**The Sunnywood Project**

Child Protection and Safeguarding Policy

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| Date policy last reviewed: | 06/11/21 |

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| Signed by: | | | |
| S.Deas | Director | Date: | 03/11/21 |
| M. Young | Director | Date: | 03/11/21 |

Last updated: 6 November 2021

Next review date: 5 November 2022

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**Statement of intent**

**The Sunnywood Project** is committed to safeguarding and promoting the physical, mental and emotional welfare of every child and young person involved in our events or our projects. We implement a whole-organisation, preventative approach to managing safeguarding concerns, ensuring that the wellbeing of children and young people is at the forefront of all action taken.

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:

* Ensuring that members of the Board of Trustees, the Directors and staff understand their responsibilities under safeguarding legislation and statutory guidance, are alert to the signs of child abuse, and know to refer concerns to the DSL.
* Fostering an understanding with the children and young people involved with The Sunnywood Project in terms of how to keep safe and recognise behaviour that is unacceptable.
* Identifying and making appropriate referrals for any child or young person that has been subject to, or is at risk of, abuse, neglect, or exploitation.
* 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 Directors and any new staff and volunteers are only appointed when all the appropriate checks have been satisfactorily completed.

The DSL is **Samantha Deas**.

**Acronyms**

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

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| **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 organisation. |
| DfE | Department for Education | The national government body with responsibility for children’s services, policy and education, including early years, organisations, higher and further education policy, apprenticeships and wider skills in England. |
| DPO | Data protection officer | The appointed person in organisation 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 senior member of staff who has lead responsibility for safeguarding and child protection throughout the organisation. |
| EEA | European Economic Area | The Member States of the European Union (EU) and three countries of the European Free Trade Association (EFTA) (Iceland, Liechtenstein and Norway; excluding Switzerland). |
| EHC plan | Education, health and care plan | A funded intervention plan which coordinates the educational, health and care needs for children or young people 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 organisations 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. |
| PSHE | Personal, social and health education | A non-statutory subject in which children or young people learn about themselves, other people, rights, responsibilities and relationships. |
| PHE | Public Health England | An executive agency of the Department of Health and Social Care which aims to protect and improve the nation’s health and wellbeing. |
| RSHE | Relationships, sex and health education | A compulsory subject from Year 7 for all children or young people. Includes the teaching of sexual health, reproduction and sexuality, as well as promoting positive relationships. |
| SENCO | Special educational needs coordinator | A statutory role within all organisations maintaining oversight and coordinating the implementation of the organisation’s special educational needs policy and provision of education to children or young people with special educational needs. |
| SLT | Senior leadership team | Staff members who have been delegated leadership responsibilities in a organisation. |
| TRA | Teaching Regulation Agency | An executive agency of the DfE with responsibility for the regulation of the teaching profession. |
| VSH | Virtual organisation head | Virtual organisation 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.

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

* Protecting children or young people from maltreatment.
* Preventing the impairment of children or young people’s mental and physical health or development.
* Ensuring that children or young people grow up in circumstances consistent with the provision of safe and effective care.
* Taking action to enable all children or young people 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, or in person in any capacity. 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 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, young people 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 or young people 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

# Legal framework

Due to The Sunnywood Project’s close working with organisations and alternative providers of education, 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
* The Education (Organisation Teachers’ Appraisal) (England) Regulations 2012 (as amended)
* Sexual Offences Act 2003
* Female Genital Mutilation Act 2003 (as inserted by the Serious Crime Act 2015)
* Equality Act 2010
* Counter-Terrorism and Security Act 2015
* The UK General Data Protection Regulation (UK GDPR)
* Data Protection Act 2018
* Voyeurism (Offences) Act 2019
* Domestic Abuse Act 2021

**Statutory guidance**

* HM Government (2020) ‘Multi-agency statutory guidance on female genital mutilation’
* HM Government (2013) ‘Multi-agency practice guidelines: Handling cases of Forced Marriage’
* HM Government (2021) ‘Channel Duty Guidance: Protecting people vulnerable to being drawn into terrorism’
* DfE (2021) ‘Keeping children safe in education 2021’
* DfE (2018) ‘Working Together to Safeguard Children’
* DfE (2015) ‘The Prevent duty’
* DfE (2018) ‘Disqualification under the Childcare Act 2006’

**Non-statutory guidance**

* DfE (2015) ‘What to do if you’re worried a child is being abused’
* DfE (2018) ‘Information sharing’
* DfE (2017) ‘Child sexual exploitation’
* DfE (2021) ‘Sexual violence and sexual harassment between children in organisations and colleges’
* DfE (2020) ‘Sharing nudes and semi-nudes: advice for education settings working with children and young people’

This policy operates in conjunction with the following organisation-based policies and procedures:

* Child Sexual Exploitation (CSE) Policy
* Prevent Duty Policy
* Peer-on-Peer Abuse Policy
* Anti-Bullying Policy
* Data Protection Policy
* Obtaining Photography Consent Procedure
* Records Management Policy
* Whistleblowing Policy
* Allegations of Abuse Against Staff Policy
* Staff and Volunteer Code of Conduct

# Roles and responsibilities

All staff have a responsibility to:

* Consider, at all times, what is in the best interests of the child.
* Maintain an attitude of ‘it could happen here’ where safeguarding is concerned.
* Provide a safe environment in which children and young people can learn.
* Be prepared to identify children and young people who may benefit from early help.
* Be aware of the organisation’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 DSLs.
* 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.
* 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 or young people at risk of harm.
* Be aware of behaviours linked to issues such as drug-taking, alcohol misuse, deliberately missing education, and sharing indecent images, and other signs that children or young people may be at risk of harm.

The Board of Trustees and Directors have a duty to:

* Take strategic leadership responsibility for the organisation’s safeguarding arrangements.
* Ensure that the organisation complies with its duties under the above child protection and safeguarding legislation.
* Guarantee that the policies, procedures and training opportunities in the organisation are effective and comply with the law at all times.
* Guarantee that the organisation contributes to multi-agency working in line with the statutory guidance ‘[Working Together to Safeguard Children](https://www.gov.uk/government/publications/working-together-to-safeguard-children--2)’.
* Confirm that the organisation’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 organisation’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 mechanisms are in place to assist staff to understand and discharge their role and responsibilities in regard to safeguarding children.
* Appoint a member of staff to the role of DSL as an explicit part of the role-holder’s job description.
* 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 of Trustees 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 Directors or another Trustee.
* Guarantee that there are effective and appropriate policies and procedures in place.
* Ensure all relevant persons are aware of the organisation’s local safeguarding arrangements, including the Board of Trustees itself, the Director and DSL.
* 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 and young people to be themselves, e.g. if they are LGBTQ+.
* Ensure the organisation has clear systems and processes in place for identifying possible mental health problems in children and young people, including clear routes to escalate concerns and clear referral and accountability systems.
* Guarantee that volunteers are appropriately supervised.
* Ensure that all staff receive safeguarding and child protection training updates, e.g. emails, as required, but at least annually.
* Certify that there are procedures in place to handle allegations against staff, volunteers and contractors.
* Guarantee that there are procedures in place to handle children and young people’s allegations against other children and young people.
* Ensure that appropriate disciplinary procedures are in place, as well as policies pertaining to the behaviour of children, young people and staff.
* Ensure that procedures are in place to eliminate unlawful discrimination, harassment and victimisation, including those in relation to peer-on-peer abuse.
* Guarantee that there are systems in place for children and young people to express their views and give feedback.
* 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 their legal status, contact details and care arrangements.

The Directors 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 where appropriate, and/or support other staff to do so.
* Contribute to the assessment of children where appropriate, and/or support other staff to do so.
* Refer cases:
  + To CSCS where abuse and neglect are suspected, and support staff who make referrals to CSCS.
  + To the Channel programme where radicalisation concerns arise, and support staff who make 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 Directors to inform them of issues, especially regarding ongoing enquiries under section 47 of the Children Act 1989 and police investigations.
* Liaise with the case manager and the LA designated officer(s) (LADO) 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, where available, the 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.
* Ensure that child protection files are kept up-to-date and only accessed by those who need to do so.
* Ensure each member of staff has access to and understands the organisation’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 organisation’s Child Protection and Safeguarding Policy is reviewed annually, and the procedures are updated and reviewed regularly.
* Ensure the organisation’s Child Protection and Safeguarding Policy is available publicly, and parents are aware that the organisation may make referrals for suspected cases of abuse or neglect, as well as the role the organisation 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 or young people 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 are supported during the referrals processes; and to support staff to consider how safeguarding, welfare and educational outcomes are linked, including to inform the provision of academic and pastoral support.
* Understand the importance of information sharing, including within the organisation, with organisations, 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 concerns and referrals, and understand the purpose of this record-keeping.

# Multi-agency working

The Sunnywood Project contributes to multi-agency working as part of its statutory duty. The organisation is aware of and will follow the local safeguarding arrangements.

The Sunnywood Project will be fully engaged, involved, and included in local safeguarding arrangements. Once The Sunnywood Project 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 Sunnywood Project will act in accordance with the safeguarding arrangements.

The Sunnywood Project will work with CSCS, the police, health services and other services to protect the welfare of its children or young people, through the early help process and by contributing to multi-agency plans to provide additional support.

The organisation also recognises the particular importance of inter-agency working in identifying and preventing CSE.

**Information sharing**

The Sunnywood Project recognises the importance of proactive information sharing between professionals and local agencies in order to effectively meet children or young people’ 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 organisations 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 or young people. If staff members are in doubt about sharing information, they will speak to the DSL.

# 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 or young people 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 prison, or are 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 the organisation day.
* Show early signs of abuse and/or neglect in other ways.

The DSL will take the lead where early help is appropriate. This includes liaising with other agencies. 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.

# Abuse and neglect

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. 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.

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 and neglect. All staff will be aware that abuse, neglect 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, will be aware that safeguarding incidents and/or behaviours can be associated with factors outside the organisation and/or can occur between children outside of these environments; this includes being aware that children or young people 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.

# 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, or another form of abuse. **“Personally connected”** includes people 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.

The organisation 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. All staff will be aware of the signs of domestic abuse and follow the appropriate safeguarding procedures where concerns arise.

# Homelessness

The DSL 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.

# Child abduction and community safety incidents

For the purposes of this policy, **“child abduction”** is define 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 organisation that may raise concerns regarding child abduction, e.g. people loitering nearby or unknown adults conversing with children or young people.

Children and young people will be provided with practical advice and guidance to ensure they can keep themselves safe outdoors.

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

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 organisation or education 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, staff will be aware of the specific indicators that a child may be involved in county lines, including:

* 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.
* Receiving requests for drugs via a phone line.
* Moving drugs.
* Handing over and collecting money for drugs.
* Being exposed to techniques such as ‘plugging’, where drugs are concealed internally to avoid detection.
* Being found in accommodation they have no connection with or a hotel room where there is drug activity.
* Owing a ‘debt bond’ to their exploiters.
* Having their bank account used to facilitate drug dealing.

Staff will be made aware of children or young people 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.

# 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 or young people to the National Crime Agency’s Cyber Choices programme.

# 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 Sunnywood Project 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 organisation 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 or young people aged 16 and above who can legally consent to sexual activity. The organisation will also recognise that children and young people may not realise they are being exploited e.g. they believe they are in a genuine romantic relationship.

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 organisation or education or not taking part.
* Having older boyfriends or girlfriends.
* Suffering from sexually transmitted infections.
* Displaying sexual behaviours beyond expected sexual development.
* Becoming pregnant.

All concerns related to CSE will be managed in line with the organisation’s Child Sexual Exploitation (CSE) Policy.

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 referral to the LA. The LA and all other necessary authorities will then handle the matter to conclusion. The Sunnywood Project will cooperate as needed.

# 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.

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 and how to refer them to the National Referral Mechanism.

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

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 CSCS and/or the police. The organisation’s procedures relating to managing cases of FGM and protecting children or young people will reflect multi-agency working arrangements.

Even though staff at The Sunnywood Project do not fall under the ‘recognised professions’ as outlined in Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015), staff are **contractually required** to report to the police any discovery, whether through disclosure by the victim or visual evidence, of FGM on a child under the age of 18. Staff failing to report such cases will face disciplinary action. Staff will not examine children and young people, and so it is rare that they will see any visual evidence, but they must personally report to the police where an act of FGM appears to have been carried out. Unless the member of staff has a good reason not to, they should also consider and discuss any such case with the DSL and involve CSCS as appropriate.

**NB:** This does not apply to any suspected or at-risk cases, nor if the individual is over the age of 18. In such cases, local safeguarding procedures will be followed.

All staff will be aware of the indicators that children or young people 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.

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 or sister who has been subjected to FGM.
* Any girl withdrawn from PSHE.

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’.
* A girl requesting help from staff if she is aware or suspects that she is at immediate risk.
* A girl, or her family member, talking about a long holiday to her country of origin or another country where FGM is prevalent.

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 activities during the day with bladder or menstrual problems.
* Having prolonged or repeated absences from projects, followed by withdrawal or depression.
* 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.

# Forced marriage

For the purposes of this policy, a **“forced marriage”** is defined as a marriage that is entered into without the full and free consent of one or both parties, and where violence, threats or any other form of coercion is used to cause a person to enter into the marriage. Threats can be physical, emotional, or psychological. 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. Forced marriage is a crime in the UK and a form of HBA.

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:

* Becoming anxious, depressed and emotionally withdrawn with low self-esteem.
* Showing signs of mental health disorders and behaviours such as self-harm or anorexia.
* Displaying a sudden decline in their educational performance, aspirations or motivation.
* Regularly being absent from organisation.
* Displaying a decline in punctuality.
* An obvious family history of older siblings leaving education early and marrying early.

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 and local safeguarding procedures will be followed – this could include referral to CSCS, the police or the Forced Marriage Unit.

# Radicalisation

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, **“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, **“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 or young people from the risk of radicalisation is part of the organisation’s wider safeguarding duties. The organisation will actively assess the risk of children or young people 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 or young people who may be at risk of radicalisation and act appropriately, which may include contacting the DSL or making a Prevent referral. The organisation will work with local safeguarding arrangements as appropriate.

The organisation 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 organisation 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 organisation 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 or young people against the risk of radicalisation.

# 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. Staff will, however, be encouraged to identify children or young people 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 or young people’ experiences can impact on their mental health, behaviour, and education.

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.

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

# Peer-on-peer abuse

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

The Sunnywood Project has a zero-tolerance approach to abuse, including peer-on-peer abuse, as confirmed in the Child Protection and Safeguarding Policy’s [statement of intent](#_Statement_of_intent_1).

All staff will be aware that peer-on-peer abuse can occur between children or young people of any age and gender, both inside and outside of the organisation, as well as online. All staff will be aware of the indicators of peer-on-peer 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 peer-on-peer abuse is not occurring. All staff will speak to the DSL if they have any concerns about peer-on-peer abuse.

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

Peer-on-peer 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.
* 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 organisation’s policy and procedures regarding peer-on-peer abuse and the role they have to play in preventing it and responding where they believe a child may be at risk from it.

All staff will be made aware of the heightened vulnerability of children or young people with SEND, who evidence suggests are more likely to be abused than their peers. Staff will not assume that possible indicators of abuse relate to the child’s SEND and will always explore indicators further.

All staff will be made aware of the heightened vulnerability of LGBTQ+ children or young people, who evidence suggests are also more likely to be targeted by their peers. In some cases, children or young people who are perceived to be LGBTQ+, regardless of whether they are LGBTQ+, can be just as vulnerable to abuse as LGBTQ+ children or young people. The organisation’s response to sexual violence and sexual harassment between children and young people of the same sex will be equally as robust as it is for incidents between children of the opposite sex.

Children and young people 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 and young people will also be reassured that they will be taken seriously, be supported, and kept safe.

The organisation’s procedures for managing allegations of peer-on-peer abuse are outlined in the Peer-on-Peer Abuse Policy. Staff will follow these procedures, as well as the procedures outlined in the organisation’s Anti-Bullying Policy and Exclusion Policy, where relevant.

# 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 their school.
* 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.

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 frequently absent from their school.
* 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.

# Sexting and the sharing of indecent images

The organisation will ensure that staff are aware to treat the sharing of indecent images, including through sexting, 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 sexting in the organisation’s community, including understanding motivations, assessing risks posed to children or young people depicted in the images, and how and when to report instances of sexting.

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 and young people are not unnecessarily criminalised.

Where a member of staff becomes aware of an incidence of sexting that involves indecent images of a child, they will refer this to the DSL as soon as possible. Where a child confides in a staff member about the circulation of indecent imagery, depicting them or someone else, the staff member will:

* Refrain from viewing, copy, printing, sharing, storing or saving the imagery.
* Tell the DSL immediately if they accidentally view an indecent image and seek support.
* Explain to the child that the incident will need to be reported.
* Respond positively to the child without blaming or shaming anyone involved, and reassuring them that they can receive support.
* Report the incident to the DSL.

The DSL will attempt to understand what the image contains **without viewing it** and the context surrounding its creation and distribution – they will categorise the incident into one of two categories:

* **Aggravated:** incidents which involve additional or abusive elements beyond the creation and distribution of indecent images of children or young people, including where there is an adult involved, where there is an intent to harm the child depicted, or where the images are used recklessly.
* **Experimental:** incidents involving the creation and distribution of indecent images of children or young people where there is no adult involvement or apparent intent to cause harm or embarrassment to the child.

For there to be a good and clear reason to view imagery, the DSL would need to be satisfied that this action is:

* The only way to make a decision about whether to involve other agencies because it is not possible to establish the facts, e.g. the contents of the imagery, from the child(s) involved.
* Necessary to report it to a website, app or suitable reporting agency to have the image taken down, or to support the child or their parent in making a report.
* Unavoidable because the child has presented the image directly to a staff member or the image has been found on an organisation device or your organisation’s network.

Where it is necessary to view the imagery, e.g. if this is the only way to make a decision about whether to inform other agencies, the DSL should:

* Never copy, print, share, store or save them as this is illegal – if this has already happened, contact the local police for advice and to explain the circumstances.
* Discuss the decision with the Directors.
* Make sure viewing is undertaken by the DSL or another member of the safeguarding team with delegated authority from the Directors.
* Make sure viewing takes place with another member of staff present in the room, ideally the Directors. This staff member does not need to view the images.
* Wherever possible, make sure viewing takes place on the organisation premises, ideally in the Director’s office.
* Make sure, wherever possible, that they are viewed by a staff member of the same sex as the child in the images.
* Record how and why the decision was made to view the imagery in the safeguarding or child protection records, including who was present, why the images were viewed and any subsequent actions.

Where the incident is categorised as ‘aggravated’, the situation will be managed in line with the organisation’s Peer-on-Peer Abuse Policy. Where the incident is categorised as ‘experimental’, the children or young people involved are supported to understand the implications of sharing indecent imagery and to move forward from the incident. Where there is reason to believe that indecent imagery being circulated will cause harm to a child, the DSL escalates the incident to CSCS. Where indecent imagery of a child has been shared publicly, the DSL will work with the child to report imagery to sites on which it has been shared and will reassure them of the support available.

# Context of safeguarding incidents

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

# Children or young people potentially at greater risk of harm

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

**Children or young people who need social workers**

Children and young people may need social workers due to safeguarding or welfare needs. These needs can leave children or young people 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, usually provided as part of the referral process, in order to assess suitability for projects and initiatives.

**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 will ensure that staff have the skills, knowledge and understanding to keep LAC and PLAC safe.

**Children or young people with SEND**

When managing safeguarding in relation to children or young people 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 or young people with SEND can be disproportionally 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 or young people 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 child’s parents where appropriate, to ensure that the child’s needs are met effectively.

# Concerns about children or young people

If a member of staff has any concern about a child’s welfare, they will act on them immediately by speaking to the DSL. 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](#_Communication_and_confidentiality) section of this policy.

If a referral is made about a child by anyone other than the 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. Staff are 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 Director’s office.

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 organisation will ensure that the child’s wishes are always taken into account, and that there are systems available for children and young people 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.

# Managing referrals

The reporting and referral process outlined in [Appendix B](#AppendixC) 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 making 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 and young people involved. The DSL will work closely with the police to ensure the organisation 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 organisation will not wait for the start or outcome of an investigation before protecting the victim and other children or young people: this applies to criminal investigations as well as those made by CSCS. Where CSCS decide that a statutory investigation is not appropriate, the organisation 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 organisation agrees with this decision, the organisation will consider the use of other support mechanisms.

At all stages of the reporting and referral process, the child 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 organisation will work closely with parents to ensure that the child, as well as their family, understands the arrangements in place, such as in-organisation interventions, is effectively supported, and knows where they can access additional support.

# Concerns about staff and safeguarding practices

If a staff member has concerns about another member of staff (including volunteers), it will be raised with the Directors. If the concern is with regards to the Directors, it will be referred to the Board of Trustees.

Any concerns regarding the safeguarding practices at the organisation will be raised with the Directors. If a staff member feels unable to raise an issue with the Directors, they should access other whistleblowing channels such as the NSPCC whistleblowing helpline (0800 028 0285).

# Allegations of abuse against staff

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

When managing allegations against staff, the organisation 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 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.

# Communication and confidentiality

All child protection and safeguarding concerns will be treated in the strictest of confidence in accordance with organisation 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 organisation 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 organisation will do all it can to protect the anonymity of the children or young people 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 or young people 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 or young people 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 moving classes, 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 organisation will implement the appropriate disciplinary procedures as necessary and will analyse how damage can be minimised and future breaches be prevented.

# Recruitment

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 organisation at times when children are on the premises.
* Regularly come into contact with children under 18 years of age.

The Directors, and Board of Trustees where appropriate, will conduct the relevant 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 be carried out for all Trustees, volunteers, and contractors.

**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 organisation 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.

# Training

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

The induction training will cover:

* The Child Protection and Safeguarding Policy.
* The Peer-on-Peer Abuse Policy and procedures.
* The Staff Code of Conduct.
* Appropriate child protection and safeguarding training, including online safety training.
* Information about the role and identity of the DSL.

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

* The issues surrounding sexual violence and sexual harassment.
* Contextual safeguarding.
* How to keep LAC and PLAC safe.
* CCE and the need to refer cases to the National Referral Mechanism.
* Updated online safety training.

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

The DSL will undergo child protection and safeguarding training, and update this training at least every two years. The DSL 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 or young people 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 or young people with SEND.

# Monitoring and review

This policy is reviewed at least annually by the DSL and the Directors. 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. The next scheduled review date for this policy is **05/11/22**.

**Staff Disqualification Declaration**

|  |  |
| --- | --- |
| Name of organisation: | |
| Name of staff member: | Position: |

|  |  |  |  |
| --- | --- | --- | --- |
| **Orders and other restrictions** | | | **Yes/No** |
| Have any orders or other determinations related to childcare been made in respect of you? | | |  |
| Have any orders or other determinations related to childcare been made in respect of a child in your care? | | |  |
| Have any orders or other determinations been made which prevent you from being registered in relation to childcare, children’s homes or fostering? | | |  |
| Are there any other relevant orders, restrictions or prohibitions in respect of you as set out in Schedule 1 of the Childcare (Disqualification) and Childcare (Early Years Provision Free of Charge) (Extended Entitlement) (Amendment) Regulations 2018? | | |  |
| Are you barred from working with children by the DBS? | | |  |
| Are you prohibited from teaching? | | |  |
| **Specified and statutory offences** | | | |
| Have you ever been cautioned, reprimanded, given a warning for or convicted of: | | | |
| * Any offence against or involving a child? | | |  |
| * Any violent or sexual offence against an adult? | | |  |
| * Any offence under The Sexual Offences Act 2003? | | |  |
| * Any other relevant offence? | | |  |
| Have you ever been cautioned, reprimanded for or convicted of a similar offence in another country? | | |  |
| **Provision of information** | | | |
| If you have answered yes to any of the questions above, provide details below. You may provide this information separately, but you must do so without delay. | | | |
| Details of the order restriction, conviction or caution: | | | |
| The date(s) of the above: | |  | |
| The relevant court(s) or body/bodies): | |  | |
| **You should also provide a copy of the relevant order, caution, conviction, etc. In relation to cautions and/or convictions, a DBS certificate may be provided.** | | | |
| **Declaration** | | | |
| In signing this form, I confirm that the information provided is true to the best of my knowledge and that:   * I understand my responsibilities to safeguard children. * I understand that I must notify the Directors immediately of anything that affects my suitability to work within the organisation. This includes any cautions, warnings, convictions, orders or other determinations made in respect of me that would render me disqualified from working with children. | | | |
| Signed: |  | | |
| Print name: |  | | |
| Date: |  | | |

**Safeguarding Reporting Process**

The process outlined within the first section should be followed where a staff member has a safeguarding concern about a child. Where a referral has been made, the process outlined in the ‘After a referral is made’ section should be followed.

The actions taken by the organisation are outlined in yellow, whereas actions taken by another agency are outlined in blue.

**Before a referral is made**

**N**

A staff member identifies a concern or potential concern. Is the child at immediate risk of harm?

Is the DSL or deputy DSL available to discuss the concern with?

The staff member immediately notifies the police of the situation and informs the DSL.

The staff member makes a referral to CSCS, notifying the DSL of this as soon as possible.

The staff member discusses the concern with the DSL. Taking into account observations and using professional judgement, is a referral required?

The DSL makes a referral to CSCS, keeping the staff member who raised the concern up-to-date with what action is taken.

The child continues to be monitored and early help is provided where necessary. If the concern escalates, a referral is made to CSCS.

Within one working day, a social worker from CSCS will make a decision about the type of response that is required and will notify the referrer. Where this information is not forthcoming, the referrer should contact the appointed social worker to follow up the referral.

The steps outlined in the next flowchart are then followed.

**N**

**N**

**Y**

**Y**

**Y**

**After a referral is made**

Once a referral has been made, a social worker from CSCS will notify the referrer that a decision has been made and one of the following responses will be actioned.

The child is in need of immediate protection.

Where the child is at risk of significant harm but is not in immediate danger, a strategy discussion is held.

No formal assessment is needed.

Where appropriate to do so, the DSL and staff member who raised the concern may be consulted during these stages to ensure that all areas of concern are addressed.

The DSL supports the initial staff member to liaise with other agencies to arrange an early help assessment and appropriate support.

A Child in Need assessment is completed within 45 working days.

Within 15 working days of the strategy discussion, an initial child protection conference is held.

A child protection plan is potentially required.

Appropriate emergency action is taken by the social worker, police or NSPCC.

If the child’s situation does not appear to be improving, the DSL should press for re-consideration to ensure their concerns have been addressed and, most importantly, that the child’s situation improves.

Staff keep the child’s circumstances under review and re-refer if appropriate to ensure circumstances improve – the child’s best interests always come first.

The type of support needed is identified, arranged through multi-agency liaison and provided effectively.