**

The charity may receive visitors from other organisations and agencies for a range of reasons e.g. Health Visitor, forest school teacher, artist. The charity will ensure that:

- Visitors will receive a copy of the visitor's policy prior to their visit.

- Visitors will receive a copy of the charity's child protection and safeguarding policies and procedures to follow for whichever capacity they are visiting in, including the contact details of the DSL.
- Visitors will be asked to share with the charity their child protection and safeguarding policies and procedures in advance of their visit. The charity will ensure that they meet the standards of the charity.
- Organisation's or agencies will be asked to confirm that visitors have been recruited following **safer recruitment**. This includes confirmation that anyone working or volunteering with children have undergone the relevant vetting and barring checks.
- Self-employed visitors will be asked for evidence that they have carried out the appropriate vetting and barring checks.

If a visitor representing another organisation, agency or self-employed identifies a safeguarding or child protection concern, or where a disclosure is made to a visitor during their visit, they should:

- Report it to the charity's DSL or deputy DSL as a first instance and follow their own safeguarding procedures.
- Keep a record of the concern.
- Work with the charity to support any ongoing work with that child and their family, including referrals to other agencies.

### **Other visitors**

The charity may receive visitors for a range of other reasons e.g. parent evening, meeting with family support service. The charity will ensure that:

- Posters containing the DSL and Deputy DSL photos and contact details are displayed at entrances, communal areas and all other rooms throughout the building where visitors may go.
- The visitor's policy will be shared if applicable.
- Disclosure forms will be available at entrances, communal areas and all other rooms throughout the building where visitors may go.

If a visitor identifies a safeguarding or child protection concern, or where a disclosure is made to a visitor during their visit, they should:

- Report this immediately to the charity's DSL or deputy DSL using the contact details displayed in the poster.

## **18. Concerns about charity safeguarding practices**

Any concerns regarding the safeguarding practices at the charity will be raised with the CEO, and the necessary whistleblowing procedures will be followed, as outlined in the Whistleblowing Policy. If a staff member feels unable to raise an issue with the CEO they can raise them with the Chairperson, they can also access other whistleblowing channels such as the NSPCC whistleblowing helpline (0800 028 0285).

## **19. Safeguarding concerns and allegations of abuse against staff**

All allegations against staff, supply staff, volunteers and contractors will be managed in line with the charity's 13.9 Allegations of Abuse Against Staff Policy, a copy of which will be provided to, and understood by, all staff. The charity will ensure all allegations against staff, including those who are not employees of the charity, are dealt with appropriately and that the charity liaises with the relevant parties.

When managing allegations against staff, the charity will recognise the distinction between allegations that meet the harms threshold and allegations that do not, also known as "low-level concerns", as defined in the 13.9 Allegations of Abuse Against Staff Policy. Allegations that meet the harms threshold include instances where staff have:

- Behaved in a way that has harmed a child, or may have harmed a child.
- Committed or possibly committed a criminal offence against or related to a child.
- Behaved towards a child in a way that indicates they may pose a risk of harm to children.
- Behaved, or may have behaved, in a way that indicates they may not be suitable to work with children.

Low-level concerns will be handled in line with the charity's Low-level Safeguarding Concerns Policy.

## **20. Communication and confidentiality**

When recording, holding, using and sharing information, the DSL will ensure that they:

- Understand the importance of information sharing, both within the charity and with other safeguarding partners, other agencies, organisations and practitioners.
- Understand relevant data protection legislation and regulations, in particular the Data Protection Act 2018 and the UK GDPR.

Are able to keep detailed, accurate, secure written records of all concerns, discussions and decisions made including the rationale of those decisions. This will include instances where



referrals were and were not made to another agency such as LA children's social care or the Prevent program

All child protection and safeguarding concerns will be treated in the strictest of confidence in accordance with charity data protection policies.

Where there is an allegation or incident of sexual abuse or sexual violence, the victim is entitled to anonymity by law; therefore, the charity will consult its policy and agree on what information will be disclosed to staff and others, in particular the alleged perpetrator and their parents. Where a report of sexual violence or sexual harassment is progressing through the criminal justice system, the charity will do all it can to protect the anonymity of the children involved in the case.

Concerns will only be reported to those necessary for its progression and reports will only be shared amongst staff members and with external agencies on a need-to-know basis. During the disclosure of a concern by a child, staff members will not promise the child confidentiality and will ensure that they are aware of what information will be shared, with whom and why.

Where it is in the public interest, and protects children from harm, information can be lawfully shared without the victim's consent, e.g. if doing so would assist the prevention, detection or prosecution of a serious crime. Before doing so, the DSL will weigh the victim's wishes against their duty to protect the victim and others. Where a referral is made against the victim's wishes, it is done so carefully with the reasons for the referral explained to the victim and specialist support offered.

Depending on the nature of a concern, the DSL will discuss the concern with the parents of the children involved. Discussions with parents will not take place where they could potentially put a child at risk of harm. Discussion with the victim's parents will relate to the arrangements being put in place to safeguard the victim, with the aim of understanding their wishes in terms of support arrangements and the progression of the report. Discussion with the alleged perpetrator's parents will have regards to the arrangements that will impact their child, such as attending activities, with the reasons behind decisions being explained and the available support discussed. External agencies will be invited to these discussions where necessary.

Where confidentiality or anonymity has been breached, the charity will implement the appropriate disciplinary procedures as necessary and will analyse how damage can be minimised and future breaches be prevented.

Where a child is leaving the setting, the DSL will consider whether it is appropriate to share any information with the child's new provider, in addition to the child protection file, that will allow the new provider to support the child and arrange appropriate support for their arrival.

## **21. Safer recruitment**

The charity's full policy and procedures for safer recruitment are outlined in the Recruitment Policy.

An enhanced DBS check with barred list information will be undertaken for all staff members engaged in regulated activity. A person will be considered to be in 'regulated activity' if, as a result of their work, they:

- Are responsible on a daily basis for the care or supervision of children.
- Regularly work in the charity at times when children are on the premises.
- Regularly come into contact with children under 18 years of age.

The DfE's DBS Workforce Guides will be consulted when determining whether a position fits the child workforce criteria.

The CEO on behalf of the board of trustees will conduct the appropriate pre-employment checks for all prospective employees, including internal candidates and candidates who have lived or worked outside the UK.

The appropriate DBS and suitability checks will also be carried out for all trustees, volunteers, and contractors if they are considered to be 'in regulated activity'.

### **Staff suitability**

When providing care for children under the age of eight the charity must ensure that staff and volunteers working in the setting are not disqualified from doing so under the Childcare (Disqualification) and Childcare (Early Years Provision Free of Charge) (Extended Entitlement) (Amendment) Regulations 2018. A person may be disqualified if they:

- Have certain orders or other restrictions placed upon them.
- Have committed certain offences.

All staff members are required to sign the Staff Disqualification Declaration Form confirming that they are not disqualified from working in a childcare environment. A disqualified person will not be permitted to continue working at the charity, unless they apply for and are granted a waiver from Ofsted. The charity will provide support with this process.

### **Ongoing suitability**

Following appointment, consideration will be given to staff and volunteers' ongoing suitability – to prevent the opportunity for harm to children or placing children at risk.

### **Referral to the DBS**

The charity will refer to the DBS anyone who has harmed a child or poses a risk of harm to a child, or if there is reason to believe the member of staff has committed an offence and has been removed from working in regulated activity. The duty will also apply in circumstances where an individual is deployed to another area of work that is not in regulated activity or they are suspended.

## **22. Staff records**

The charity keeps a central record which records all staff, including agency and third-party staff who work at the setting. The central record contains information that is easily accessible and recorded in such a way that allows for details for each individual to be provided separately, and without delay, to all who need to see it, including Ofsted.

The following information is recorded on the central record:

- An identity check
- An enhanced DBS check
- A check of professional qualifications, where required
- A check to determine the individual's right to work in the UK
- A check of previous employment references
- Additional checks for those who have lived or worked outside of the UK
- Whether the employee's position involves relevant activity, i.e. regularly caring for, training, supervising or being solely in charge of persons aged under 18

For third-party staff, the charity will also record whether written confirmation from the employment business supplying the member of staff has been received which indicates that all the necessary checks have been conducted and the date that confirmation was received.

Checks which have been conducted for volunteers will also be recorded on the central record. If risk assessments are conducted to assess whether a volunteer should be subject to an enhanced DBS check, the risk assessment will be recorded.

The charity is free to record any other information it deems relevant.

The details of an individual will be removed from the central record once they no longer work at the charity and archived following our records management policy.

## **23. Training**

Staff members will undergo safeguarding and child protection training at induction, which will be updated every 3 years and/or whenever there is a change in legislation.

The induction training will cover:

- The Child Protection and Safeguarding Policy and procedures.

- The Child-on-Child Abuse Policy and procedures - if appropriate.
- The Staff handbook.
- Part one of 'Keeping children safe in education' (KCSIE) (or Annex A, if appropriate).
- The Behaviour Policy – if appropriate.
- Appropriate child protection and safeguarding training, including online safety training.
- Information about the role and identity of the DSL and deputy DSLs.
- Whistle-blowing Policy

All staff members will also receive regular safeguarding and child protection updates as required, but at least annually.

Staff will receive opportunities to contribute towards and inform the safeguarding arrangements in the charity.

The DSL and deputy DSLs will undergo child protection and safeguarding training, and update this training at least every two years. The DSL and deputy DSLs will also obtain access to resources and attend any relevant or refresher training courses, ensuring they keep up-to-date with any developments relevant to their role. This will include training to understand:

- The assessment process for providing Early help and statutory intervention, including local criteria for action and CSCS referral arrangements.
- How LAs conduct child protection case conferences and a child protection review conferences, to enable the DSL to attend and contribute to these effectively when required.
- The importance of providing information and support to CSCS.
- The lasting impact that adversity and trauma can have.
- How to be alert to the specific needs of children in need, children with SEND and/or relevant health conditions, and young carers.
- The importance of internal and external information sharing.
- The Prevent duty.
- The risks associated with online safety, including the additional risks faced online by children with SEND.

## **24. Monitoring and review**

This policy is reviewed at least annually by the Board of trustees, CEO and DSL. This policy will be updated as needed to ensure it is up to date with safeguarding issues as they emerge and evolve, including any lessons learnt. Any changes made to this policy will be communicated to all members of staff. All members of staff are required to familiarise themselves with all processes and procedures outlined in this policy as part of their induction programme.

## Appendix A - Specific safeguarding issues

This appendix sets out details about specific safeguarding issues that children may experience and outlines specific actions that would be taken in relation to individual issues. Issues covered are set out in the contents table below:

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## 1. Honour-based abuse (HBA)/ honour-based violence (HBV)

Honour-based abuse is a crime or incident which has or may have been committed to protect or defend the 'honour' of a family and/or community.

If a family or community feels the victim has brought shame/izzat/namous/Sharaf or embarrassment by behaving in a certain way, they punish the victim for breaking their 'honour code'. Some 'immoral behaviours' can include:

- Running away or coming home late.
- Ideological differences between parents and children.
- Westernisation.
- Refusing an arranged marriage.
- Relationship outside of marriage.
- Relationship or marriage to someone outside of the community or within the community that the family don't approve of.
- Wearing clothes or make-up which the family or community feel is inappropriate.
- Loss of virginity.
- Pregnancy or giving birth outside of marriage.
- Sexual preference.
- Reporting/ fleeing domestic abuse, coercive and controlling behaviour, forced marriage.
- Victims who may have been raped.
- Using drugs or alcohol.
- Disagreement with the religion of the family or community.
- Causing gossip.

Sometimes a rumour about a family member doing one or more of the above is enough to elicit an abusive reaction. HBA can be distinguished from other forms of violence, as it is often committed with some degree of approval and/ or collusion from family and/ or community members. Perpetrators of HBA can include:

- Father and mother
- Brother and sister.
- Grandparents.
- Aunts, Uncles and cousins.
- Community members.
- Bounty hunters/ hit men.

Victims may find themselves in an abusive and dangerous situation against their will with no power to seek help. The usual avenues for seeking help through parents or other family members may be unavailable.

There isn't one specific type of HBA it can involve a range of crimes or behaviours such as:

- Domestic abuse (physical, sexual, psychological, emotional or financial).
- Forced marriage.
- FGM.
- Sexual harassment and sexual violence.
- Threats to kill, physical and emotional violence and murder including forced suicide.
- Pressure to go or move abroad.
- Being kept at home with no freedom.
- Not allowed to use a telephone, internet, or have access to important documents like passport or birth certificate.
- Isolation from friends or family members.
- Abandonment, leaving someone in their country of origin or sending them back to their country of origin.

All forms of HBA are forms of abuse and will be treated and escalated as such. Staff will be alert to the signs of HBA, including concerns that a child is at risk of HBA, or has already suffered from HBA, and will consult with the DSL who will activate local safeguarding procedures if concerns arise including making a referral to CSCS and/or the police.

## 2. Domestic abuse

For the purposes of this policy, and in line with the Domestic Abuse Act 2021, “**domestic abuse**” is defined as abusive behaviour of a person towards another person (including conduct directed at someone else, e.g. the person’s child) where both are aged 16 or over and are personally connected. “**Abusive behaviour**” includes physical or sexual abuse, violent or threatening behaviour, controlling or coercive behaviour, economic abuse, psychological or emotional abuse, digital/ online abuse, FGM, forced marriage, honour-based abuse, stalking, cyberstalking and harassment, religious and spiritual abuse or another form of abuse. “**Personally connected**” includes people regardless of gender or sexuality who:

- Are, have been, or have agreed to be married to each other.
- Are, have been, or have agreed to be in a civil partnership with each other.
- Are, or have been, in an intimate personal relationship with each other.
- Each have, or had, a parental relationship towards the same child.
- Are relatives.

Many people believe that the definition of domestic abuse is limited to physical violence. This sometimes can leave victims not seeking help because “at least they don’t hit me”. But domestic abuse is about control – it is about how one person uses an intimate relationship, to control another person, often their partner, former partner, or family member. The controlling behaviour forms a pattern, rather than being a one-off incident.

**Physical abuse** is the most visible form of domestic abuse. It includes behaviour such as slapping, burning, beating, kicking, biting, or stabbing and can lead to permanent injuries and sometimes death. If the victim’s family member or intimate partner is behaving in this way, regardless of scale, it is physical abuse. The perpetrator’s aim is to intimidate and cause fear. Assaults can often start small, maybe a small shove during an argument, or forcefully grabbing the victim’s wrist, but over time they can become more frequent and more severe. It may be preceded by other abusive behaviours, such as verbal or emotional abuse. Perpetrators of physical abuse may be extremely remorseful after the attacks; they may be tearful or apologetic. Alternatively, they may insist that the victim provoked, started or caused the violence. The perpetrator may blame the violence on alcohol or drug use. These conflicting justifications may leave the victim confused and aim to enable the perpetrator to maintain control over the victim.

**Coercive and controlling behaviour** often creeps unnoticed into a relationship, as initially it can appear to be caring or romantic. For instance, a controlling person may choose something from a menu for their partner – which could be seen as a romantic gesture, however, if someone always insists on choosing, whether their partner likes the choice or not, this is no longer healthy and is a sign of controlling, domineering behaviour.

The question of what is controlling behaviour can be hard to answer. Sometimes it can be put down to personality traits. However, it can overstep the mark and become abusive. Some examples of controlling behaviour may include:

- Not allowing the victim to leave the house or go out.
- Forbidding contact with friends and family & depriving them of their basic needs.
- Taking control over aspects of the victim’s everyday life such as what they wear and when they can sleep.
- Constant texting and calling the victim.
- Constantly checking on where the victim is, what they are doing and who they are with.
- Making all the plans without any discussion.
- Reading the victim’s personal emails, texts messages or letters.
- Not allowing the victim access to important documents such as passports, birth certificates.

Threats are a common method of controlling a person in an abusive relationship. Threats are typically to harm their victim or their family, including threats to kill or to take the children away. They may also threaten to harm themselves.

**Emotional, psychological and mental abuse** are often closely linked terms that can be used interchangeably. The aim of the perpetrator of emotional abuse in relationships is to

reduce confidence and esteem in order to make their victim increasingly reliant on them. They use tactics such as intimidation, bullying, constant criticism and keeping someone isolated from family and friends in order to exert control. Emotional abuse in relationships is often a means of controlling the victim by having a strong mental hold over them. It can be a range of acts designed to make a victim subordinate and/or dependent by isolating the victim from sources of support, exploiting their resources and capacities for personal gain, depriving the victim of the means needed for independence, resistance and escape and regulating their everyday behaviour. Emotional abuse in relationships can include but is not limited to:

- Constant put downs which make their victim feel stupid, worthless and useless.
- Making the victim feel that they are a bad/incapable parent.
- Making the victim feel unattractive or underweight/ overweight.
- Telling the victim they are mad, crazy, insane or ill.
- Isolating the victim from family and friends & depriving them of their basic needs.
- Not allowing the victim out alone, constant checking up or following them.
- Playing on the victim's fears or phobias.
- Ignoring or using silence against the victim, such as going in 'huffs'.
- Making false allegations about them or endlessly making accusations.
- Humiliating the victim in front of others.
- Threatening to kill or harm the victim, a partner, their child, another family member, or their pet.
- Making the victim dependent on their abuser.

**Verbal abuse** most commonly includes abusive behaviour such as name calling, put downs and discounting feelings. As well as using words, verbal abuse can include using silence to exert control. From time-to-time people may say something which is nasty or hurtful to a partner, family member or a child. Usually when it is realised what has been said may have caused offence people feel sorry for the hurt they may have caused and apologise. Verbal abusers are not likely to apologise, not because they don't realise that they have been hurtful, but because that is their aim.

**Sexual abuse** includes rape, forced sexual acts and sexual degradation. Any sexual act that involves force (including emotional blackmail) is abuse – this includes pestering, name calling and threatening to get sex from 'elsewhere' in order to manipulate someone who does not want to have sex at that time into having sex. Sexually abusive relationships can include being forced to watch pornography as well as being forced into having sex with the perpetrator's friends or into prostitution. Often people will question if it is rape if the couple are married or in a relationship? The answer is always yes. Rape is rape whether or not it is within a marriage or relationship. Rape and sexual abusive relationships are criminal regardless of the relationship between the perpetrator and the victim.

**Economic/ financial abuse** involves behaviours such as limiting access to money or other resources, or by forcing all financial responsibility onto their victim while limiting their ability to provide this. It can make the individual economically dependent on the abuser, thereby

limiting their ability to leave the relationship or escape and access safety. Economic/ financial abuse may include:

- Taking money from the victim.
- Not allowing the victim access to shared money.
- Making the victim account for everything spent.
- Preventing the victim from, or causing the victim to lose, or force the victim to give up welfare benefits, education or employment.
- Not allowing or controlling access to mobile phone/transport/utilities/food etc.
- Damage to property.
- Forcing or coercing the victim to be spend their earnings.

Economic/ financial abuse may continue after a relationship has ended, through the withholding of child maintenance.

**Stalking, cyberstalking and harassment** is behaviour that is repeated and unwanted by the victim. The behaviours may seem normal and ordinary, however, when they are repeated, they can be menacing and cause alarm and distress to the victim. Behaviours include:

- Frequent unwanted contact such as appearing at the victim's home or workplace, numerous telephone calls, text messages, letters, notes, emails.
- Gathering information on the victim by contacting people who know the victim, using public records etc.
- Harassment of others close to the victim.
- Threats to harm (including sexual threats) or kill the victim or those close to the victim.

Stalking can take place on the internet and through the misuse of email. This is sometimes known as 'cyberstalking'. This can include the use of social networking sites, chat rooms and other forums facilitated by technology. The internet can be used for a range of purposes relating to harassment, for example:

- To communicate or locate personal information about a victim.
- Damaging the reputation of the victim.
- Electronic sabotage such as spamming and sending viruses.
- Tricking other internet users into harassing or threatening a victim.

**Religious and spiritual abuse**, in the context of domestic abuse, occurs when a victim is prevented from carrying out their religious or spiritual practices or are forced to engage in activities that are in conflict with their beliefs. Religious and spiritual beliefs are entirely each person's own choice, and nobody has the right to make anyone act or feel otherwise. Behaviours may include:

- Preventing someone from attending their place of worship.
- Religious discrimination.
- Preventing someone from worshipping at all or in the way they wish to.

- Forcing someone to attend ceremonies for a religion which they do not practice.
- Forcing someone to eat foods that are forbidden by their religion.
- Destroying someone's religious texts and articles.
- Mockery and verbal abuse of their religion.
- Forcing someone to act in a way which negates their religion.
- Forcing someone to relinquish their religion.
- Forcing someone to partake in a spiritual activity or belief which they do not wish to.

Domestic abuse can happen to anyone at any time. People of all genders can be abused or be abusers. Domestic abuse can happen even when a relationship has ended for example, during contact visits, over the phone or on social media. However, certain events and times of year are associated with an increased risk of abuse e.g., major football tournaments, Christmas time.

### **Impact of domestic abuse on children**

The charity will recognise the impact of domestic abuse on children, as victims in their own right, if they see, hear or experience the effects of domestic abuse. Children may experience domestic abuse directly but they can also experience it indirectly by:

- Hearing the abuse from another room.
- Seeing someone they care about injured and/or distressed.
- Finding damage to their home environment like broken furniture.
- Being hurt from being caught up in or trying to stop the abuse.
- Not getting the care and support they need from their parents or carers as a result of the abuse.

Domestic abuse undermines a child's basic need for safety and security. It can have a serious effect on their behaviour, brain development, education outcomes and overall wellbeing.

The psychological effects of children experiencing domestic abuse can include:

- Aggression and challenging behaviour.
- Depression and anxiety – including worrying about a parent's or carer's safety or wellbeing.
- Changes in mood.
- Difficulty interacting with others and withdrawal.
- Fearfulness including fear of conflict.
- Self-harm.
- Suicidal thoughts or feelings.

Domestic abuse can cause confusing relationships with parents and carers. Children might experience conflicting feelings which may include:

- Not having a strong bond with their parents or carers.
- Hoping an abused parent will leave for safety reasons.
- Worrying about what might happen if their parents or carers separate.
- Being afraid of their parents or carers.

Traumatic childhood experiences such as domestic abuse can affect a child's brain development, this may impact:

- Executive functioning skills.
- Brain architecture.
- Overactive stress responses.

All families have their ups and downs. While many parents or carers experiencing challenging circumstances are able to provide safe and loving care for their family, it can be difficult to cope if problems mount up. Times of transition such as pregnancy, having a baby, job loss or separation, can increase levels of stress and conflict within a relationship. When parents or carers are already experiencing challenges such as mental health problems or substance misuse it can be more difficult for them to maintain healthy relationships. In some cases, these factors can contribute to or exacerbate domestic abuse.

### **Signs and indicators**

It can be difficult to tell if domestic abuse is happening, because perpetrators can act very differently when other people are around. There might be changes in a child's patterns of behaviour e.g. if they are not doing as well at school as they used to do. Or they might display behaviour that the adults around them perceive to be challenging. Children who experience domestic abuse might feel constantly stressed or on alert. They might be afraid of what's happening at home. This might all feel 'normal' to them if they have lived with domestic abuse for a long time. They might show signs of anxiety and or fear.

Children can find it difficult to talk about domestic abuse for many reasons. They might feel ashamed, afraid or not have the language to describe what they have experienced. They might have been living with domestic abuse since they were very young, they may not realise that it is wrong – and they may think that it's their fault.

### **Being exposed to domestic abuse in childhood is child abuse.**

All staff will be educated through CPD of the signs of domestic abuse and follow the appropriate safeguarding procedures where concerns arise including reporting to the DSL or DSL deputy.

### **3. Homelessness**

The DSL and deputy DSLs will be aware of the contact details and referral routes into the Local Housing Authority so that concerns over homelessness can be raised as early as possible.

Indicators that a family may be at risk of homelessness include:

- Household debt.
- Rent arrears.
- Domestic abuse.
- Anti-social behaviour.
- Any mention of a family moving home because “they have to”.

Referrals to the Local Housing Authority do not replace referrals to CSCS where a child is being harmed or at risk of harm. For 16- and 17-year-olds, homelessness may not be family-based and referrals to CSCS will be made as necessary where concerns are raised.

### **4. Children missing from education**

A child going missing from the setting is a potential indicator of abuse or neglect and, as such, these children are increasingly at risk of being victims of harm, exploitation or radicalisation. Staff will monitor children that go missing from the setting, particularly on repeat occasions, and report them to the DSL following normal safeguarding procedures.

#### **Registrations**

The charity will ensure that registrations are kept up-to-date and accurate at all times and will inform parents when any changes occur. Two emergency contacts will be held for each child where possible. Staff will monitor children who do not attend the charity on the agreed date.

If a parent notifies the charity that their child will live at a different address, the charity will record the following information on the child’s registration forms:

- The full name of the parent with whom the child will live
- The new address
- The date from when the child will live at that address

If a parent notifies the charity that their child will be attending a different setting, or is already registered at a different setting, the following information will be recorded on the registration:

- The name of the new setting
- The date on which the child first attended, or is due to attend, that setting

Where a child moves to a new setting, the setting will use a secure internet system to securely transfer the child's data.

## 5. Child abduction and community safety incidents

For the purposes of this policy, **“child abduction”** is defined as the unauthorised removal or retention of a child from a parent or anyone with legal responsibility for the child. Child abduction can be committed by parents and other relatives, other people known to the victim, and strangers.

All staff will be alert to community safety incidents taking place in the vicinity of the charity that may raise concerns regarding child abduction, e.g. people loitering nearby or unknown adults conversing with children.

Children will be provided with practical advice to ensure they can keep themselves safe outdoors including when escorted by staff on trips and outings - for further information please refer to 2.11 Outings Policy.

## 6. Child criminal exploitation (CCE)

For the purposes of this policy, **“child criminal exploitation”** is defined as a form of abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into taking part in criminal activity, for any of the following reasons:

- In exchange for something the victim needs or wants
- For the financial advantage or other advantage of the perpetrator or facilitator
- Through violence or the threat of violence

Specific forms of CCE can include:

- Being forced or manipulated into transporting drugs or money through county lines.
- Working in cannabis factories.
- Shoplifting or pickpocketing.
- Committing vehicle crime.
- Committing, or threatening to commit, serious violence to others.

The charity will recognise that children involved in CCE are victims themselves, regardless of whether they have committed crimes, and even if the criminal activity appears consensual. The charity will also recognise that children of any gender are at risk of CCE.

Charity staff will be aware of the indicators that a child is the victim of CCE, including:

- Appearing with unexplained gifts, money or new possessions.
- Associating with other children involved in exploitation.
- Suffering from changes in emotional wellbeing.

- Misusing drugs or alcohol.
- Going missing for periods of time or regularly coming home late.
- Regularly missing school, education and committed recreational activities or not taking part.

### County lines

For the purposes of this policy, “**county lines**” refers to gangs and organised criminal networks exploiting children to move, store or sell drugs and money into one or more areas, locally and/or across the UK.

As well as the general indicators for CCE, charity staff will be aware of the specific indicators that a child may be involved in county lines, including:

- Parental concerns.
- Going missing and subsequently being found in areas away from their home.
- Having been the victim or perpetrator of serious violence, e.g. knife crime.
- Carrying weapons.
- Unexplained acquisition of money, clothes or mobile phones.
- Receiving requests for drugs via a phone line.
- Excessive receipt of texts, phone calls and/ or having multiple handsets.
- Moving drugs.
- Handing over and collecting money for drugs.
- Being exposed to techniques such as ‘plugging’, where drugs are concealed internally to avoid detection.
- Leaving home or care without reasonable explanation.
- Being found in accommodation they have no connection with or a hotel room where there is drug activity.
- Gang association or isolation by peers and social networks.
- Owing a ‘debt bond’ to their exploiters.
- Having their bank account used to facilitate drug dealing.

Staff will be made aware of children with missing episodes who may have been trafficked for the purpose of transporting drugs. Staff members who suspect a child may be vulnerable to, or involved in, county lines activity will immediately report all concerns to the DSL.

The DSL will consider referral to the National Referral Mechanism on a case-by-case basis and consider involving local services and providers who offer support to victims of county lines exploitation.

## 7. Cyber-crime

For the purposes of this policy, **“cyber-crime”** is defined as criminal activity committed using computers and/or the internet. This includes ‘cyber-enabled’ crimes, i.e. crimes that can happen offline but are enabled at scale and at speed online, and ‘cyber-dependent’ crimes, i.e. crimes that can be committed only by using a computer. Crimes include:

- Unauthorised access to computers, known as ‘hacking’.
- Denial of Service attacks, known as ‘booting’.
- Making, supplying or obtaining malicious software, or ‘malware’, e.g. viruses, spyware, ransomware, botnets and Remote Access Trojans with the intent to commit further offence.

All staff will be aware of the signs of cyber-crime and follow the appropriate safeguarding procedures where concerns arise. This may include the DSL referring children to the National Crime Agency’s Cyber Choices programme.

## 8. Child sexual exploitation (CSE)

For the purposes of this policy, **“child sexual exploitation”** is defined as a form of sexual abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity, for any of the following reasons:

- In exchange for something the victim needs or wants
- For the financial advantage, increased status or other advantage of the perpetrator or facilitator
- Through violence or the threat of violence

The charity will recognise that CSE can occur over time or be a one-off occurrence, and may happen without the child’s immediate knowledge, e.g. through others sharing videos or images of them on social media. The charity will recognise that CSE can affect any child who has been coerced into engaging in sexual activities, even if the activity appears consensual; this includes children aged 16 and above who can legally consent to sexual activity. The charity will also recognise that children may not realise they are being exploited, e.g. they believe they are in a genuine romantic relationship.

Charity staff will be aware of the key indicators that a child is the victim of CSE, including:

- Appearing with unexplained gifts, money or new possessions.
- Associating with other children involved in exploitation.
- Suffering from changes in emotional wellbeing.
- Misusing drugs or alcohol.
- Going missing for periods of time or regularly coming home late.
- Regularly missing sessions or not taking part.

- Having older partners.
- Suffering from sexually transmitted infections.
- Displaying sexual behaviours beyond expected sexual development.
- Becoming pregnant.

Where CSE, or the risk of it, is suspected, staff will discuss the case with the DSL. If after discussion a concern remains, local safeguarding procedures will be triggered, including a referral by the DSL to the CSCS. The CSCS and all other necessary authorities will then handle the matter to conclusion. The charity will co-operate as needed.

## 9. Modern slavery

For the purposes of this policy, “**modern slavery**” encompasses human trafficking and slavery, servitude, and forced or compulsory labour. This can include CCE, CSE, and other forms of exploitation.

**Trafficking** is where victims are tricked, forced or persuaded to leave their homes and are moved or transported and then exploited, forced to work or sold.

**Sexual Exploitation** is victims being forced, tricked or coerced into non-consensual or abusive sexual acts.

**Labour Exploitation** is the abuse of people in the workplace for profit. The abuse can be direct and brutal or much less obvious. But its impact is devastating for victims.

**Domestic Servitude** involves victims working in a private family home, where they are ill-treated, humiliated, subjected to unbearable conditions or working hours and made to work for little or no pay, performing tasks such as childcare or housekeeping.

**Criminal Exploitation** occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a victim into criminal activity.

Someone is considered a victim of modern slavery if they are:

- Forced to work through coercion, mental or physical threat.
- Owned or controlled by an ‘employer’ through mental or physical abuse or the threat of abuse.
- Dehumanised, treated as a commodity or bought and sold as ‘property’.
- Physically constrained or have restrictions placed on their freedom of movement.

Perpetrators coerce, deceive and force individuals against their will into a life of abuse, servitude and inhumane treatment. Victims may be sexually exploited, forced to work for little or no pay or forced to commit criminal activities against their will. Victims are often pressured into debt-bondage and are likely to be frightened of those who exploit them, who will often threaten and abuse victims and their families. Any of these factors make it very

difficult for victims to escape. There is no typical victim of Modern Slavery – victims can be adults or children regardless of gender, sexuality, age, ethnicity, religion and nationality. Many victims are brought to the UK specifically so they can be abused and exploited for the benefit of others. Some are tricked into believing they are simply paying others to facilitate their journey to the UK, or that they are being smuggled here. Many victims often do not find out that they are destined for a life of abuse and servitude until after they arrive. However, there are also a high number of victims who are UK nationals, including children.

Anyone can be at risk of Modern Slavery. However, perpetrators often target vulnerable individuals as they are easier to coerce. Vulnerable groups can include:

- People living in poverty.
- Homeless people.
- People with drug and alcohol dependencies.
- LAC and PLAC.
- People with SEND, SEMH related difficulties and/or physical illness.
- Victims of domestic abuse.
- Illegal immigrants.
- Former victims of Modern Slavery and/or Human Trafficking.
- Victims of Forced Marriage.

All staff will be aware of and alert to the signs that a child may be the victim of modern slavery. Staff will also be aware of the support available to victims of modern slavery. Where modern slavery is suspected, staff will discuss the case with the DSL. If after discussion a concern remains, local safeguarding procedures will be triggered, including a referral by the DSL to CSCS and the National Referral Mechanism. The CSCS and all other necessary authorities will then handle the matter to conclusion. The charity will co-operate as needed.

## **10. Child Trafficking**

Child trafficking is child abuse. It is defined as recruiting, moving, receiving and harbouring children for the purpose of exploitation (*DfE and Home Office 2011*). Child trafficking is a form of Modern Slavery.

Traffickers may use grooming techniques to gain the trust of a child, family or community. They may trick, force or persuade children to leave their homes. Child trafficking can involve a network or organised criminals who recruit, transport and exploit children within and across borders. Some people within the network might not be directly involved in trafficking a child but play a part in other ways – such as falsifying documents, bribery, renting or owning premises, or money laundering. Child trafficking can also be organised by individuals and children's own families. Many children are trafficked into the UK from overseas, but children can also be trafficked from one part of the UK to another. Some of the reasons children are trafficked can be:

- Child sexual exploitation (CSE).
- Criminal activity (CCE) including – cannabis cultivation, street crime such as pickpocketing, begging and bag theft, moving drugs (county Lines), benefit fraud, immigration fraud or selling pirated goods such as DVD's.
- Forced marriage.
- Domestic servitude (modern slavery) including- cleaning, Childcare or cooking.
- Forced labour (modern slavery) including working in – restaurants, nail bars, factories or agriculture.
- Illegal adoption.
- Unreported private fostering arrangements (for any exploitative purpose).

Being trafficked is abuse in itself. But trafficked children may experience other forms of abuse and neglect that impact on their physical and mental health and social and emotional development. These include – sexual abuse and exploitation, physical abuse, emotional abuse and neglect.

Impacts of child trafficking and exploitation can include – poor health and illness which may be left untreated, limited or no access to education and/or physical and mental exhaustion. Children may also experience emotional challenges such as missing family, friends, communities and cultures which can lead to:

- Feeling isolated and lonely.
- Disturbed sleep patterns.
- Depression and/or anxiety, panic attacks, eating difficulties.
- Self-harm and suicidal thoughts.
- Drug and alcohol use as a means to escape problems.
- Post traumatic stress disorder (PTSD).

Children who are trafficked are intentionally hidden and isolated from the services and communities who can identify them or protect them. While identification may be difficult there are still signs. Children who have been trafficked or are at risk of being trafficked may:

- Be required to do excessive housework chores.
- Rarely leave the house and have limited freedom of movement.
- Not have any documents (or have falsified documents).
- Give a prepared story which is very similar to stories given by other children.
- Be unable or reluctant to give details of accommodation or personal details.
- Not be registered with a school or GP practice.
- Have a history with missing links or unexplained moves.
- Be cared for by adults who are not their parents or carers.
- Not have a good quality relationship with their adult carers.
- Be one among a number of unrelated children found at one address.

It is also important to look for signs that an adult may be trafficking a child. Signs an adult may be trafficking a child can include:

- Making multiple visa applications for different children.
- Acting as a guarantor for multiple visa applications for children.
- Having previously acted as the guarantor on visa applications for visitors who have not left the UK when the visa expired.

Children who have been trafficked may not see themselves as victims. They may find it hard to understand that what's happening to them is abuse – especially if they have been groomed. Children may think they have played a part in the abuse or that they're guilty of breaking the law. Children may find it difficult to tell anyone what's happened to them. They may be suffering from PTSD and have difficulty recalling details or have blanks in their memory. They may also tell their stories with obvious errors, inconsistencies or lack of reality. Some traffickers can compose stories for victims to learn in case they are approached by authorities. Children may feel guilty or ashamed about the abuse they've suffered, they may also be too scared to speak out, frightened of:

- All adults and authorities.
- What will happen to themselves, their friends and their family.
- Judgement from their community and families.
- Being prosecuted for a crime.
- Being returned to their country of origin where their situation may be even worse.
- The effects of juju or witchcraft rituals that were performed during their experiences.

All staff will be aware of and alert to the signs that a child may be the victim of child trafficking. Staff will also be aware of the support available to victims of child trafficking. Where child trafficking is suspected, staff will discuss the case with the DSL. If after discussion a concern remains, local safeguarding procedures will be triggered, including a referral by the DSL to CSCS and the National Referral Mechanism. The CSCS and all other necessary authorities will then handle the matter to conclusion. The charity will co-operate as needed.

## **11. Female Genital Mutilation (FGM)**

For the purposes of this policy, “**FGM**” is defined as all procedures involving the partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. FGM is often performed by someone with no medical training who uses instruments such as a knife, scalpel, scissors, glass or razor blade. Children are rarely given anaesthetic or antiseptic treatment and are often forcibly restrained. The age at which FGM is carried out varies. It may be:

- When a female baby is newborn.
- During childhood or adolescence.



- Just before marriage.
- During pregnancy.

**FGM is illegal in the UK and a form of child abuse with long-lasting harmful consequences.**

FGM is extremely dangerous and can cause:

- Severe pain.
- Shock.
- Bleeding.
- Infection such as tetanus, HIV, hepatitis B and C.
- Organ damage.
- Blood loss and infections.
- Death in some cases.

FGM can cause long-lasting health problems that can continue throughout a child's life, including:

- Incontinence or difficulties urinating.
- Frequent or chronic vaginal, pelvic or urinary infections.
- Menstrual problems.
- Kidney damage and possible kidney failure.
- Cysts and abscesses.
- Pain during sexual intercourse.
- Infertility.
- Complications during pregnancy and childbirth.
- Emotional and mental health problems.

All staff will be alert to the possibility of a child being at risk of FGM, or already having suffered FGM. If staff are worried about someone who is at risk of FGM or who has been a victim of FGM, they are required to share this information with the DSL who will make a referral to CSCS and/or the police. The charity's procedures relating to managing cases of FGM and protecting children will reflect multi-agency working arrangements.

All staff will be aware of the indicators that children may be at risk of FGM. While some individual indicators they may not indicate risk, the presence of two or more indicators could signal a risk to the child. It is important to note that the child may not yet be aware of the practice or that it may be conducted on them, so staff will be sensitive when broaching the subject.

FGM can happen in the UK or abroad. Instances of FGM have been recorded in some African countries, areas of the Middle East, some Asian countries, the Americas, Europe and Australia. The DfE, Department of Health and Social Care and the Home Office have identified higher

rates of FGM in certain countries, which may put children from these communities at higher risk. A list of these countries is provided in the *'multi-agency statutory guidance on female genital mutilation'* (DfE, DHSC and Home Office 2020).

Indicators that a child may be at heightened risk of undergoing FGM include:

- The socio-economic position of the family and their level of integration into UK society.
- The child coming from a community known to adopt FGM.
- Any girl with a mother, sister, cousin or aunt who has been subjected to FGM.
- Any girl withdrawn.

Indicators that FGM may take place soon include:

- When a female family elder is visiting from a country of origin.
- A girl confiding that she is to have a 'special procedure' or a ceremony to 'become a woman' or prepare for marriage.
- A girl requesting help from a practitioner if she is aware or suspects that she is at immediate risk.
- A girl, or her family member, talking about a long holiday or visit to family overseas or to her country of origin or another country where FGM is prevalent during school holidays.
- A child running away from or planning to leave home.

All staff will be vigilant to the signs that FGM has already taken place so that help can be offered, enquiries can be made to protect others, and criminal investigations can begin.

Indicators that FGM may have already taken place include the child:

- Having difficulty walking, sitting or standing.
- Spending longer than normal in the bathroom or toilet.
- Spending long periods of time away from a session with bladder or menstrual problems.
- Having prolonged or repeated absences.
- Appear withdrawn, anxious or depressed.
- Being reluctant to undergo normal medical examinations.
- Asking for help, but not being explicit about the problem due to embarrassment or fear.

FGM is included in the definition of **“honour-based’ abuse (HBA)”**, which involves crimes that have been committed to defend the honour of the family and/or community. All forms of HBA are forms of abuse and will be treated and escalated as such. Staff will be alert to the signs of HBA, including concerns that a child is at risk of HBA, or has already suffered from

HBA, and will consult with the DSL who will activate local safeguarding procedures if concerns arise.

All staff will be educated through CPD about the issues surrounding FGM and the signs to look out for.

## **12. Virginit testing and hymenoplasty**

Under the Health and Care Act 2022, it is illegal to carry out, offer or aid and abet virginit testing or hymenoplasty in any part of the UK. It is also illegal for UK nationals and residents to do these things outside the UK.

**Virginit testing** - Also known as hymen, '2-finger' or vaginal examination, this is defined as any examination (with or without contact) of the female genitalia intended to establish if vaginal intercourse has taken place. This is irrespective of whether consent has been given. Vaginal examination has no established scientific merit or clinical indication.

**Hymenoplasty** - A procedure which can involve a number of different techniques, but typically involving stitching or surgery, undertaken to reconstruct a hymen with the intent that the person bleeds the next time they have vaginal intercourse. Hymenoplasty is different to procedures that may be performed for clinical reasons, e.g. surgery to address discomfort or menstrual complications.

Virginit testing and hymenoplasty are forms of violence against women and girls and are part of the cycle of HBA, and can be precursors to child or forced marriage and other forms of family and/or community coercive behaviours, including physical and emotional control. Victims are pressurised into undergoing these procedures, often by family members or their intended husbands' family to fulfil the requirement that a woman remains 'pure' before marriage. Those who 'fail' to meet this requirement are likely to suffer further abuse, including emotional and physical abuse, disownment and even honour killings.

The procedures are degrading and intrusive, and can result in extreme psychological trauma, provoking conditions such as anxiety, depression and PTSD, as well as physical harm and medical complications. Staff will be alert to the possible presence of stress, anxiety and other psychological or behavioural signs, and mental health support should be made available where appropriate.

Victims face barriers in coming forward, e.g. they may not know that the abuse was abnormal or wrong at the time, and may feel shameful, having been taught that speaking out against family and/or the community is wrong, or being scared about the repercussions of speaking out. The charity will educate children about the harms of these practices and dispel myths, e.g. the belief that virginit determines the worth of a woman, and establish an environment where children feel safe enough to make a disclosure.

Children aged 13 and older are considered to be most at risk, but it can affect those as young as 8, and anyone with female genitalia can be a victim regardless of age, gender identity, ethnicity, sexuality, religion, disability or socioeconomic status. All staff will be aware of the following indicators that a child is at risk of or has been subjected to a virginity test and/or hymenoplasty:

- A child is known to have requested either procedure or asks for help
- Family members disclose that the pupil has already undergone the practices
- Pain and discomfort after the procedures, e.g. difficulty in walking or sitting for a long period of time which was not a problem previously
- Concern from family members that the child is in a relationship, or plans for them to be married
- A close relative has been threatened with either procedure or has already been subjected to one
- A child has already experienced or is at risk of other forms of HBA
- A child is already known to social services in relation to other safeguarding issues
- A child discloses other concerns that could be an indication of abuse, e.g they may state that they do not feel safe at home, that family members will not let them out the house and/or that family members are controlling
- A child displays signs of trauma and an increase in emotional and psychological needs, e.g. withdrawal, anxiety, depression, or significant change in behaviour
- A child appears fearful of their family or a particular family member
- Unexplained absence from their school, potentially to go abroad
- Changes in behaviour

The above list is not exhaustive, but if any of these indicators are identified, staff members will immediately raise concerns with the DSL. An assessment of the risk they face will be undertaken. If there is believed to be immediate danger, the police will be contacted without delay.

The charity will not involve families and community members in cases involving virginity testing and hymenoplasty, including trying to mediate with family or using a community member as an interpreter, as this may increase the risk of harm to the pupil, including expediting arrangements for the procedure.

### **13. Breast ironing (flattening)**

For the purposes of this policy “**breast ironing (flattening)**” is defined as when a young girls’ breasts are damaged over time to flatten them and delay their development. Sometimes, an elastic belt, or binder is used to stop them from growing. Breast ironing usually starts with the first signs of puberty and is most often done by female relatives. In most cases the perpetrator incorrectly thinks they are behaving in the best interests of the child. They

believe that flattening the breasts will make the child less 'womanly'. They hope this will protect the girl from harassment, rape, pregnancy, abduction, early forced marriage, deter unwanted attention, prevent dishonour being brought upon the family if the girl begins a sexual relationship outside of marriage and help them to stay in education.

In some families and or community's large stones, a hammer or spatula that have been heated over scorching coals can be used to compress the breast tissue. Other families and or communities may opt to use an elastic belt or binder to press the breasts so as to prevent them from growing.

It is also acknowledged that some adolescent girls and boys choose to bind their own breasts using constrictive material due to gender transformation or identity, and this may also cause health problems.

Breast ironing can impact on the child's social and psychological wellbeing and cause serious physical issues such as:

- Abscesses (a painful collection of pus that develops under the skin).
- Cysts (fluid filled lumps under the skin which can develop into abscesses).
- Itching.
- Tissue damage.
- Infection.
- Discharge of milk.
- Breasts becoming significantly different shapes or sizes.
- Severe fever.
- The complete disappearance of one or both breasts.

Breast ironing (flattening) can happen in the UK as well as abroad, although there is no specific law in the UK around breast ironing, it is a form of child abuse. There are many signs and symptoms that breast ironing could be happening to a girl, these can include:

- Avoiding medical examinations.
- Not wanting to get undressed in front of anyone.
- Difficulty lifting their arms as the breast area will be tender to movement and touch.
- Walking or sitting hunched over.
- Some girls may ask for help but may not say exactly what the problem is because they are embarrassed or scared.
- Unusual behaviour after a time of absence including depression, anxiety, aggression or withdrawal.
- A girl is withdrawn from physical activities and or sex and relationship discussions.
- A girl who has a mother, sibling, cousin, aunt, grandmother who has undergone breast ironing.
- A girl/ family has limited level of integration within UK community.

Staff will be aware of the signs of breast ironing (flattening), where Breast ironing (flattening), or the risk of it, is suspected, staff will discuss the case with the DSL. If after discussion a concern remains, local safeguarding procedures will be triggered, including a referral by the DSL to the CSCS.

## 14. Forced marriage

For the purposes of this policy “**Forced marriage**” is defined as a marriage where one or both spouses do not consent to the marriage but are coerced into it. Forced marriage is illegal in the UK. It takes place worldwide throughout different communities and affects all genders, ages, ethnicities, and religions. The United Nations states that child and forced marriage is a human rights violation and a harmful practice that disproportionately affects girls and women globally, preventing them from living their lives free from all forms of violence. Forced marriage can be physical, psychological, financial, sexual and emotional pressure. A lack of full and free consent can be where a person does not consent or where they cannot consent, e.g. due to some forms of SEND. Where an individual lacks the capacity to consent to marriage, coercion is not required for a marriage to be forced.

There is a clear distinction between a forced marriage and an arranged marriage. In arranged marriages, the families of both spouses take a leading role in arranging the marriage but the choice whether or not to accept the arrangement remains with the prospective spouses.

The drivers of forced marriage are complex and some may include:

### Family

- Protecting “family honour”.
- Responding to peer group and/or family pressure.
- Attempting to strengthen family ties and links.
- Longstanding family commitments.
- Ensuring care for a child or adult with SEND when parents and existing carers are unable to fulfil that role.
- Protecting perceived cultural and religious ideals.
- Controlling “unwanted” behaviour, e.g. alcohol use, drug-use or wearing make-up.
- Preventing “unsuitable” relationships, e.g. outside ethnic, cultural, religious, or socioeconomic group.

### Sexuality

- Controlling “unwanted” sexuality (particularly on the part of women), perceived promiscuity, or being lesbian, gay or bisexual.

## **Financial**

- Achieving financial gain.
- Ensuring land, property and wealth remains within the family.

## **Immigration**

- Assisting claims for UK residence and citizenship.

All staff will be alert to the indicators that a child is at risk of, or has undergone, forced marriage, including, but not limited to, the child:

- Being absent from setting – particularly where this is persistent.
- Failure to return from visits to country of origin.
- Being fearful about forthcoming school holidays.
- Being subjected to surveillance by siblings or cousins at the setting.
- Demonstrating a decline in behaviour, engagement, performance or punctuality.
- Being removed from a day centre when they have a physical or learning disability.
- Not being allowed to attend extracurricular activities.
- Being given unreasonable restrictions from the family, e.g. not being allowed out or always being accompanied.
- Suddenly announcing that they are engaged to a stranger, e.g. to friends or on social media.
- Having a family history of forced marriage, e.g. their older siblings have been forced to marry.
- Being prevented from going on to further or higher education.
- Showing signs of mental health disorders and behaviours, e.g. depression, self-harm, anorexia.
- Displaying a sudden decline in their educational performance, aspirations or motivation.

Staff who have any concerns regarding a child who may have undergone, is currently undergoing, or is at risk of forced marriage will speak to the DSL, CEO and Head of Children Services and local safeguarding procedures will be followed – this could include referral to CSCS, the police or the Forced Marriage Unit. The DSL, CEO and Head of Children Services will ensure the child is spoken to privately about these concerns and further action taken as appropriate. Children will always be listened to, and their comments taken seriously.

It will be made clear to staff members that they should not approach the child's family/ carers or those with influence in the community, without the express consent of the child, as this will alert them to the concerns and may place the child in further danger.



Advice will be sought from the Forced Marriage Unit following any suspicion of forced marriage among children.

If a child is being forced to marry, or is fearful of being forced to, the charity will be especially vigilant for signs of mental health disorders and self-harm. The child will be supported by the DSL and referrals will be made on a case-by-case basis.

Staff members will make themselves aware of how they can support victims of forced marriage in order to respond to the victims needs at an early stage, and be aware of the practical help they can offer, e.g., referral to national support groups.

Local child safeguarding procedures will be activated following concerns regarding forced marriage – the charity will use existing national and local protocols for multi-agency liaison with police and CSCS.

The charity will support any victims to seek help by:

- Making them aware of their rights and choices to seek legal advice and representation.
- Recording injuries and making referrals for medical examination where necessary.
- Providing personal safety advice.
- Developing a safety plan in case they are seen, e.g. by preparing another reason for why the victim is seeking help.

The charity will establish where possible whether children at risk of forced marriage have a dual nationality or two passports.

The charity will aim to create an open environment where children feel comfortable and safe to discuss the problems they are facing – this means creating an environment where forced marriage is discussed openly.

The charity will take a whole organisation approach towards educating on forced marriage in the setting curriculum and environment. Appropriate materials and sources of further support will be signposted to children. Children will be encouraged to access appropriate advice, information and support.

Childcare practitioners and other staff members will be educated through CPD about the issues surrounding forced marriage and the signs to look out for.

## **15.Radicalisation**

For the purposes of this policy, “**radicalisation**” refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

For the purposes of this policy, “**extremism**” refers to the vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty, and the



mutual respect and tolerance of different faiths and beliefs. Extremism also includes calling for the death of members of the armed forces.

For the purposes of this policy, “**terrorism**” refers to an action that endangers or causes serious violence to a person or people, serious damage to property, or seriously interferes with or disrupts an electronic system. The use or threat of these actions must be designed to influence the government or intimidate the public, and be made for the purpose of advancing a political, religious or ideological cause.

Protecting children from the risk of radicalisation is part of the charity’s wider safeguarding duties. The charity will actively assess the risk of children being radicalised and drawn into extremism and/or terrorism. Staff will be alert to changes in children’s behaviour which could indicate that they may need help or protection. Staff will use their professional judgement to identify children who may be at risk of radicalisation and act appropriately, which will include contacting the DSL. The charity will work with local safeguarding arrangements as appropriate.

The charity will ensure that they engage with parents and families, as they are in a key position to spot signs of radicalisation. In doing so, the charity will assist and advise family members who raise concerns and provide information for support mechanisms. Any concerns over radicalisation will be discussed with the child’s parents, unless the charity has reason to believe that the child would be placed at risk as a result.

The DSL will undertake Prevent awareness training to be able to provide advice and support to other staff on how to protect children against the risk of radicalisation. All staff will attend training sessions to ensure they are aware of the risk indicators and their duties regarding preventing radicalisation.

### **The Prevent duty**

Under section 26 of the Counter-Terrorism and Security Act 2015, all settings are subject to a duty to have “due regard to the need to prevent people from being drawn into terrorism”, known as “**the Prevent duty**”. The Prevent duty will form part of the charity’s wider safeguarding obligations.

The charity’s procedures for carrying out the Prevent duty, including how it will engage and implement the Channel programme, are outlined in the Prevent Duty Policy.

## **16. Child abuse linked to faith or belief including witchcraft (CALFBW)**

For the purposes of this policy “**child abuse linked to faith or belief including witchcraft (CALFBW)**” is where concerns for a child’s welfare have been identified, and could be caused by, a belief in concepts of:

- Witchcraft and spirit possession, demons or the devil acting through children or leading them astray (traditionally seen in some Christian beliefs).
- The evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context).
- Ritual or multi murders where the killing of children is believed to bring supernatural benefits, or the use of their body parts is believed to produce potent magical remedies.
- Use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for modern slavery or sexual exploitation.

The number of known cases of child abuse linked to accusations of ‘witchcraft’ or ‘possession’ is small. But children involved can suffer damage to their physical and mental health, their capacity to learn, their ability to form relationships and to their self-esteem. It is likely that a proportion of this type of abuse remains unreported. Spotting the signs that this abuse exists can prevent escalation from ‘subtle’ harms that may often go unnoticed by many, to ‘extreme’ situations where there is loss of life. Witchcraft beliefs are used to blame a person (rather than circumstances) for misfortune that happens in life.

CALFBW is not confined to one faith, nationality or ethnic community. Examples have been recorded worldwide including the UK and across various religions including Christians, Muslims and Hindus. Abuse can happen anywhere, but it most commonly occurs within the child’s own home. Genuine beliefs can be held by families, carers, religious leaders, congregations and the children themselves that evil forces are at work. Families and children can be deeply worried by the evil that they believe is threatening them, and abuse often occurs when an attempt is made to ‘exorcise’ or ‘deliver’ the child. Parents/ carers/ abusers or more likely to have the belief that what they are doing will save the child, family or wider community and therefore it is for the greater good. Any abuse that takes place against those who are branded or labelled either as a witch or as having been possessed by an evil spirit is unacceptable. Significant harm (including murder) can occur because of concerted efforts to ‘exorcise’ or ‘deliver’ evil from a child (or vulnerable adult).

Some of the reasons why CALFBW can take place are:

- Abuse as a result of a child being accused of being a ‘witch’.
- Abuse as a result of a child being accused of being possessed by ‘evil spirits’.
- Ritualistic abuse which is prolonged sexual, physical and psychological abuse.
- Satanic abuse which is carried out in the name of ‘satan’ and may have links to cults.
- Any other harmful practice linked to a belief or faith.

In the context of CALFBW, the forms of abuse which can occur fall into four main categories:

**Physical abuse** - Can involve ritualistic beating, burning, cutting, stabbing, semi-strangulating, tying up the child, starving, or rubbing chilli peppers or other substances on the child's genitals or eyes.

**Emotional abuse** - Can occur in the form of isolation. A child might not be allowed near or to share a room with family members and threatened with abandonment. The child may also be convinced that they are possessed.

**Neglect** – In situations of neglect the child's family and community may have failed to ensure appropriate medical care, supervision, education, good hygiene, nourishment, clothing or warmth.

**Sexual abuse** - Children who have been singled out in this way can be particularly vulnerable to sexual abusers within the family, community or faith organisation. These people exploit the belief as a form of control or threat.

### **Common factors and causes**

A range of factors can contribute towards the abuse of a child for reasons of faith or belief. Some of the most common factors are:

**Belief in evil spirits** – Belief in evil spirits that can 'possess' children is often accompanied by a belief that a possessed child can 'infect' others with the condition. This could be through contact with shared food, or simply being in the presence of a child.

**Scapegoating** – A child could be singled out as the cause of misfortune within the home, such as financial difficulties, divorce, infidelity, illness or death.

**Bad behaviour** – Sometimes bad or abnormal behaviour is attributed to spiritual forces. Examples include a child being disobedient, rebellious, overly independent, wetting the bed, having nightmares or falling ill.

**Physical and emotional differences** - A child could be singled out for having a physical difference or disability. Documented cases include children with learning disabilities, mental health issues, epilepsy, autism, stammers, deafness and LGBTQ+.

**Gifts and uncommon characteristics** – If a child has a particular skill or talent, this can sometimes be rationalised as a result of possession or witchcraft. This can also be the case if a child is from a multiple or difficult pregnancy.

**Complex family structure** – Research suggests that a child living with extended family, non-biological parents or foster parents is more at risk. In these situations they are more likely to have been subject to trafficking and made to work in servitude.

It should be noted that a child can be abused as a result of faith or belief even without these factors being present and that **not all those who believe in witchcraft or spirit possession harm children.**

Signs and indicators linked to CALFBW can include the following:

- Physical injuries such as bruises or burns, including historical injuries/ scarring.
- A child reporting that they are or have been accused of being 'evil' and or that they are having the 'devil beat out of them'.
- The child or family may use words such as kindoki, djinn, juju, voodoo, black magic, obeah, the evil eye, ndoki or child sorcerers – all of which refer to spiritual beliefs.
- A child becoming noticeably confused, withdrawn, disorientated or isolated and appearing alone amongst other children.
- A child's personal care deteriorating e.g. a rapid loss of weight, being hungry, turning up to sessions without food, being unkempt with dirty clothes.
- It may be evident that the child's parent or carer does not have a close bond with the child.
- The child's attendance becomes irregular or there is a deterioration in the child's performance.
- A child is removed from their school without another school placement having been arranged.
- A child is taken abroad for a long holiday.
- Wearing unusual jewellery/ items or being in possession of strange ornaments or scripts. They may describe specific items in their possession as 'protecting them'.

Staff will be aware of the signs of child abuse linked to faith or belief including witchcraft (CALFBW) it must never be passed off as being "part of their culture". While different faiths, beliefs, communities, families have different practices, the definitions of physical, sexual, emotional abuse and neglect still hold true. Practitioners may feel that they do not have enough knowledge or experience of a particular family's culture or practice, or they may worry that they could disrespect the family's beliefs, however staff will remember to ask themselves: Is this harming or likely to harm the child?

There is always a primary focus to keep a child safe.

Where CALFBW or the risk of it, is suspected, staff will report the case to the DSL and all safeguarding procedures will be followed including a referral by the DSL to CSCS.

## **17. Discriminatory abuse**

For the purposes of this policy "**Discriminatory abuse**" is when someone is treated differently, unfairly or worse because of their age, being disabled, their gender, their gender identity,

being married or in a civil partnership, being pregnant or having a child, their religion or beliefs, their race, skin colour, where they were born or their sexuality.

Discrimination is against the law and can include:

- Being excluded from a sports team.
- Being bullied or being ignored.
- Being asked to change part of their religious beliefs.
- Buildings that won't allow access because of a disability.

Other types of discrimination can be:

**Stereotype** – is an idea or assumption about a group of people. Stereotypes are not based on fact. Instead, stereotypes are based on opinions and feelings. Stereotypes can lead to prejudice and discrimination. Stereotypes are often negative and assume everyone in a certain group is the same or acts in the same way. All groups are made up of people who have different personalities, strengths and weaknesses. A victim could be treated differently because of a stereotype, e.g. assuming what their sexuality is based on the clothes they may wear, is a type of discrimination. Even when the assumption isn't true it's still discrimination.

**Assumptions** – everyone makes assumptions and views can be influenced by the opinions of family, friends, community and the media. Opinions which can be heard frequently can have a big effect on what people believe and they might not question them.

**Prejudice** – is having an unfair or biased opinion about a group of people which isn't based on fact. Prejudice could be against a certain ethnicity, young or older people, people with different genders, people with religious beliefs, people who don't have a religion, or people with a disability. A person who doesn't want a certain group of people living by them is prejudice.

**Bullying** – sometimes includes discrimination, e.g. if a victim is bullied due to their race or sexuality. Sometimes perpetrators discriminate without actually realising that they are doing it like making racist jokes or calling someone insulting names. Whether this is done intentional or not bullying and discrimination is wrong.

**Harassment** – is behaviour which frightens the victim and causes distress or alarm. The behaviour the victim experiences may include unwanted phone calls, online abuse, stolen or broken property and this behaviour can leave the victim feeling humiliated, offended and threatened. A perpetrator can be known to the victim or they can be a stranger. Two or more incidents by the same person or group of people will be classed as harassment. If a victim is harassed due to their disability, race, religion, transgender identity or sexual orientation then this can be reported to the police as a hate crime.



Staff who have a concern that a child is suffering from discriminatory abuse or may suffer from discriminatory abuse will speak to the DSL or deputy DSLs. If after discussion a concern remains, the charity's Equity, Equality, Diversity and Inclusion policy will be consulted and adhered to at all times.

Staff will take part in Equality, Diversity and Inclusion training as part of induction and CPD.

### **18.Children with family members in prison**

Children with a family member in prison will be offered support as necessary. They will receive a copy of 'Are you a young person with a family member in prison?' from Action for Prisoners' Families where appropriate and allowed the opportunity to discuss questions and concerns.

### **19.Children required to give evidence in court**

Children required to give evidence in criminal courts, either for crimes committed against them or crimes they have witnessed, will be offered appropriate support.

Children who are primary school aged will be provided with the booklet 'Going to Court' from HMCTS where appropriate and allowed the opportunity to discuss questions and concerns.

Children who are secondary school aged will be provided with the booklet 'Going to Court and being a witness' from HMCTS where appropriate and allowed the opportunity to discuss questions and concerns.

### **20.Mental health**

All staff will be made aware that mental health problems can, in some cases, be an indicator that a child has suffered, or is at risk of suffering, abuse, neglect or exploitation.

Staff will not attempt to make a diagnosis of mental health problems – the charity will ensure this is done by a trained mental health professional. Staff will, however, be encouraged to identify children whose behaviour suggests they may be experiencing a mental health problem or may be at risk of developing one. Staff will also be aware of how children's experiences can impact on their mental health, behaviour, education, and wellbeing.

Staff who have a mental health concern about a child that is also a safeguarding concern will act in line with this policy and speak to the DSL or deputy DSLs.

The charity will access a range of advice to help them identify children in need of additional mental health support, including working with external agencies.

In all cases of mental health difficulties, the charity's Social, Emotional and Mental Health (SEMH) Policy will be always consulted and adhered to.

## 21. Serious violence

Through training, all staff will be made aware of the indicators which may signal a child is at risk from, or is involved with, serious violent crime. These indicators include, but are not limited to:

- Increased absence from the setting.
- A change in friendships.
- Relationships with older individuals or groups.
- A significant decline in academic performance.
- Signs of self-harm.
- A significant change in wellbeing.
- Signs of assault.
- Unexplained injuries.
- Unexplained gifts or new possessions.
- In possession of prohibited items, e.g., weapon.

Staff will be made aware of some of the most significant risk factors that could increase a child's vulnerability to becoming involved in serious violence. These risk factors include, but are not limited to:

- Being male.
- Having been permanently excluded from school.
- Having experienced child maltreatment.
- Having been involved in offending, such as theft or robbery.

Staff members who suspect a child may be vulnerable to, or involved in, serious violent crime will immediately report their concerns to the DSL.

### Significant incident or accident

The CEO must notify Ofsted and the Charity Commission of any significant incident or accident and/ or any changes to our arrangements that may affect the wellbeing of the children in our care.

Ofsted Tel: 0191 0300 123 1231 Email: [Enquiries@ofsted.gov.uk](mailto:Enquiries@ofsted.gov.uk)

The Charity Commission Tel: 0300 066 9197

## 22. Adult involvement in youth-produced sexual imagery (YPSI)

### Sexually motivated incidents

The charity will remain aware that not all instances of YPSI will be between children and young people, and in some cases may involve adults posing as a child for the purpose of obtaining nude and semi-nude images from persons under 18.

Staff will be aware of the signs that an adult is involved in the sharing the nude or semi-nude images. These include:

- Being contacted by an online account they do not know but appears to be from somebody under the age of 18.
- Quickly being engaged in sexually explicit communications.
- The offender sharing unsolicited sexual images.
- The conversation being moved from a public to a private and/or encrypted platform.
- Being coerced or pressured into doing sexual things, including producing sexual imagery.
- Being offered money or gifts.
- Being threatened or blackmailed into sharing nude or semi-nude images, and/or further sexual activity.

Financially motivated incidents of YPSI involving adults may also be called “**sextortion**”, where the offender threatens to release nudes or semi-nudes of a child or young person unless they do something to prevent it, e.g. paying money. In these cases, offenders often pose as children and:

- Groom or coerce the victim into sending nudes or semi-nudes in order to blackmail them.
- Use images that have been stolen from the child or young person, e.g. via hacking.
- Use digitally manipulated and/or AI-generated images of the child or young person.

Staff will be aware of the signs of sextortion, which include:

- Being contacted by an online account they do not know but appears to be from somebody under the age of 18.
- Quickly being engaged in sexually explicit communications.
- The offender sharing sexual images first.
- The conversation being moved from a public to a private and/or encrypted platform.
- Told their online accounts have been hacked in order to obtain images, personal information, and contacts.
- Being blackmailed into sending money or sharing bank account details.
- Being shown stolen or digitally manipulated/generated images of the victim.

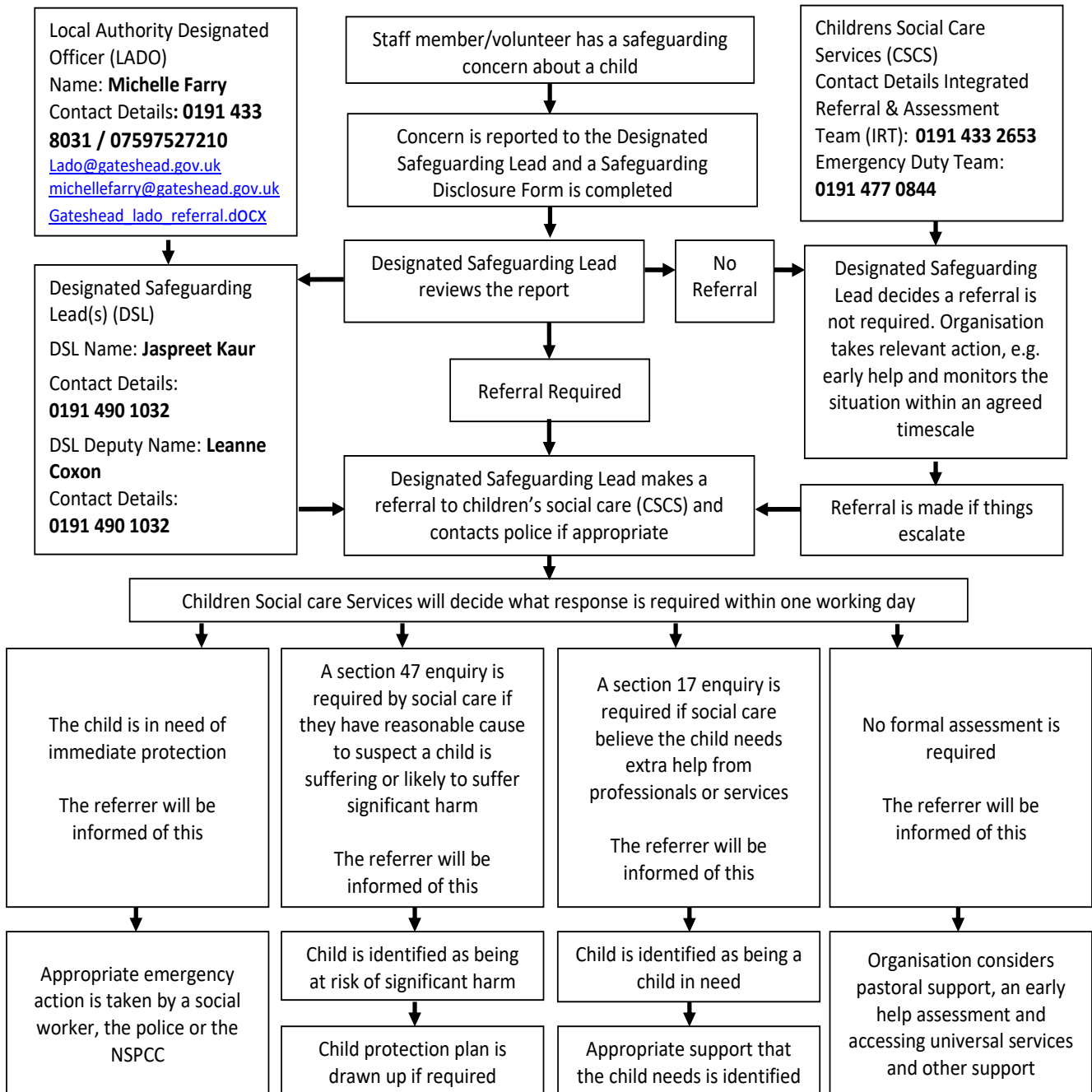
## Appendix B – Useful contact details

1. Gateshead Council Children Social Care Services (CSCS) Tel: 0191 4332653 (office hours Monday to Thursday 9am til 5pm & Friday 9am til 4.30pm) or out of hours Emergency Duty Team Tel: 0191 4770844 (evenings, weekends & bank holidays) or Email: [R&Aduty@gateshead.gov.uk](mailto:R&Aduty@gateshead.gov.uk).
2. Durham County Council Children Services – First Contact Tel: 03000 267 979
3. Sunderland City Council Together for Children Tel: 0191 561 7007 (office hours Monday to Thursday 8.30am til 5.15pm & Friday 8.30am til 4.45pm) or out of hours Emergency Duty Team Tel: 01915205560 (evenings, weekends & bank holidays).
4. Newcastle City council Childrens Social Care Tel: 0191 277 2500 (office hours Monday to Friday 8.45am til 5pm) or out of hours Emergency Duty Team Tel: 0191 278 7878 (evenings, weekends & bank holidays).
5. If you are a young person with concerns about your own safety (or one of your friends) and you do not want to talk to the police or a social worker, then you can contact Childline 24hr freephone number for advice and support Tel: 0800 1111.
6. Northumbria Police emergencies Tel: 999 or non-emergencies Tel: 101.
7. NSPCC Helpline for adults concerned about a child Tel: 0808 800 5000 or Email: [help@NSPCC.org.uk](mailto:help@NSPCC.org.uk).
8. Ofsted Tel: 0300 123 4666 or Email: [enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk).
9. DBS helpline Tel: 03000 200 190 or Email: [customerservices@dbs.gov.uk](mailto:customerservices@dbs.gov.uk)
10. Channel National Terrorism hotline Tel: 0800 789 321.
11. The National Referral Mechanism (NRM) is a framework for identifying and referring potential victims of modern slavery and ensuring they receive the correct support Modern slavery helpline Tel: 0800 0121 700.
12. Forced Marriage Unit Tel: +44 (0) 20 7008 0151 Email: [fm@fcdo.gov.uk](mailto:fm@fcdo.gov.uk).
13. National Crime Agency Cyber Choices Programme Tel: 0300 123 2040 or Email: [www.actionfraud.police.uk](http://www.actionfraud.police.uk)
14. National FGM centre Tel: 020 8498 7555 or Email: [info@nationalfgmcentre.org.uk](mailto:info@nationalfgmcentre.org.uk)



15. NSPCC FGM Helpline Tel: 0800 028 3550.
16. CAHMS Helpline Tel: 0800 328 4444.
17. Early Help Service Tel: 0191 433 3319 or 4335019 Email:  
[earlyhelpservice@gateshead.gov.uk](mailto:earlyhelpservice@gateshead.gov.uk).
18. Citizens Advice Gateshead Tel: 0808 278 7902.
19. NVCO Safeguarding Tel: 020 7713 6161 or Email: [ncvo@ncvo.org.uk](mailto:ncvo@ncvo.org.uk)
20. The Charity Commission for England and Wales Tel: 0300 066 9197 or Charity  
commission contact forms <https://forms.charitycommission.gov.uk>.
21. Family Lives provides targeted early intervention and crisis support for families  
Tel: 0808 800 2222.
22. NSPCC Talking PANTS Tel: 0808 800 5000.
23. Foreign & Commonwealth Office (if a child has been taken abroad) Tel: 020 7008  
1500

## 13.1 Appendix C - Reporting Safeguarding Concerns Process Flowchart



All concerns and correspondence will be kept in a secure, confidential file. The child's circumstances will be kept under review at all stages and a referral will be made again if it is appropriate for improving the child's circumstances. The child's best interests must always come first.

<p>If the concern is about a staff member/ volunteer in your organisation, the DSL should refer this to the LADO who will determine the best route of action to be taken.</p>	<p>If your concern would involve a Prevent/Channel referral: The National Police Prevent advice line Contact: 0800 011 3764</p>	<p>If you have a concern that a girl has undergone, or is about to undergo, FGM, follow safeguarding procedures. For advice you can also contact: the national FGM helpline: 0800 028 3550.</p>
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## Appendix D – Safeguarding Induction Sheet for new employees, volunteers and visitors

In line with the DfE’s statutory guidance ‘Keeping children safe in education’, all adults who come into contact with children have a responsibility to safeguard them and promote their welfare. At St Chads Community Project, we take this responsibility seriously. As a member of St Chads Community Project staff, this responsibility is particularly important for you, and you have a legal responsibility to help cultivate a safe environment that protects children from harm and promotes their welfare in the charity.

If you have any concerns about a child or young person in our setting, you must share this information immediately with our Designated Safeguarding Lead (DSL) or deputy.

If you think the matter is very serious and may be related to child protection, for example, physical, emotional, sexual abuse or neglect, you must find one of the Designated Safeguarding Leads detailed below and provide them with a written record of your concern.

**A copy of the form to complete is attached to this (Appendix E – Safeguarding children form and body map) and copies can be obtained from the reception or childcare manager’s office.**

**If you are unable to locate one of the Designated Safeguarding Leads, ask a member of the office staff to find them and to ask them to speak with you immediately about a confidential and urgent matter.**

Any allegation concerning a member of staff or a volunteer should be reported immediately to the CEO. If an allegation is made about the CEO you should pass this information to the chair of trustees. Alternatively, you can contact the local authority designated officer on Tel: 0191 433 8031 or 07597 527210 [NSPCC whistleblowing helpline](https://www.nspcc.org.uk/keeping-children-safe/whistleblowing) is also available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – line is available from 8:00am to 8:00pm, Monday to Friday or via e-mail: [help@nspcc.org.uk](mailto:help@nspcc.org.uk).

### The people you should talk to in our charity are:

Designated Safeguarding Lead (DSL) Jaspreet Kaur – Head of Children Services Tel: 0191 4901032 Extn 1004 Out of hrs: 07531 322415 Email: <a href="mailto:jaskaur@stchadscommunityproject.org">jaskaur@stchadscommunityproject.org</a>	Deputy Designated Safeguarding Lead (Deputy DSL) Leanne Coxon – CEO Tel: 0191 4901032 EXTN: 1002 Out of hrs: 07963552314 Email: <a href="mailto:leannecoxon@stchadscommunityproject.org">leannecoxon@stchadscommunityproject.org</a>
Link Trustee for Safeguarding Helen Jones – Trustee Tel: 07505 105184 Email: <a href="mailto:djne11026@blueyonder.co.uk">djne11026@blueyonder.co.uk</a>	Chair of Trustees Judith-Wood Archer – Chairperson Email: <a href="mailto:JudithW@citizensadvicegateshead.org.uk">JudithW@citizensadvicegateshead.org.uk</a>



13.1

## Appendix E - Safeguarding children form & body map

<b>Your Name:</b>	
<b>Your Role:</b>	
<b>Name of Organisation:</b>	
<b>Your Contact Number:</b>	
<b>Your Email:</b>	
<b>Your Address:</b>	
<b>Child's Name:</b>	
<b>Child's Date of Birth:</b>	
<b>Child's Ethnic Origin:</b>	
<b>Does child have SEND (<i>if yes provide details</i>):</b>	
<b>Religion if known:</b>	
<b>Child's Gender (<i>please tick</i>):</b>	Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/>
<b>Parents/Carers Name:</b>	
<b>Parents/ Carers Contact Number:</b>	
<b>Parents/ Carers Email:</b>	
<b>Parents/ Carers Address:</b>	
<b>Have parents/carer been notify of this incident?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If yes, please provide details of what was said/ action agreed?</b>	



Are you reporting your own concerns or responding to concerns raised by someone else:	<input type="checkbox"/> Responding to own concerns <input type="checkbox"/> Responding to concerns raised by someone else
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**If responding to concerns raised by someone else please provide further information below:**

Name:	
Position within organisation or relationship to child:	
Contact Number:	
Email Address:	
Date and times of incident:	

**Please provide details of the incident, disclosure, or concern below (*Include other relevant information, such as description of any injuries and whether you are recording this incident as fact, opinion, or hearsay*):**

**Child's account of the incident:**

**Please provide any witness accounts of the incident:**



<b>Name of Witness:</b>	
<b>Position within organisation or relationship to child:</b>	
<b>Witness Contact Number:</b>	
<b>Witness Email Address:</b>	
<b>Witness Address:</b>	
<b>Please provide details of any person involved in this incident or alleged to have caused the incident/ injury: (e.g. Name, Contact Number, Address, Position in Organisation or Relationship to Child)</b>	
<b>Please provide details below of action taken to date:</b>	
<b>Has the incident been reported to external agencies?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If yes, please provide further details below:</b>	
<b>Name of Organisation/ Agency:</b>	
<b>Contact Person:</b>	
<b>Contact Number:</b>	
<b>Email Address:</b>	
<b>Agreed action or advice:</b>	
<b>Are there any other young people potentially at risk:</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>



Please provide any other information which may be relevant:

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<b>Your Signature:</b>	
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<b>Your Name:</b>	
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<b>Job Title:</b>	
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<b>Date:</b>	
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<b>Time:</b>	
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**COMMON SITES FOR  
NON-ACCIDENTAL INJURY**

**COMMON SITES FOR  
ACCIDENTAL INJURY**

