



## **Safeguarding Children Policy and Procedure**

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**Policy**

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## SAFEGUARDING CHILDREN POLICY

### Definition of Safeguarding

In this policy, safeguarding children and promoting their welfare means

- protecting them from maltreatment,
- preventing impairment of their health and development
- ensuring that they grow up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes

Further information about definitions, categories and indicators of abuse are to be found in Appendix 1.

### Purpose

The overall purpose of this policy and its associated procedures is to protect the welfare of children and young people using and receiving services we provide. This includes responding to direct concerns of safeguarding raised by children and young people.

Our safeguarding policy aims to achieve the following three objectives by being vigilant in the execution of our duties:

- Creating a culture where children are valued and their right to safety and respect is upheld.
- Actively managing risk to minimise circumstances where children using US's services may suffer harm.
- Working collaboratively with other organisations to ensure that children are safeguarded and protected.

### Scope

The policy applies to and establishes a framework to support anyone working on behalf of US, including senior managers and the board of trustees, paid staff, volunteers, contracted staff, sessional workers in their practices and clarifies the organisation's expectations.

Everyone who works or volunteers for US or delivers activities on our behalf has a duty to safeguard and promote children and young people's welfare alongside a duty to recognise, respond and share concerns or worries about possible abuse and harm in a timely fashion.

Everyone who works or volunteers for US or delivers activities on our behalf will be supported to make decisions as to how to proceed in a way that is in the best interests and safety of the child or young person.

US's Safeguarding Children Policy and Procedures must be followed alongside local inter-agency procedures, protocols and arrangements devised by Local Safeguarding Children Boards/Regional Safeguarding Children Boards/Child Protection Committees.

### Our Basis and Values

US aims to:

Advance the health and improve the quality of life of young people in Northumberland, Tyne and Wear and Durham. We support young people between 12 and 25 who experience or are at risk of developing mental health issues and/or neurodevelopmental disorders. Support is also offered to their parents/carers.

Engage young people and their parents and carers in sport and other physical activities that have a proven beneficial effect on physical and mental health.

Empower young people to transform their lives through participation in sports and physical activities, enabling them to

- improve their mental and physical health,
- enhance their educational performance and employability
- develop positive relationships,
- raise their self-esteem,
- be happy and take pleasure from recreation

Empower young people to play an active part in the long and short-term planning of activities and **US** in order to develop their organisational skills, whilst ensuring that activities meet the needs of beneficiaries.

To help young people make a positive contribution to family and community life

To destigmatise mental illness and enhance the support available to young people.

**US** currently delivers on an outreach basis. We fund sports and other fitness activities to small groups and individuals.

When we set up programmes we engage with referral organisations who work with young people in education, health, care, community organisations and the justice sector. We also welcome direct introductions from families and individuals.

We provide bespoke programmes for small groups and individuals, tailoring programmes to meet their needs and interests.

The activities are delivered by high quality, well-qualified coaches, teachers, tutors of sports and a wide range of physical activities.

We provide activities for small groups and individuals. We encourage all participants to set personal goals for their **US** experience and where appropriate, support the development of an exit strategy/progression pathway.

We are an organisation that continuously consults young people about our development and offer.

Through sports and fitness activities we aim to empower young people and help them to:

- Improve their mental and physical health
- Make friends and have fun
- Improve their self-image
- Become more confident
- Set and achieve personal goals
- Be successful in education and training and increase their employability

US and the organisations / individuals it contracts with to deliver activities come into contact with children and / or vulnerable adults through the following activities:

- a) Youth consultation meetings about the purpose and planned delivery of US
- b) 1:1 initial assessment interviews before participation in activities
- c) Small group participation in sporting and fitness activities (group size varies from 2 to 14)
- d) Individual participation in sporting and fitness activities (for US young people only)
- e) Supporting participation in sport and fitness activities in the community
- f) 1:1 on programme and post activity reviews
- g) Focus groups as part of quality review
- h) Social/celebration events with young people
- i) Online sport and fitness activities, either 1:1 or in small groups

US supports children, young people and vulnerable adults dealing with the effects of mental ill health and challenging circumstances and we aim to ensure they are safe from harm. Our Safeguarding Children's policy and associated procedures reinforce our aims, uphold our statutory duties and demonstrate our compliance with UK legislation whilst ensuring that our staff and volunteers understand their safeguarding responsibilities and know what to do to safeguard their welfare.

## **Our Approach to Safeguarding**

US is committed to Safeguarding and believe that it is the responsibility of everyone.

### **Procedures and Practice**

The organisation has clearly defined procedures for identifying and taking action where there are safeguarding concerns about actual or suspected incidents or abuse.

### **Safeguarding Lead**

US has a safeguarding lead to advise staff, volunteers and providers and to respond to safeguarding concerns.

### **Safe Recruitment and Safe Practice procedures**

US has a defined recruitment procedure in place to ensure that we appoint staff that are appropriately qualified and have the skills and knowledge to deliver a quality service.

Recruitment is undertaken in line with US robust safeguarding principles, including satisfactory references from a minimum of two referees and Enhanced Disclosure checks for all posts that meet the eligibility criteria. Existing staff and volunteers are re-checked every three years or who when transferring from a role which does not require a DBS check to one which involves contact with children / vulnerable adults. US's uses a reputable third-party organisation for processing checks.

US's has a criminal record disclosure policy to ensure that it abides by the obligations of the Disclosure and Barring Service and to ensure that it complies with the spirit and requirements of the Rehabilitation of Offenders legislation.

US has also adopted a Safeguarding Code of Conduct for all staff, volunteers and providers.

### **Learning Development & Training**

All staff, and volunteers, are required to complete a Child Protection in Sport and lone worker online course within the first six weeks of employment. Staff and managers working directly with children and young people may also be required to attend bespoke safeguarding training courses in line with their specific responsibilities and must attend updated programmes every three years. It is the responsibility of the individual and their manager to ensure mandatory training is completed.

US welcomes requests from our staff to undertake additional training which both supports them in their role and develops greater awareness of issues affecting our young people and their well-being.

### **Supervision and One-to-one Meetings**

There is an expectation that all Supervision and one-to-one meetings will have Safeguarding as a standing item in order for Safeguarding as it relates to each role to be discussed and embedded in all the work undertaken.

### **Managing Risk**

US has an effective procedure for assessing and managing risks with regard to safeguarding children and vulnerable adults. The organisation has a procedure in place for reporting, recording and reviewing allegations and significant incidents. These reports and the learning informs practice, the risk assessment and revisions to our procedures.

### **Records**

Well-kept records are essential in situations where it is suspected or believed that a child or a vulnerable adult may be at risk of harm. The organisation has a clear policy on the management of records, confidentiality, and sharing of information, which adhere to the requirements of GDPR and the Data Protection Act 2018. Trustees, staff, and volunteers are clear about what information can be shared with relevant people within and outside of the organisation and US will seek external advice if required.

### **Links with other Policies**

This safeguarding policy and procedure is supported by other organisational policies and procedures aimed at promoting safe and healthy working practices.

## **Roles and Responsibilities**

### **Accountability Framework**

**The Trustees** have a duty of care to take steps to protect everyone who comes into contact with their organisation from harm (Charity Commission for England and Wales, 2019; Charity Commission for Northern Ireland, 2019; Scottish Charity Regulator, 2018).

This includes:

- ensuring safeguarding policies, procedures and measures are fit for purpose and up-to-date
- making sure everyone in the organisation is aware of their safeguarding responsibilities and knows how to respond to concerns
- having a lead trustee for safeguarding and child protection
- challenging any decisions which adversely affect anyone's wellbeing

- managing allegations of abuse against someone involved in the organisation
- reporting serious incidents as necessary.

**Suzanne McFarlane**, the Chief Operating Officer is the operational designated safeguarding lead for the organisation

Contact details: 07779 838505 / [suzanne@usactive.org.uk](mailto:suzanne@usactive.org.uk)

**Jane Erridge**, Trustee is the trustee with board responsibility for Safeguarding and in the absence of the Chief Operating Officer will cover the operational duties.

Contact details: 07710 225284 / [janeerridge63@sky.com](mailto:janeerridge63@sky.com)

The purpose of both roles is to take the lead in ensuring that appropriate arrangements for keeping children and young people safe are in place at US and to promote the safety and welfare of children and young people involved in US activities at all times.

#### Duties and responsibilities

1. Take a lead role in developing and reviewing US's safeguarding and child protection policies and procedures. SM & JE
2. Take a lead role in implementing US's safeguarding and child protection policies and procedures: ensuring all safeguarding and child protection issues concerning children and young people who take part in US's activities are responded to appropriately. SM & JE
3. Make sure that everyone working or volunteering with or for children and young people at US including the board of trustees understands the safeguarding and child protection policy and procedures and knows what to do if they have concerns about a child's or vulnerable adult's welfare. SM
4. Make sure children and young people who are involved in activities at US and their parents know who they can talk to if they have a welfare concern and understand what action the organisation will take in response. SM
5. Receive and record information from anyone who has concerns about a child who takes part in US' activities. SM & JE
6. Take the lead on responding to information that may constitute a child protection concern, including a concern that an adult involved with US may present a risk to children or young people.

This includes:

- a. assessing and clarifying the information
  - b. making referrals to statutory organisations as appropriate
  - c. consulting with and informing the relevant members of the organisation's management
  - d. following the organisation's safeguarding policy and procedures. SM
7. Liaise with, pass on information to and receive information from statutory child protection agencies such as:
    - a. the local authority child protection services SM & JE
    - b. the police. SM & JE

This includes making formal referrals to agencies when necessary.

8. Seek additional advice and support when needed, through the relevant local authority safeguarding teams or by calling NSPCC Helpline on 0808 800 5000 or emailing help@nspcc.org.uk. SM & JE
9. Store and retain child protection records according to legal requirements and the organisation's safeguarding and child protection policy and procedures.
10. Work closely with the board of trustees to ensure they are kept up to date with safeguarding issues and are fully informed of any concerns about organisational safeguarding and child protection practice. SM & JE
11. Report regularly to the board of trustees on issues relating to safeguarding and child protection, to ensure that child protection is seen as an ongoing priority issue and that safeguarding and child protection requirements are being followed at all levels of the organisation. SM & JE
12. Be familiar with and work within inter-agency child protection procedures developed by the local child protection agencies. SM & JE
13. Be familiar with issues relating to child protection and abuse, and keep up to date with new developments in this area. SM & JE
14. Attend regular training in issues relevant to child protection and share knowledge from that training with everyone who works or volunteers with or for children and young people at US.

SM & JE

N.B. The shared responsibility is a response to the Chief Operating Officer being employed for two days per week.

**Managers, Co-ordinator, staff, volunteers and providers** are responsible for ensuring that all safeguarding and child protection concerns are addressed through respective line management structures in line with the procedure.

## Statutory Guidance

Staff and volunteers are required to refer to Appendix 1, which offers broad definitions of key terms.

The principal pieces of legislation governing this policy are:

- Working Together to Safeguard Children: A guide to interagency working to safeguard and promote the welfare of children' 2010, 2018,
- 'Keeping Children Safe in Education-Statutory Guidance for Schools and Colleges' 2018
- The Children Act 1989, 2004
- Children and Social Work Act 2017
- Safeguarding Vulnerable Groups Act 2006
- Public Interest Disclosure Act 1998
- Rehabilitation of Offenders Act 1974
- The Protection of Freedoms Act 2012 - Disclosure and Barring Service
- Mental Health Act 1983
- Equality Act 2010
- Prevent Strategy 2015
- Children and Families Act 2014
- Human Rights Act 1998
- Working together to Safeguard Children 2017
- Every Child Matters
- Education Act 2002
- Care Act 2014



- The United Nations convention on the Rights of the Child 1992
- Sexual Offences Act 2003
- Female Genital Mutilation Act
- Data Protection Act 2018 and General Data Protection Regulations
- Strategy for Dealing with Safeguarding Children and Vulnerable Adults Issues in Charities, Charity Commission (2012)
- Protection of Freedoms Act 2012
- The Serious Crimes Act 2015
- Modern Slavery Act 2015

## SAFEGUARDING CHILDREN AND YOUNG PEOPLE PROCEDURES

### 1. Communicating Safeguarding Responsibilities

#### Action: Chief Officer / Co-ordinator

1. Ensure that all staff/volunteers are aware of this Policy & Procedure and any relevant codes and practices.
2. Ensure local contact numbers are recorded in an accessible place for staff and volunteers to include, as relevant:  
Local Authority/Trust referral/duty teams (children and adults), the Local Area Designated Officer (LADO) in England and Wales
3. Ensure all staff members are directed to access the local LSCB website in England and Wales and familiarise themselves with the local arrangements and procedures

### 2. Code of Conduct and Professional Boundaries

The Safeguarding Code of Conduct supports staff and volunteers by making clear what is expected of them in terms of their conduct and behaviour; it assists them to raise concerns without fear of recrimination and reduces the risk of misplaced or malicious allegations being made against them.

#### 2.1 Induction

#### Action: All Staff/Volunteers

Ensure that you have read, fully understand, and agreed the content of the Safeguarding Code of Conduct. It is your responsibility to speak to your line manager if you are not clear or require further clarification.

#### Action: Managers

Ensure all staff and volunteers have fully understood and accepted the terms of the safeguarding code of conduct.

#### 2.2 Professional Boundaries

#### Action: All Staff/ Worker /Volunteers/ Providers

1. Professional Boundaries must be an integral part of supervision. It is an opportunity to reflect on the quality of the professional relationship established with children, young people or adults, the nature of the work and to ensure that any challenges in maintaining professional boundaries can be addressed in an appropriate manner.
2. Do not visit our participants outside of planned working hours; invite them to your home or to be part of your family or social network. Any exceptions to this must be discussed and agreed with your manager.
3. Ensure that if you live and work/volunteer within your own community, you are clear about professional boundaries when any of your own family or children has friendships with any US participant or siblings and that this is discussed with your manager.

4. Inform your manager if you have had a previous professional or personal relationship with participants in order to agree how best to manage confidentiality and risk and ensure that you operate in accordance with US's Policies and Procedures.
5. Bring any risk of potential breakdown of professional boundaries, however unintentional, to the attention of your manager.
6. Do not give out your personal mobile or home telephone numbers except in exceptional circumstances or emergencies and with the agreement of managers and following a robust risk assessment.
7. Never agree to be part of participant or their family's social networking sites or agree to be e-friends, unless this is an agreed part of the work and has been risk assessed by managers.
8. Do not share personal blog addresses or other modes of personal communication, with participants with whom you are working.
9. Ensure you adjust privacy settings on your own personal social networking sites to prevent inappropriate content being shared with participants.
10. You must not approach participants in any social setting if they do not instigate the contact especially where their behaviour indicates that they do not want to be recognised or indeed identified as a user of our provision.
11. You must not enter into a partner relationship with participants or members of their families. This constitutes a breach of professional boundaries and relevant codes of conduct/practice. If you become aware that the above situation has occurred in relation to a colleague, you must bring this to the attention of your manager.
12. The organisation recognises that it is possible that the friends and family of staff members may become Participants and, indeed, that staff members themselves may in some circumstances become Participants. It is incumbent on staff members to speak to their Manager about such situations to avoid any conflicts of interest, breaches of confidentiality or professional boundary issues.
13. **When delivering on-line activities for US participants you must use the agreed platform and deliver in the same professional manner as when 'face to face'.**

**Action: Managers**

1. Discuss any potential challenges or blurring of boundaries, which may arise for any worker or volunteer who lives and works within the same community. Agree how any such difficulties will be addressed should they arise.
2. Ensure that if staff or volunteers require regular telephone contact with participants that this is done through appropriate use of US issued equipment.
3. Agree clear boundaries about the nature of an individual's work and their relationship to participants.

4. Use the supervision process to help workers reflect on their professional relationship with children, young people and adults at risk and identify if there are any warning signs that professional boundaries may be in danger of being compromised.
5. Work through with staff members sensitively, but honestly, the implications and issues where they or a member of their family is or becomes a participant.

### **2.3 Personal Relationships and contact with participants outside of work**

#### **Action: All Staff/ Worker /Volunteers/ Providers**

Declare any personal relationships with any participant/s if they begin to access our provision.

#### **Action: Manager**

It is usually inappropriate for US staff/volunteers to deliver provision or become the key workers to a friend or family member. If this situation occurs, arrangements should be made for another staff member/volunteer to take over the case or key worker role. You must agree any exceptions to this (for example, where a parent of a participant volunteers with group work for disabled children) and the decision is recorded on the staff/volunteer record.

### **2.4 Self-disclosure of personal experiences**

#### **Action: All Staff/ Worker /Volunteers/ Providers**

It is not usually acceptable for a member of staff to self-disclose their personal experiences to a participant. There may be occasional exceptions to this where some self-disclosure is appropriate and professional judgement should be exercised. Boundaries relating to this must be discussed with your manager.

#### **Action: Manager**

Ensure that you discuss issues of self-disclosure with staff so they are clear of the professional boundaries around this in relation to their role.

### **2.5 Continuing a relationship after the activities or piece of work is complete**

#### **Action: All Staff/ Worker /Volunteers/ Providers**

It is not normally acceptable for a member of staff to have contact with a participant in a personal capacity once the provision or piece of work you have been involved in is complete. Any exceptions to this must be agreed with management and identify why continued contact does not compromise professional boundaries in any way.

### **2.6 Gifts and Hospitality**

#### **Action: All Staff/ Worker /Volunteers/ Providers**

You must not use a relationship with a participant or their family for personal gain. Gift-giving and accepting presents should only take place in line with US's Policy on Gifts and Hospitality and should be agreed with your manager.

## **2.7 Concern about a breach/potential breach of professional boundaries**

### **Action: Staff/ Worker / Volunteers / Providers**

1. Concerns about a breach or potential breach of professional boundaries by you or a colleague or external agency must be shared with your manager. This should happen regardless of whether the breach of professional boundaries was due to initial intentions being well meaning. A breach of the Professional Boundaries may place a child/young person at risk of harm and you have a duty to act upon your concerns to safeguard children and families.
2. Where you feel unable to report the concern/s to your manager, you should refer them to the Trustee Planning and Development.
3. If you cannot raise issues through your management or you consider the breach of professional boundaries not to have been dealt with appropriately, you should report via the use the Whistleblowing Procedure.

### **Action: Manager**

1. All potential breaches of professional boundaries must be taken seriously. The breach may not be a single event but a series of events and interactions, which together cause the individual to cross the boundary between what would be considered a professional relationship to a non-professional relationship.
2. Staff must be supported to address any concern about a breach of professional boundaries without the automatic risk of disciplinary proceedings. However, staff must be made aware of all possible consequences depending on the severity and nature of the breach including possible disciplinary action; dismissal; referral to Regulatory bodies, relevant Local Authorities, Disclosure and Barring Service, Disclosure Scotland and/or the police as appropriate.
3. Conduct an investigation to establish the facts and decide whether there is a disciplinary case to answer – refer to Disciplinary Policy and Procedure.
4. All breaches of professional boundaries are to be recorded on individual staff files including any outcome of action taken. In cases where there is found to be 'no case to answer' the outcome should still be recorded.

## **3. Responding to safeguarding concerns**

### **3.1 A child or young person discloses information to you about abuse or harm that they are experiencing (in person, on the phone, via email, third party reporting, through the observation of signs/symptoms of abuse, neglect or unmet needs)**

#### **Action: Person receiving the information**

1. Always offer reassurance, listen to, and take seriously, what they are saying. Never promise to keep secrets or be persuaded by the child or family not to take action if you are worried that a child is being harmed or is at risk of harm.
2. It is not your job to investigate, verify what is being said, or examine the child; this is the statutory responsibility of the local authority/child protection services and/or the Police. However, it is important to ascertain relevant information and it may be necessary to undertake some enquiries

before making a referral, including full name, age, mobile number, email address and any involvement with US services and a brief outline of what happened to them.

3. Explain the process to the child: that you will need to pass this information on, to whom, the reasons why and possible actions.
4. Consult with your manager or other responsible manager, as soon as possible and certainly the same day, to agree the course of action but do not delay if this would place a child at increased risk. You must record the incident in detail as soon as possible, or at least within 24 hours of being made aware.
5. **If the child is present and is at immediate risk of harm**, take the appropriate course of action to secure the immediate safety of the child unless to do so would put you or others at risk. This could include:
  - a. Calming angry or upset children or adults;
  - b. Contacting 999 emergency services, if necessary, on their behalf;
  - c. Contacting local child protection/Duty Team
  - d. Seeking vital medical assistance.
  - e. Contact the Designated Safeguarding Lead
6. If you receive a telephone call from a child please take as much detail as possible, including full name, age/date of birth, contact details, email address, mobile number, any involvement with US's services and if they say they are being harmed a brief outline of what is happening to them. If the child is in immediate danger, advise them to call the Police; you must also contact the Police to check that the child has referred the concern to them. If the child is not in agreement with this/not able to do this, you have a duty to call the police and pass on any information you have.

### **Action: Manager**

1. If we are aware that the child is subject to a Care Order or an ongoing Child Protection Investigation or has a child protection plan, any new incident must be referred to the lead professional/allocated social worker/local child protection services and information shared accordingly.
2.

If you are concerned that the child is, or may be at risk of, being trafficked, or a victim of slavery, servitude, forced or compulsory labour, you must adhere to local inter agency protocols and liaise with the local children's social care/ duty service or Police.
5. If the child is not subject to a current child protection plan or child protection or care proceedings, a supervision order or at risk of being trafficked, or is not known to the service, you must make a clear assessment of whether the information received from the responsible worker is deemed to be a child protection referral i.e. the child is at risk of significant harm. If you are unsure of the course of action you should take, you must seek guidance through the Designated Safeguarding Officer.
6. If your assessment is that the child is suffering, or likely to suffer, significant harm, a referral must be made to the local children's social care duty team/local child protection service. For further detail, see Section 3.3

7. If your assessment is that a referral is not needed, you must identify what course of action is to be taken to respond to the concerns identified and ensure that all decisions and the reasons for them are recorded on the child's file in accordance with US's Data Protection Policy. Where there is some form of assessed need refer to relevant services, using agreed local protocols.
8. If there is a disagreement between the US's responsible manager and responsible member of staff about the need to report concerns to child protection services, the Designated Safeguarding Officer or Chair of Trustees must be consulted to make a final decision.
9. Ensure all decisions and agreed actions are recorded securely in accordance with US's Data Protection Policy.
10. Ensure you are aware of the local referring processes for Children in Need of Protection in your area. *See Appendix 2 for all relevant Local Authority Safeguarding contacts.*

### **3.2 Working with Children/Young People where there are existing safeguarding and child protection concerns**

#### **Action: Manager**

If it is known that a child/young person is subject to a Child Protection Plan, is on the Child Protection Register, or deemed to be in a high risk situation (e.g. at risk of sexual exploitation, trafficking or missing); you must consider and record any risks/potential risks to the child/young person and identify any actions required on the child/young person's Participant Record. Recording must be undertaken in accordance with the US Data Protection Policy.

### **3.3 Referring Child Protection Concern**

#### **Action: All Staff/Volunteers**

In accordance with the Information Sharing Policy & Procedure - a child's need for protection must always be the primary concern.

1. Decisions to inform the child and parent/carer about any referral will be informed by local inter-agency protocols; an assessment of any increased risk of harm to the child; and the possibility of prejudicing any subsequent police investigation. If in doubt about the decision and timing of informing a child and their family, seek advice from the Designated Safeguarding Lead or local child protection services. In any event you must speak to your manager as soon as possible and definitely the same day
2. Following consideration of the above, if you assess there is a risk, tell the child, as appropriate to their age and understanding, and parent/carer, that the referral will be made.
3. Contact must be made with the appropriate child protection services or police following local inter-agency procedures.
4. Share with child protection services any other relevant information or known risks about the child and family within the context of their wider family and environment.

5. Agree with child protection services what the child and parents/carers will be told about the next steps, by whom and when and actions which need to be taken.
6. Referrals of suspected child abuse must always be confirmed by encrypted email or recorded delivery using local referral protocols to the Duty Team/local child protection service within 24 hours.
7. Ensure you inform your manager as soon as possible and certainly on the same day and record all actions, decisions, risk assessments, and contact in accordance with the US Data Protection Policy.
8. If you become concerned that the situation has escalated and it seems that the child or young person is at increased risk of significant harm you must immediately contact the police and local child protection services to seek guidance on what to do.
9. If you are not satisfied, that the child protection service's response adequately safeguards the child then you must inform your line manager, as soon as possible and certainly the same day, who can make representations on US's behalf. See **Escalation Procedures** in Section 3.4.

### **3.4 Escalation of Child Protection Concerns where there are professional disagreements**

#### **Action: Person Making Referral**

1. If the decision of the child protection service does not agree with your service's assessment of the level of concern this must be recorded in accordance with the US Data Protection Policy.
2. Discuss with your manager to clarify what action needs to be taken. If your manager is not available, you must refer your concerns up the Designated Safeguarding Officer until you are able to speak to a manager.
3. If you disagree with your manager's decision and have evidence to suggest that the child is not adequately safeguarded you should seek advice from the Designated Safeguarding Officer or Chair of Trustees. You should do this with your manager's agreement if possible but you have the right to raise your concerns regardless of your line manager's consent. This should also be recorded on the file. In this event the Whistleblowing Policy may be used.

#### **Action: Manager**

1. All notes of discussion/disagreement must be recorded in accordance with the US Data Protection Policy
2. If you disagree with the decision made by the Local Authority/Child Protection Services, you must contact the local authority manager for discussion. Follow up your concerns in writing within 24 hours.
3. Further, inform your Designated Safeguarding Officer and discuss possible actions and options available.

#### **Action: Designated Safeguarding Officer**



1. If the response is still not deemed satisfactory, contact your equivalent level manager in the statutory agency to discuss your concerns.
2. Follow up your concerns in writing with the statutory agency within 24 hours.
  - a. If agreement is still not reached through this route, then discuss next steps with your Chair of Trustees to consider: making representation to the relevant director in the local authority or trust; or Local Children's Safeguarding Board (soon to be Multi Agency Safeguarding Arrangements in England)/Area Child Protection Committee/Safeguarding Panel.

#### **4. Responding to Safeguarding Allegations Against Adults who work for or on behalf of US**

1. A safeguarding allegation is one where information comes to light from any source, which suggests that an adult working for or on behalf of US has or may have:
  - Caused significant harm to a child or vulnerable adult
  - Committed a criminal offence against a child or adult or
  - Behaved in such a way that indicates they may pose a risk of harm to children.

This includes historical information about abuse an adult may have experienced as a child whilst in receipt of services from US.

2. The management of an allegation of abuse may involve one or all of:
  - a police investigation of a possible criminal offence enquiries and assessment by children's social care about whether a child is in need of protection or in need of services
  - consideration by an employer of disciplinary action in respect of the individual.

**Action from member of staff or volunteer** who has a concern about an adult working for or on behalf of US who works with or is in contact with a child or young person.

1. Inform your manager or Designated Safeguarding Officer and Chair of Trustees immediately. Action must have been taken and recorded within 24 hours (including weekends and bank holidays).
2. It is not your job to investigate the allegation. Your job is to listen, ensure you have the basic details so you can record what was said, and respond appropriately. For further information see Guidelines for responding to Allegations against Adults.
3. If for any reason you do not feel able to alert a line manager then the Whistleblowing Policy and Procedure must be followed.

#### **Action: Responsible Senior Manager**

*(see additional investigation guidance for managers: responding to external investigations into safeguarding/gross misconduct allegations)*

1. Upon receiving information, ensure the safety of any child or young person. If a crime has clearly been committed, police and the local authority child protection services/Trusts/Local Authority Designated Officer (LADO) will need to be contacted as a matter of some urgency and usually within 24 hours. If there are other children who could be at risk (e.g. other children in the household/service) these details must also be shared.
2. In consultation with the LADO/local child protection services/Trusts, a risk assessment should be conducted within 24hrs to decide whether the person concerned can continue in their role or whether a period of suspension is required or a temporary redeployment is appropriate. If the allegation concerns a volunteer then a decision must be made as to whether to suspend their volunteering activities. This must be confirmed in writing.
3. Do not inform the member of staff/volunteer against whom the concern/allegation has been made of the nature of the allegation until consultation has been undertaken with the relevant local authority and where necessary police. The Chair of Trustees must ratify any decision.
4. If the allegation concerns a volunteer then a decision must be made as to whether to suspend their volunteering activities. This must be confirmed in writing.
5. Consult with Chair of Trustees to agree next steps regarding the member of staff/volunteer. Any officer, tasked with undertaking further enquiries or conducting an investigation under disciplinary procedures must be competent in child protection matters and be of sufficient seniority to enter into discussion with external agencies. Any action must be agreed with the Head of Corporate Safeguarding and the Local Authority Designated Officer (LADO) or Social/Health Care Trust as appropriate. These procedures must be followed in conjunction with US Disciplinary Procedures.
6. Consideration must be given as to whether the allegations represent a possible crime that needs to be reported to the Police; discussions will need to take place regarding the primacy of the Police investigation and the impact on internal timescales for subsequent investigation, etc.
7. As soon as possible, agree with the Health/Social Care Trust/Child Protection Agency who will ensure that parents/carers or children are kept informed about the allegation and how they will be kept updated on any progress of the case and its outcome.
8. Any other local authority with responsibility for the child and any relevant partner agencies must also be notified of the allegation and/or investigation within 24hrs. In some circumstances, the Local Authority or Health and Social Care Trust where the US staff, volunteer, or carer resides may become involved if the allegations have implications for the care of their own children.
9. Ensure the Allegations Against Adults Reporting Form has been completed and signed off by the Chair of Trustees, as soon as possible (always within 24 hours) and sent to those named in the circulation list.
10. The reporting form must be monitored and regularly updated by the Chair of Trustees when there is significant new information, and/or reviewed quarterly and when the outcome of the investigation is known.
11. Ensure that staff involved with an investigation are aware of the support options available.

12. Chair of Trustees are responsible for ensuring that any support offered is kept separate from the managers involved in the investigation.
13. Notify the Local Authority Designated Officer (LADO) of the conclusion of any internal investigation.
14. At the conclusion of a case all required regulatory referrals or notifications (including Ofsted, CQC and the Charity Commission) must be made and a decision made and recorded by the Chair of Trustees as to whether the person will be referred to the Disclosure and Barring Service.

## 5. Reporting of Serious Safeguarding Incidents

1. A serious safeguarding incident is defined as:

- Unexpected or avoidable death of child/young person/adult at risk in receipt of services from US
- Serious harm to child/young person/adult at risk, where a life-threatening outcome required intervention by US's staff/volunteers,
- Actions of a participant which has caused death or serious injury serious harm to another child or adult.
- A 'Near Miss' where an unplanned event or incident did not result in serious injury, harm or illness, but had the potential to do so and only a fortunate/timely break in the chain of events prevented a serious outcome for the child/vulnerable adult.
- An incident likely to result in adverse media attention and/or potential reputational damage for US's
- An incident that is serious enough that it may lead to a Serious Case Review (soon to be Child Safeguarding Practice Review (local or national))/Significant Case Review/Child Practice Review and/or any case which indicates organised crime or large scale abuse
- A safeguarding incident likely to raise concern about US's policies or procedures;
- A safeguarding incident which raises concern about possible radicalisation of any member of staff/volunteer/adult/child/vulnerable adult
- Where a registered provider (residential or early years) is required to close by an external body following safeguarding concerns

### **Action: Manager**

1. If a member of your team is involved in a serious safeguarding incident and/or any of the above situations apply, you must complete a Serious Safeguarding Incident Form within 24 hours and send it to the Designated Safeguarding Officer.
2. If a current participant has died you must also complete the Death of a Service User form and send to the Designated Safeguarding Officer.

3. If the incident also relates to Health and Safety, an accident report should be prepared, and a RIDDOR report submitted to the HSE as required.

## 6. Safeguarding and Social Media

### Social Media Guidance for staff working with children and young people

#### What do we mean by Social Media?

‘Social media’ in this document means any electronic communication that enables people to stay in touch online. This includes apps in which you and others contribute to both shared and private conversations with organisations, communities and individuals.

#### Background

Social media has become an important part of everyday life. It is an exciting and engaging way of keeping in touch with friends and family, as well as people, groups and brands beyond daily life. Social media at US covers both private conversations (e.g. WhatsApp) and public conversations (e.g. Facebook). Although these are obviously very different types of communications, our safeguarding responsibilities apply to both cases.

Many of the children and young people in our care expect to use social media as a default method of communication – even more than talking face to face or on the phone. As we have started using social media more regularly, the number of stories about inappropriate use of technology, grooming behaviour and an inability to challenge colleagues has grown, which means that US needs clear practice guidance for workers and organisations around safer working practice in this area.

**Individuals who work with children and young people, or adults who are their parents and carers, whether in a voluntary or paid capacity, must always keep their professional role in mind regardless of the method of communication with a child.**

All communications with a child, regardless of how they take place, should be considered to carry the same weight. As a professional supporting a child or young person, you should ensure you document online conversations, chats or interventions as well as you would through any other channel, for instance face-to-face or phone conversations.

#### What happens if an US person abuses their access to social media?

This guidance refers to best, safe and poor practice regarding the use Social Media. US’s Safeguarding Code of Conduct outlines the behaviour expected of all staff, workers and volunteers, and treats any breach the same whether it is online or offline.

Inappropriate use of social media may breach US’s Safeguarding Code of Practice and could put the lives or livelihoods of children at risk. Failure to use social media appropriately may result in disciplinary action being taken, up to, and including dismissal, or result in the termination of an individual’s working agreement or involvement as a volunteer with US’s, as appropriate. In certain circumstances breaches may also result in reports to Regulatory bodies, relevant Local Authorities and/or the police, as appropriate.

Make sure you are confident in your use of social media before you begin, and never feel pressured to communicate with children, participants, families or other professionals through any channel that you are not personally comfortable with. Advice on usage of any Social Media platform can be sort from the COO.

## 7. Online Safety

We believe that children should be able to use the internet for education and personal development and that it offers an alternate means for young people to access our US Offer, but safeguards need to be in place to ensure they are kept safe at all times.

We recognise that:

- the online world provides everyone with many opportunities; however it can also present risks and challenges
- we have a duty to ensure that all children, young people and adults involved in our organisation are protected from potential harm online
- we have a responsibility to help keep children and young people safe online, whether or not they are engaging in US initiated activities or our website
- working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare and in helping young people to be responsible in their approach to online safety.

We will seek to keep children and young people safe by:

- allocating the role of online safety coordinator to the Designated Safeguarding Lead responsibilities
- providing clear and specific directions to staff and volunteers on how to behave online through our Safeguarding Code of Conduct
- supporting and encouraging the young people using our service to use the internet, social media and mobile phones in a way that keeps them safe and shows respect for others
- supporting and encouraging parents and carers to do what they can to keep their children safe online
- developing an online safety agreement for use with young people and their parents/carers responding to any incidents of inappropriate online behaviour, whether by an adult or a child/young person through the procedures laid out in this policy
- reviewing and updating the security of our information systems regularly
- ensuring personal information about the adults and children who are involved in our organisation is held securely and shared only as appropriate
- ensuring that images of children, young people and families are used only after their written permission has been obtained, and only for the purpose for which consent has been given
- providing supervision, support and training for staff and volunteers about online safety
- examining and risk assessing any social media platforms and new technologies before they are used within the organisation.

### **What happens if an US person abuses online resources with young people:**

Failures by adults to behave appropriately online may result in disciplinary action being taken, up to, and including dismissal, or result in the termination of an individual's working agreement or involvement as a volunteer with US's, as appropriate. In certain circumstances breaches may also result in reports to Regulatory bodies, relevant Local Authorities and/or the police, as appropriate.

### **What happens if a young person abuses online resources:**

Staff will be provided with support and training on dealing with all forms of abuse by young people, including bullying/cyberbullying, emotional abuse, sexting, sexual abuse and sexual exploitation. We will make sure our response takes the needs of the person experiencing abuse, any bystanders and our organisation as a whole into account.

We will review the plan developed to address online abuse at regular intervals, in order to ensure that any problems have been resolved in the long term.

## 8. Physical and mental wellbeing during a session

### 8.1 A young person becomes physical or mentally unwell during an activity

US works with young people who have or are at risk of developing mental health issues. There could be occasions where the young person becomes unwell or acts in a way that help is required. This is likely to be a rare occurrence but the following is advice to follow in such an event.

As a keyworker, volunteer or trainer you have a responsibility to follow your job role but in an emergency you need to call for expert help and not manage this yourself.

Make sure you have a working charged phone with you at all times and have the contact details of the young person’s GP, guardian/parent or emergency contact and a charity contact.

#### Action responsible staff member

1. The first decision to make is whether to call an ambulance 999 or telephone 111 or the GP. This will depend on the level of threat to life - in a life-threatening situation call an ambulance through 999. In less dangerous circumstances contact 111 for advice or the young person’s GP
2. Always call the guardian/parent of the young person if they are under 18 years old - if over 18 years only call the guardian/parent if you have the young person’s permission. In the situation that the young person is over 18 years and either does not have a guardian or parent or does not want them to be contacted - either contact a known support of the young person or health services (999,111,GP) as below.
3. Make sure the young person is taken safely to the required venue
4. Make a record of what happened
5. Contact the Designated Safeguarding Lead to let them know what has happened

| Type of emergency                     | Action   | Action                                | Action   |
|---------------------------------------|--|---------------------------------------|--|
| Self harm-cutting, overdose, ligature | Call 999 and ask for immediate assistance to go to A and E | Call guardian/parent or known contact | Stay with young person until help (either ambulance or parent/contact) arrives |
| Voicing suicidal ideas                | Call guardian/parent or known contact                      | Ring 111 for advice                   | Stay with the young person until help arrives                                  |

|                           |  |   |  |
|---------------------------|--|---|--|
| Physical injury/illness   | Depending on severity call ambulance 999 or GP | Call guardian/parent or known contact     | Stay with the young person until help arrives                                    |
| Alcohol or drug ingestion | Call guardian/parent or known contact          | Stay with young person until help arrives | If guardian/parent cannot come call 999 and wait with young person for ambulance |

## 9. 'Missing' Children

### 9.1 A child goes missing during an US activity

#### Action: Responsible Staff Member

1. Risk Assessments should be completed for all activities in accordance with the Health & Safety Policy and Procedures. Where there are additional concerns about an individual child, an individual Risk Assessment should be completed in accordance with the Health & Safety Policy and Procedures and shared with relevant parties.
2. If a child or young person goes missing, and after initial search still cannot be found, the staff member must consider with their manager and parents/carers, whether to notify the Police immediately or make further enquiries in relation to places where the child may have gone. This judgement should be informed by the level of the child's vulnerability or an assessment of risk to themselves or others. If contacting the Police, details of the risk assessment must be shared along with the child's details.
3. If a child is subject to a child protection (Section 47) enquiry or on a child protection plan, child protection register, or a supervision requirement, then the Local Authority/Trust must be informed immediately. If it is out of hours, the Duty/Out of Hours on call service should be contacted.
4. If a child or young person has particular vulnerabilities, or has gone missing on several occasions, and the situation could lead to serious harm, this should be recorded as a serious incident using the Serious Safeguarding Incident Form.
5. Staff should ensure that once the child or young person is found, parents, carers, and any other relevant agencies are notified immediately and that he/she is treated positively on their return.

## 10. Child Exploitation (CE)

US may identify participants who are subject to or at risk of CE. However, some children/young people may be at higher risk of this e.g. care leavers, homeless young people. At times, these young people may lead chaotic lives and some engage in risky behaviour. However, no child or young person is ever responsible for the abuse to which they are subjected.

#### Action: Staff /Volunteers/ Providers /Managers

1. If staff/volunteers become aware of a child/young person who may be at risk of CE, they should report this to the Designated Safeguarding officer in the first instance. Indicators may include:



- a. Missing from home for periods of time
  - b. Regularly missing school/education
  - c. Appearing with unexplained gifts
  - d. Associating with other young people involved in CE
  - e. Having older boyfriends/girlfriends
2. The Designated Safeguarding officer should contact the Local Safeguarding Children's Board (soon to be Multi-Agency Safeguarding Arrangements) for guidance and to raise concerns.
  3. In matters where there are increasing concerns that a child/young person is involved in CE and may be experiencing significant harm, this should be reported as a serious safeguarding incident.

## 11. Private Fostering

### Action: Staff/Volunteers/Providers/Managers

1. If you suspect that a child is in a private fostering arrangement (see definition section) you have a statutory duty to notify the relevant Local Authority in terms of ensuring their welfare and protection.
2. If such concerns arise, these should in the first place be raised with your manager or Designated Safeguarding Officer to agree next steps.

## 12. Female Genital Mutilation (FGM)

1. **Duty to report:** From 31 October 2015, there is a mandatory duty for regulated professionals<sup>1</sup> to report cases of FGM in England and Wales. This applies where the victim is under 18 years old and has disclosed FGM directly or the professional has seen something that possibly indicates the girl has been cut and should be reported to the Police and social care department.
2. This is a personal duty, which requires the employee who becomes aware of the case to make a report; the responsibility cannot be transferred to anyone else. The only exception is if you know that another employee has already made a report. Therefore, there is no requirement to make a second referral.
3. **Regulated Professions:** The duty only applies to staff that works in a regulated profession e.g. teachers, healthcare profession and social workers. It therefore covers:
  - General Chiropractic Council
  - General Dental Council
  - General Medical Council
  - General Optic Council
  - General Osteopathic Council
  - General Pharmaceutical Council
  - Health and Care Professions Council (whose role include the regulation of social workers in England)

<sup>1</sup> In Wales, education practitioners are regulated by the Education Workforce Council.



- Nursery and Midwifery Council

If they are not under the duty, they should still report the incident as a safeguarding issue.

#### 4. When the duty does not apply:

Women over the age of 18 years old

5. The duty to report does not apply to cases of disclosure from women over the age of 18. In these instances, you must follow local adult safeguarding procedures or contact your local Safeguarding Lead.

#### Disclosure is from someone other than the child

6. If other people disclose a possible case of FGM e.g. parent of friend, or you suspect that a child/adult at risk may be at risk of FGM, the duty to report will not apply. However, this remains a safeguarding concern and must include a referral to the local Social Care Department and informing the Designated Safeguarding Lead.

### 12.1 Receiving a Disclosure or becoming aware of a FGM case

#### Action: Staff Member

1. An employee and/or volunteer may become aware of a case of FGM if they are informed by a girl under 18 that an act of FGM has been carried out on her. or
2. Observe physical signs, which appear to show that an act of FGM has been carried out on a girl under 18.
3. They must always speak to manager about their concerns at the earliest opportunity and certainly the same day they become concerned
4. Staff members can also seek advice from the National FGM Centre

### 12.2 Making a report

1. A report can be made in writing or orally to the Police and Social Care department. If calling the Police, use the non-emergency no. 101. This report must be completed no later than by the close of the following working day. Any reports should be discussed with your manager in the first instance but should not delay the referral to the Police.

**Staff in non-regulated posts but belong to one of the “professions” in accordance with the “2003 Act”, should familiarise themselves with the mandatory duty to report and they should contact their Designated Safeguarding Lead to make a safeguarding referral.**

2. You should be prepared to provide the call handler with the following information and explain that you are making a report under the FGM mandatory reporting duty.

|   |   |
|---|---|
| <p>Your details:</p> <ul style="list-style-type: none"> <li>• Name</li> <li>• Contact details (work telephone number and e-mail address)</li> <li>• Place of work</li> <li>• Details of your organisation's designated safeguarding lead</li> </ul> | <p>The girl's details:</p> <ul style="list-style-type: none"> <li>• Name</li> <li>• Age/date of birth</li> <li>• Address</li> </ul> |
|---|---|

3. You should update the Designated Safeguarding Lead of the actions taken and identify whether other safeguarding actions are required, and how these will be taken forward.
4. Any reporting of an FGM concern should be reported internally, as a Serious Safeguarding Incident using the Serious Safeguarding Incident Form. This should be sent to the entire list of named people on the form.

### 12.3 Consequences of a failure to Report

1. If the employee/volunteer does not carry out their duty to report the case of FGM to the Police, this will be treated as a possible breach of their professional duty and may result in a disciplinary action and, where relevant, referral to the governing body for their profession.
2. **Recording.** Cases involving FGM should be recorded in the relevant case file of the individual concerned in accordance with US's Recording Policy.

## 13. Prevent Policy

1. Radicalisation is comparable to other forms of exploitation and is therefore considered a safeguarding issue that all staff must be aware of. The process for escalating concerns and procedures regarding how to make a referral to the relevant authorities on this specific matter follow below.
2. The emphasis is upon supporting vulnerable children, young people, and adults. There is no expectation that US's will take on a surveillance or enforcement role as a result of fulfilling our Prevent duty. The Prevent Concern promotes a multiagency approach, and US's will continue to work alongside Local Safeguarding Children Boards (soon to be Multi-Agency Safeguarding Arrangements Groups).
3. A **Prevent Concern** does not have to be proven beyond reasonable doubt; it should be based on something that raises concerns, which is assessed by using professional judgement.
4. **Extremism** is defined in the Prevent Strategy 2011 as vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs.
5. **The Terrorism Act 2000 defines terrorism** as an act that endangers or causes serious violence to a person/people and/or damage to property; or seriously interferes with or disrupts an electronic system.

6. **Radicalisation** is defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups. Radicalisation should be considered as an 'additional vulnerability' under Chapter 11 of the Working Together to Safeguard Children Guidance (2010). There is no obvious profile of a person likely to become involved in extremism or a single indicator of when a person might move to adopt violence in support of extremist ideas.
7. **Indicators for vulnerability** to radicalisation can be similar to those for other forms of abuse and may particularly include:
- Distance from cultural heritage
  - Experience of migration
  - Experience of racism and discrimination
  - Family members or friends associated with extremist groups
  - Family tensions
  - Sense of isolation and feelings of failure
- It is important to note that not all individuals at risk of radicalisation and acts of terrorism are susceptible or vulnerable and they may be acting out of choice.
8. **Risk Assessments:** The level of risk will vary across different parts of the UK. US should ensure they are informed of the particular risks in their areas and work with other agencies in assessing risks where appropriate.
9. Training will be provided proportionately for all relevant staff dependent upon their role and links to front line service delivery.

### 13.1 Making a Report

**Action: An employee/volunteer may have concerns as a result of:**

- A direct disclosure
  - An observation
  - An expression of concern or complaint made by another person
1. If you suspect that a **child/adult at risk is at immediate risk or actually engaged in the planning or implementing of an act of terrorism**, take the following course of action immediately:
- Contact your line manager and consider referral to Police on 999 Or Anti-Terrorist Hotline on 0800 789 321.
    - Inform the Designated Safeguarding Manager of the actions taken.
  - All actions must be recorded. For further details contact Designated Safeguarding Lead.
2. If you suspect that a **child/adult at risk may be under the influence of radicalisation or extremism but not in immediate danger**, the following actions must be taken:

- a) Raise your concern directly with your manager in the first instance; informing them of the nature of your concerns.
  - b) Contact the Police on number 101 to discuss the next steps, requesting to speak to officers with the responsibility in relation to Prevent duties.
  - c) Contact the Designate Safeguarding Officer informing them of the actions taken.
3. Clarify with the Police or Anti-Terrorism hotline the next steps and whether/how feedback will be provided.

### **Action: Manager**

Ensure any reported Prevent Concerns are managed in accordance with these procedures and where necessary escalated to the relevant authorities.

## **14. Information Sharing/Consent**

All practitioners who have access to information about children at risk have a duty to preserve confidence. Each individual's right to confidentiality must be respected. All personal information must be treated with care and kept securely; this means not disclosing it to people who do not need to know.

In normal circumstances the child who is the subject of the information will be required to give consent before information about them can be shared. The consent of the person who provided the information may also be required.

Irrespective of the age, abilities or level of maturity of a child, if information is disclosed which indicates that the child / adult at risk (or another person) is at serious risk of harm, then confidentiality cannot be preserved as safeguarding procedures must take precedence.

The term '**Vital Interest**' which is used in the Data Protection Act (DPA) 1998 permits sharing of information where it is critical to prevent serious harm or distress, or in life threatening situations.

Refer to the Information Sharing Policy

## **15. References**

Please note this list is not exhaustive:

- The Children Acts (1989); (2004)
- Children and Social Work Act 2017
- The United Nations Convention on the Rights of The Child (1989)
- Education Act (2002)
- Prevent Strategy 2015
- Strategy for Dealing with Safeguarding Children and Vulnerable Adults Issues in Charities, Charity Commission (2012)
- Protection of Freedoms Act 2012
- The Serious Crimes Act 2015
- Modern Slavery Act 2015

- Working Together to Safeguard Children: A guide to interagency working to safeguard and promote the welfare of children' 2018,
- Barnardo's Safeguarding and Protecting Children Policy and Procedure, and other related policies
- NSPCC Guidance on Safeguarding and Child Protection

## 16. Compliance

The Chair of Trustees and trustee board will monitor compliance with this policy and procedure.

### Appendix 1

#### Glossary and Definitions

|                         |  |
|-------------------------|--|
| <b>Child</b>            | <ul style="list-style-type: none"> <li>• Children Acts 1989 &amp; 2004 define a child as anyone who has not yet reached their 18th birthday.</li> <li>• The United Nations Convention on the Rights of the Child (UNCRC) applies to “all human beings under the age of 18 years unless, under the law applicable to the child, majority is attained earlier.”</li> </ul>   |
| <b>Safeguarding</b>     | <p>In England, safeguarding children and promoting their welfare means</p> <ul style="list-style-type: none"> <li>• protecting them from maltreatment,</li> <li>• preventing impairment of their health and development, and</li> <li>• ensuring that they grow up in circumstances consistent with the provision of safe and effective care</li> <li>• taking action to enable all children to have the best outcomes</li> </ul>  |
| <b>Child Protection</b> | <p>Child protection is part of safeguarding and promoting welfare. This action refers to the activity that is undertaken to protect specific children who are suffering, or are at risk of suffering, significant harm. Alongside physical, sexual and emotional abuse and neglect this includes children affected by: domestic abuse, female genital mutilation, forced marriage, honour-based violence, ‘missing’ children, young runaways, children exploited by gangs, child sexual exploitation and trafficking. This list is not exhaustive. More information about working with children affected by these issues, including definitions, tools, research and good practice information, is provided in the US’s Online Research and Information Service.</p> |
| <b>Abuse</b>            | <p>A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). An adult or adults, or another child or children may abuse them.</p>   |

|                                    |   |
|------------------------------------|---|
| <b>Physical Abuse</b>              | A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.   |
| <b>Emotional Abuse</b>             | The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them, or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing participating in normal social interaction. It may involve seeing or hearing the ill treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child though it may also occur alone. |
| <b>Sexual Abuse</b>                | Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.   |
| <b>Neglect</b>                     | The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: <ul style="list-style-type: none"> <li>• provide adequate food, clothing and shelter (including exclusion from home abandonment);</li> <li>• protect a child from physical and emotional harm or danger;</li> <li>• ensure adequate supervision (including the use of inadequate care-givers); or</li> <li>• ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.</li> </ul>   |
| <b>Domestic Abuse and Violence</b> | The cross-government definition of domestic violence and abuse is: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have   |

|  |  |
|--|--|
|  | <p>been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to: emotional, financial, physical, psychological, or sexual behaviours. From December 2015, coercive or controlling domestic abuse is a crime punishable by up to 5 years in prison, under section 76 of the Serious Crimes Act 2015. This relates to a purposeful pattern of behaviour, which takes place over time, in order for one individual to exert power, control, or coercion over another.</p>  |
| <b>Child Sexual Exploitation (CSE)</b> | <p>Sexual exploitation of children and young people (<b>CSE</b>) under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.</p>  |
| <b>Female Genital Mutilation (FGM)</b> | <p>Female Genital Mutilation (FGM) is a safeguarding issue, illegal in England and Wales under the FGM Act 2003 (“the 2003 Act”). It is a form of child abuse and violence against women and girls. There is a mandatory duty for regulated professionals to report cases of FGM in England and Wales. This applies where the victim is under 18 years old and has disclosed FGM directly and should be reported to the Police and social care department.</p> <p>This is a personal duty, which requires the employee who becomes aware of the case to make a report; the responsibility cannot be transferred to anyone else. The only exception is if you know that another employee has already made a report. Therefore, there is no requirement to make a second referral.</p> |
| <b>Regulated Profession</b>            | <p>A regulated profession is one, which is governed by a professional organisation or regulatory body to ensure that professionals meet the required standards of practice and competence for that occupation.</p>   |
| <b>Prevent Concern</b>                 | <p>Children and young adults can be vulnerable to exposure to or involvement with groups or individuals who advocate intimidation as a means to a political or ideological end. These groups can include those promoting “violence from extreme right-wing or other ethnic or religious organisations” Prevent Strategy (2011). Prevent is part of the Government counter terrorism strategy CONTEST and aims to stop people becoming terrorists or supporting terrorism. Prevent focuses on all forms of terrorism and extreme ideologies and operates in a pre-criminal space, providing support and redirection to vulnerable children and adults at risk of being groomed into terrorist activities before any crimes are committed.</p>   |
| <b>Extremism</b>                       | <p>Defined in the Prevent Strategy 2011 as vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs.</p>   |
| <b>Terrorism</b>                       | <p>Defined by the Terrorism Act 2000 as: an act that endangers or causes serious violence to a person/people and/or damage to property; or seriously interferes with or disrupts an electronic system.</p>   |

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| <b>Radicalisation</b>                 | Defined as the process by which children and young people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups. Radicalisation should be considered as an ‘additional vulnerability’ under Working Together to Safeguard Children Guidance (2015). There is no obvious profile of a person likely to become involved in extremism or a single indicator of when a person might move to adopt violence in support of extremist ideas.   |
| <b>Trafficking and Modern Slavery</b> | <p>The United Nations defines trafficking in children and adults as the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, or abduction, of fraud, of deception, of the abuse of power, or of a position of vulnerability, or the giving or receiving of payments to achieve the consent of a person having control over another person, for the purposes of exploitation.</p> <p>Modern slavery is a complex crime that takes a number of different forms. It encompasses slavery, servitude, forced and compulsory labour and human trafficking.</p> |
| <b>Gang Exploitation</b>              | There are a number of areas in which young people are put at risk by gang activity both through participation in and as victims of gang violence. Safeguarding procedures can provide a key tool for all agencies working with young people to assist them when working together to prevent young people from being drawn into gangs, to support those who have been drawn into the margins of gangs; and to protect those who are at immediate risk of harm either as members or victims of gangs. Gang activity can also be used as the means through which children and young people are sexually exploited and/or trafficked.               |
| <b>County Lines</b>                   | County Lines is the police term for urban gangs supplying drugs to suburban areas and coastal towns using dedicated mobile phone lines or ‘deal lines’. It involves child criminal exploitation as gangs use children and vulnerable people to move drugs and money. Gangs establish a base in the market location, typically by taking over the homes of local vulnerable adults by force or coercion in a practice referred to as ‘cuckooing’. County Lines is a major, cross cutting issue involving drugs, violence, gangs, safeguarding, criminal and sexual exploitation, modern slavery and missing persons.                             |
| <b>Criminal Exploitation</b>          | <p>Child Criminal Exploitation is common in county lines and occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact; it can also occur through the use of technology.</p> <p>Criminal exploitation of children is broader than just county lines, and includes for instance children forced to work on cannabis farms or to commit theft.</p>                          |



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| <b>Young Carer</b>                   | A young carer is a person under 18 who provides or intends to provide care for another person (of any age, except generally where that care is provided for payment, pursuant to a contract or as voluntary work).   |
| <b>Private Fostering</b>             | Private fostering falls within safeguarding as it relates to the legal status, wellbeing and protection of children under 16 years, or under 18 years if disabled, who reside for more than 28 days in the care of someone who is not a parent, close relative, or someone with parental responsibility. The duty here is to ensure reporting of these children to the relevant local authorities.   |
| <b>Allegation</b>                    | An allegation is information, which comes to light from any source which suggests that an employee or volunteer has behaved in a way that has harmed, or may have harmed, or had the potential to harm a child or adult at risk. Although there are some differences in how allegations are handled across the four nations, the process for responding to allegations remains the same.   |
| <b>Serious Safeguarding Incident</b> | <p>A Serious Safeguarding Incident occurs under the following circumstances:</p> <ul style="list-style-type: none"> <li>• Unexpected or avoidable death of child/young person/adult at risk in receipt of services from US's</li> <li>• Serious harm to child/young person/adult at risk where a life- threatening outcome required intervention,</li> <li>• Actions of a Participant which caused death or serious injury to a child or adult</li> <li>• An incident likely to result in adverse media attention and/or potential reputational damage for US's</li> <li>• An incident that is serious enough that it may lead to a Serious Case Review (soon to be a Serious Child Safeguarding Practice Review in England), and/or any case which indicates organised crime or large scale abuse,</li> <li>• An incident likely to raise concern about professional practice or implications for US's policy;</li> <li>• An incident which raises concern about possible radicalisation of any member of staff/volunteer/adult/child/vulnerable adult</li> <li>• Where a registered provider (residential or early years) is required to close by an external body.</li> </ul> |

Appendix 2


Designated Safeguarding Contacts for US

| Name              | Contact details                                    |
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| Suzanne McFarlane | COO<br>M.07779 838505<br>suzanne@usactive.org.uk   |
| Jane Erridge      | Trustee<br>M.07710 225284<br>janeerridge63@sky.com |

Safeguarding Contacts by Local Authority Area.

| Local Authority     | Authority Guidance   |
|---------------------|--|
| Newcastle upon Tyne | <p><b>Report a concern about a child or young person</b><br/>If you are ever concerned that a child is in immediate danger call the police on 999.</p> <p><b>During office hours</b></p> <p>If you are concerned about a child or young person:</p> <ul style="list-style-type: none"> <li>• <a href="#">report a concern about a child or young person online</a></li> <li>• call us on <b>0191 277 2500</b> (weekdays 8:45am to 5pm)</li> </ul> <p>You can also discuss any concerns with someone who works with children and families, for example your health worker, social worker, school nurse or teacher (all schools have a teacher responsible for child protection).</p> <p>If you are a professional working with families and children please:</p> <ul style="list-style-type: none"> <li>• <a href="#">report a concern about a child or young person as a professional online</a></li> </ul> <p><b>Out of office hours</b></p> <p>If the issue cannot wait until the next working day, call our Emergency Duty Team on <b>0191 278 7878</b>.</p> <p>You can also <a href="#">report a concern about a child or young person online</a>.</p> |
| Newcastle upon Tyne | <p>Newcastle LADO Contact Details</p> <p><b>Melanie Scott</b><br/>Allendale Road Depot<br/>Allendale Road<br/>Byker<br/>Newcastle upon Tyne<br/>NE6 2SZ</p> <p><b>Tel:</b> 0191 277 4636<br/><b>E-mail:</b> <a href="mailto:lado@newcastle.gov.uk">lado@newcastle.gov.uk</a></p>   |

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| Gateshead | <p><b>Professional referrals</b></p> <p><b>All professionals must make a referral using this form.</b></p> <p><a href="#">Refer a concern</a></p> <p><b>Types of concerns to report</b></p> <p>You could be:</p> <ul style="list-style-type: none"> <li>• a child or young person who needs advice</li> <li>• a parent having difficulties with your children</li> <li>• worried about any child</li> <li>• a victim of domestic violence</li> <li>• concerned about mental health issues</li> <li>• a disabled child at risk or in need</li> </ul> <p>If in any doubt call.</p> <p>The Integrated Referral Team (IRT) is a first point of contact for referrals to children's social care services for children who are in need of protection or support to live safely within their family.</p> <p>We will carry out an assessment of the referred child or children where appropriate.</p> <p>Anyone can make a referral, including families, members of the public and professionals such as GPs, health visitors, teachers, or the police. Professionals should refer to the process set out in information for practitioners.</p> <p><b>Process</b></p> <p>The referral will be processed in line with the <a href="#">referral procedure</a> (opens new window). Where appropriate, we will take steps to ensure the immediate safety of the child/young person and anyone else affected. We will talk to the child/young person, or a suitable representative on their behalf, to find out what is happening. We will work together to plan what we can do to help keep them safe and as independent as possible.</p> <p>Where necessary we will investigate allegations of abuse with our partner agencies, and take appropriate action. We will always do what we can to prevent abuse happening again. We will keep everyone involved informed of the outcome and provide support where needed.</p> <p><b>If you are worried about a child,</b></p> <p>Phone Gateshead Council's Children's Services (in confidence) on:<br/>0191 433 2653 (office hours: Monday - Friday, 8.30am to 5pm)</p> <p>0191 477 0844 (out of hours, at night, at weekends and bank holidays)</p> <p>The Emergency Duty Team will help with personal or family problems that reach a crisis at these times. All calls go through to the Gateshead Care Call Service where a telephone operator takes all the calls. This service is the contact point for all</p> |

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|                | <p>council services out of hours. If the phone isn't answered straightaway, please be patient as they will be dealing with another call.</p> <p>In an emergency always call 999.</p>  |
| Gateshead      | <p>If you wish to speak to the Local Authority Designated Officer (LADO) about a safeguarding issue here are the contact details:</p> <p>LADO can be contacted by email <a href="mailto:LADO@gateshead.gov.uk">LADO@gateshead.gov.uk</a> or telephone 0191 4333554 / 07714957868</p>  |
| North Tyneside | <p><b>Report concerns about a child</b></p> <p>If you are a professional looking to submit a concern, you should complete an <a href="#">Agency Referral</a>.</p> <p>Fill in the form below or call us in confidence on 0345 2000 109 (office hours) or 0330 333 7475 (evenings and weekends).</p> <p>If you think a child is in immediate danger, call 999.</p> <p><b>Related documents</b></p> <ul style="list-style-type: none"> <li> <a href="#">Agency referral form (Word version)</a></li> </ul> <p><b>Front Door Service</b></p> <p>The Front Door Service provides access to all services for children and families in North Tyneside.</p> <p>If you have concerns about the safety or welfare of a child in North Tyneside the Front Door Service is the first point of contact for everyone.</p> <p>To contact the Front Door Service call 0345 2000 109.</p> |
| North Tyneside | <p>The LADOs for North Tyneside Council are:</p> <p>Hayley Muir<br/>         Quadrant<br/>         Silverlink North<br/>         Cobalt Business Park<br/>         North Tyneside<br/>         NE27 0BY</p> <p>Telephone: 0345 2000 109</p> <p>To raise a concern:</p> <ul style="list-style-type: none"> <li>complete the form at <a href="#">Local Authority Designated Officer   North Tyneside Council</a>, giving as much detail as possible or</li> <li>contact 0345 2000 109 within office hours in order to gain advice</li> </ul>  |

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|                | <p><b>Where there is an immediate threat to a child please contact the Police on 999 OR 101 or the contact the Emergency Duty Team (if outside office hours) on 0191 200 6800.</b></p>   |
| South Tyneside | <p><b>How to report a concern</b></p> <p>If Call 999 if you are reporting a crime that is in progress or if someone is in immediate danger.</p> <p>If you are suspicious or have any concerns that a child is suffering or is likely to suffer significant harm, call Children and Families Social Care on:</p> <ul style="list-style-type: none"> <li>• <b>0191 424 5010</b><br/>Monday to Thursday - 8.30am to 5pm<br/>Friday - 8.30am to 4.30pm</li> <li>• <b>0191 456 2093</b><br/>Outside of the above time</li> </ul> <p>For more information and advice free phone the NSPCC <b>0808 800 5000</b>.<br/>If you are a professional, you can refer your concerns using the <a href="#">Multi-Agency Referral Form</a>.</p> |
| South Tyneside | <p><b>Angela Nolan</b></p> <p>Local Authority Designated Officer</p> <p><b>Tel:</b> 0191 424 4701<br/>07920817896<br/><b>E-mail:</b> <a href="mailto:angela.nolan@southtyneside.gov.uk">angela.nolan@southtyneside.gov.uk</a></p>  |
| Sunderland     | <p><b>Reporting Concerns</b></p> <p>If you have a concern about the safety of a CHILD or YOUNG PERSON (aged under 18) then you should talk to someone immediately.</p> <p>You can contact Together for Children - Sunderland on <b>0191 5205560</b> (available 8.30am to 5.00pm Monday - Thursday, 8.30am to 4.30pm Friday); or the Out of Hours Team on <b>0191 520 5552</b> (also available 24 hours Saturday and Sunday)</p> <p><b>In an emergency always call 999</b></p>  |
|                | <p>How do I contact the Designated Officer?</p> <p>All new referrals must be made during office hours on 0191 561 3901 or by email to <a href="mailto:designatedofficer@togetherforchildren.org.uk">designatedofficer@togetherforchildren.org.uk</a>.</p>  |

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| Northumberland | <p><b>Emergency cases</b></p> <p><b>PLEASE NOTE FOR EMERGENCIES:</b> If a child is in immediate danger or left alone, you should contact the police or call an ambulance on <b>999</b>.</p> <p><b>Non-emergency cases</b></p> <p>If you think that you or someone you know has been the victim of abuse, please tell someone. For non-emergencies, contact us using the following details:</p> <ul style="list-style-type: none"> <li>• 24/7 Onecall telephone: <b>01670 536400</b>.</li> <li>• <b><u>To report abuse or neglect of a child, click this link and fill in the form.</u></b></li> <li>• <b><u>To report a concern about an adult, click this link.</u></b></li> <li>• <b><u>To report a concern about hate crime, domestic abuse, or antisocial behaviour, click this link.</u></b></li> </ul> <p>If you are concerned about a child and know that they already have a social worker, then please dial the direct contact number of the social worker. If you do not know the social worker's direct contact details, please call Onecall: <b>01670 536400</b>.</p> <p><b>PLEASE NOTE:</b> If you are a professional who works with children, you should first discuss your concerns with your manager or designated professional. <b><u>If there are still concerns, please fill in this form. If you are a professional or NCC employee who has concerns around abuse or neglect of a child, please also fill in this form.</u></b></p> <p><b>Early Help Assessments</b></p> <p>To make a referral to the Early Help Hubs, please send your referral to <b><u>earlyhelp@northumberland.gov.uk</u></b>.</p> <p>For enquiries about completion or registrations of Early Help Assessments, please contact Onecall: <b>01670 536400</b>.</p> |
| Northumberland | <p>The LADO for Northumberland is <b>Louise Prudhoe</b></p> <p>Email: <a href="mailto:LADO@northumberland.gov.uk">LADO@northumberland.gov.uk</a></p> <p><b>Call:</b> 07500 606174 (Monday to Thursday 08:30-17:00, Friday 08:30-16:30) or 01670 536400 (Out of hours)</p> <p><b>Make a Referral:</b> complete <a href="#">Online Referral Form</a> - Using the online referral form helps to ensure information can be responded to in a timely manner</p>  |
| Durham         | <p>If you have a concern about a child or young person's welfare who lives in County Durham, call First Contact on 03000 267 979. First Contact brings together children's services staff with partners such as Durham Constabulary and health services. Email: <a href="mailto:firstcontact@durham.gov.uk">firstcontact@durham.gov.uk</a></p> <p>Opening hours</p>   |

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|        | <p>First Contact is open from 8.30am until 5.00pm, Monday to Thursday and from 8.30am until 4.30pm on a Friday.</p> <p>What to do in an emergency</p> <p>In an emergency situation, call us on the number above - we have a duty officer working outside of opening hours who will take your call.</p> <p><b>Making a Safeguarding Referral</b></p> <p>If you are a professional and want to make a safeguarding referral please use the <a href="#">Children’s Services SAFEGUARDING referral form</a>. The <b>Threshold Guidance Document</b>, updated in September 2020, will be a useful reference tool to help you when making decisions and sharing your thinking with the people you work with. There is also an <a href="#">Animated Young People’s Version of Threshold Guidance</a></p> <p>If you do need to complete the <a href="#">safeguarding form</a> please ensure you email your completed form to <a href="mailto:firstcontact@durham.gov.uk">firstcontact@durham.gov.uk</a>.</p> <p>If you suspect a child or young person is at immediate risk of harm please call 999.</p> |
| Durham | <p><b>Local Authority Designated Officer (LADO) Allegations Against Staff or Volunteers</b></p> <p>Contacting the LADO is facilitated through dedicated customer service staff <b>via telephone ONLY</b>.</p> <p>Basic referral information will be obtained from you, and where advice or guidance is required from the LADO, your call will be transferred to the LADO on duty. If there is a more appropriate course of action for your referral, you will be advised by the customer service team at the time.</p> <p><b>LADO Contact Number – 03000 268835</b></p>  |