

1. Aims

The Children's Adventure Farm Trust aims to ensure that:

- Appropriate action is taken in a timely manner to safeguard and promote children's welfare
- All staff are aware of their statutory responsibilities with respect to safeguarding
- Staff are properly trained in recognising and reporting safeguarding issues

2. Legislation and statutory guidance

This policy is based on the Department for Education's statutory guidance Keeping Children Safe in Education (2022) and Working Together to Safeguard Children (2018).

This policy is also based on the following legislation:

- The Children Act 1989 (and 2004 amendment), which provides a framework for the care and protection of children
- Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the Serious Crime Act 2015, which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18
- Statutory guidance on FGM, which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM
- The Rehabilitation of Offenders Act 1974, which outlines when people with criminal convictions can work with children
- Schedule 4 of the Safeguarding Vulnerable Groups Act 2006, which defines what 'regulated activity' is in relation to children
- Statutory guidance on the Prevent duty, which explains provider duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- The Human Rights Act 1998, which explains that being subjected to harassment, violence and/or abuse, including that of a sexual nature, may breach any or all of the rights which apply to individuals under the European Convention on Human Rights (ECHR)
- The Equality Act 2010, which makes it unlawful to discriminate against people regarding particular protected characteristics (including disability, sex, sexual orientation, gender reassignment and race). This includes making reasonable adjustments for disabled children

- The Childcare (Disqualification) and Childcare (Early Years Provision Free of Charge) (Extended Entitlement) (Amendment) Regulations 2018 (referred to in this policy as the “2018 Childcare Disqualification Regulations”) and Childcare Act 2006, which set out who is disqualified from working with children

3. Definitions

Safeguarding and promoting the welfare of children means:

- Protecting children from maltreatment
- Preventing impairment of children’s mental and physical health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes

Child protection is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm.

Abuse is a form of maltreatment of a child, and may involve inflicting harm or failing to act to prevent harm. Appendix 1 explains the different types of abuse.

Neglect is a form of abuse and is 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. Appendix 1 defines neglect in more detail.

Sharing of nudes and semi-nudes (also known as sexting or youth produced sexual imagery) is where children share nude or semi-nude images, videos or live streams.

Children includes everyone under the age of 18.

The following 3 safeguarding partners are identified in Keeping Children Safe in Education (and defined in the Children Act 2004, as amended by chapter 2 of the Children and Social Work Act 2017). They will make arrangements to work together to safeguard and promote the welfare of local children, including identifying and responding to their needs:

- The local authority (LA)
- A clinical commissioning group for an area within the LA
- The chief officer of police for a police area in the LA area

Victim is a widely understood and recognised term, but we understand that not everyone who has been subjected to abuse considers themselves a victim, or would

want to be described that way. When managing an incident, we will be prepared to use any term that the child involved feels most comfortable with.

Alleged perpetrator(s) and perpetrator(s) are widely used and recognised terms. However, we will think carefully about what terminology we use (especially in front of children) as, in some cases, abusive behaviour can be harmful to the perpetrator too. We will decide what's appropriate and which terms to use on a case-by-case basis.

4. Equality statement

Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.

We give special consideration to children who:

- Have special educational needs (SEN) or disabilities or health conditions (see section 10)
- Are young carers
- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality
- Have English as an additional language
- Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- Are asylum seekers
- Are at risk due to either their own or a family member's mental health needs
- Are looked after or previously looked after
- Are missing from education

5. Roles and responsibilities

Safeguarding and child protection is everyone's responsibility. This policy applies to all staff, volunteers and trustees of CAFT.

5.1 All staff

All staff will:

- Read and understand part 1 and annex B of the Department for Education's statutory safeguarding guidance, Keeping Children Safe in Education, and review this guidance at least annually

All staff will be aware of:

- Our systems which support safeguarding, including this child protection and safeguarding policy
- What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child-on-child abuse, child sexual exploitation (CSE), child criminal exploitation (CCE), indicators of being at risk from or involved with serious violent crime, FGM, radicalisation and serious violence (including that linked to county lines)
- The importance of reassuring victims that they are being taken seriously and that they will be supported and kept safe
- The fact that children can be at risk of harm inside and outside of their home, including online
- The fact that children who are (or who are perceived to be) lesbian, gay, bi or trans (LGBT) can be targeted by other children
- What to look for to identify children who need help or protection

Section 15 and appendix 4 of this policy outline in more detail how staff are supported to do this.

5.2 The designated safeguarding lead (DSL)

The DSL is our visits lead Katy Fagan and she is supported by a team of trained as DSLs as we operate seven days a week, so this ensures that there is a DSL on site at all times.

Role of the DSL:

- Provide advice and support to other staff on child welfare and child protection matters
- Refer suspected cases, as appropriate, to the relevant body (local authority children's social care, Channel programme, Disclosure and Barring Service, and/or police), and support staff who make such referrals directly
- Have a good understanding of harmful sexual behaviour

- Liaise with local authority case managers and designated officers for child protection concerns as appropriate

5.3 The board of trustees

The trustees will:

- Facilitate a charity approach to safeguarding, ensuring that safeguarding and child protection are at the forefront of, and underpin, all relevant aspects of process and policy development
- Evaluate and approve this policy at each review, ensuring it complies with the law, and hold the CEO to account for its implementation
- Be aware of its obligations under the Human Rights Act 1998, the Equality Act 2010 (including the Public Sector Equality Duty).
- Appoint a named safeguarding trustee - this is currently a vacant position
- The trustees will make sure:
 - o Online safety is a running and interrelated theme within the charities approach to safeguarding and related policies
 - o The leadership team and relevant staff are aware of and understand the IT filters and monitoring systems in place, manage them effectively and know how to escalate concerns
 - o The charity has procedures to manage any safeguarding concerns (no matter how small) or allegations that do not meet the harm threshold (low-level concerns) about staff members (including casual staff and volunteers). Appendix 3 of this policy covers this procedure
 - o That this policy reflects children with SEND, or certain medical or physical health conditions, can face additional barriers to any abuse or neglect being recognised
 - o Make sure that safeguarding requirements are a condition of using the charity premises, and that any agreement to use the premises would be terminated if the other body fails to comply

The chair of trustees will act as the 'case manager' in the event that an allegation of abuse is made against the CEO, where appropriate (see appendix 3).

All trustees will read Keeping Children Safe in Education in its entirety.

Section 15 of this policy has information on how trustees are supported to fulfil their role.

5.4 The CEO

The CEO is responsible for the implementation of this policy, including:

- Ensuring that staff including volunteers:
 - Are informed of our systems which support safeguarding, including this policy, as part of their induction
 - Understand and follow the procedures included in this policy, particularly those concerning referrals of cases of suspected abuse and neglect
- Ensuring that there is always a DSL on site.
- Ensuring that all staff undertake appropriate safeguarding and child protection training, and updating the content of the training regularly
- Acting as the 'case manager' in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate (see appendix 3)
- Making decisions regarding all low-level concerns

6. Confidentiality

See Data Protection Policy.

You should note that:

- Timely information sharing is essential to effective safeguarding
- Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children
- The Data Protection Act (DPA) 2018 and UK GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe
- If staff need to share 'special category personal data', the DPA 2018 contains 'safeguarding of children and individuals at risk' as a processing condition that allows practitioners to share information without consent if: it is not possible to gain consent; it cannot be reasonably expected that a practitioner gains consent; or if to gain consent would place a child at risk
- Staff should never promise a child that they will not tell anyone about a report of abuse, as this may not be in the child's best interests
- If a victim asks the charity not to tell anyone about the sexual violence or sexual harassment:

- There's no definitive answer, because even if a victim doesn't consent to sharing information, staff may still lawfully share it if there's another legal basis under the UK GDPR that applies
 - The DSL will have to balance the victim's wishes against their duty to protect the victim and other children
- The DSL should consider that:
- Parents or carers should normally be informed (unless this would put the victim at greater risk)
- The basic safeguarding principle is: if a child is at risk of harm, is in immediate danger, or has been harmed, a referral should be made to local authority children's social care
- Rape, assault by penetration and sexual assault are crimes. Where a report of rape, assault by penetration or sexual assault is made, this should be referred to the police. While the age of criminal responsibility is 10, if the alleged perpetrator is under 10, the starting principle of referring to the police remains
- Regarding anonymity, all staff will:
 - Be aware of anonymity, witness support and the criminal process in general where an allegation of sexual violence or sexual harassment is progressing through the criminal justice system
 - Do all they reasonably can to protect the anonymity of any children involved in any report of sexual violence or sexual harassment, for example, carefully considering which staff should know about the report, and any support for children involved
 - Consider the potential impact of social media in facilitating the spreading of rumours and exposing victims' identities
- The government's information sharing advice for safeguarding practitioners includes 7 'golden rules' for sharing information, and will support staff who have to make decisions about sharing information
- If staff are in any doubt about sharing information, they should speak to the DSL (or deputy)
- Confidentiality is also addressed in this policy with respect to record-keeping in section 14, and allegations of abuse against staff in appendix 3

7. Recognising abuse and taking action

Staff, volunteers and trustees must follow the procedures set out below in the event of a safeguarding issue.

Please note – in this and subsequent sections, you should take any references to the DSL to mean “the DSL (or deputy DSL)”.

7.1 If a child is suffering or likely to suffer harm, or in immediate danger

Make a referral to children’s social care and/or the police immediately if you believe a child is suffering or likely to suffer from harm, or is in immediate danger. Anyone can make a referral.

Tell the DSL (see section 5.2) as soon as possible if you make a referral directly.

If a crime is being committed or the child is in immediate risk of danger, call 999.

If you suspect a crime has been committed but there is no immediate danger contact the police on 101.

Contact First Response Children’s Duty Team if you have urgent concerns about a child which needs an immediate response.

You can also use the following link to report child abuse to your local council.

<https://www.gov.uk/report-child-abuse-to-local-council>

7.2 If a child makes a disclosure to you

If a child discloses a safeguarding issue to you, you should:

- Listen to and believe them. Allow them time to talk freely and do not ask leading questions
- Stay calm and do not show that you are shocked or upset
- Tell the child they have done the right thing in telling you. Do not tell them they should have told you sooner
- Explain what will happen next and that you will have to pass this information on. Do not promise to keep it a secret
- Write up your conversation as soon as possible in the child’s own words. Stick to the facts, and do not put your own judgement on it
- Sign and date the write-up and pass it on to the DSL. Alternatively, if appropriate, make a referral to children’s social care and/or the police directly (see 7.1), and tell the DSL as soon as possible that you have done so. Aside from these people, do not disclose the

information to anyone else unless told to do so by a relevant authority involved in the safeguarding process

Bear in mind that some children may:

- Not feel ready, or know how to tell someone that they are being abused, exploited or neglected
- Not recognise their experiences as harmful
- Feel embarrassed, humiliated or threatened. This could be due to their vulnerability, disability, sexual orientation and/or language barriers

None of this should stop you from having a 'professional curiosity' and speaking to the DSL if you have concerns about a child.

7.3 If you discover that FGM has taken place or a child is at risk of FGM

Keeping Children Safe in Education explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs".

FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'.

Possible indicators that a child has already been subjected to FGM, and factors that suggest a child may be at risk, are set out in appendix 4 of this policy.

If a staff member or volunteer discovers that an act of FGM appears to have been carried out on a child under 18 must speak to the DSL and follow our local safeguarding procedures.

If the individual is at immediate risk of FGM, it is happening or just happened, report to the police on 999. If the risk is not immediate, report to the police on 101.

7.4 If you have concerns about a child (as opposed to believing a child is suffering or likely to suffer from harm, or is in immediate danger)

Figure 1 below, before section 7.7, illustrates the procedure to follow if you have any concerns about a child's welfare.

Where possible, speak to the DSL first to agree a course of action.

If in exceptional circumstances the DSL is not available, this should not delay appropriate action being taken, take advice from local authority children's social care. You can also seek advice at any time from the NSPCC helpline on 0808 800 5000. Share details of any actions you take with the DSL as soon as practically possible.

Make a referral to local authority children's social care directly, if appropriate (see 'Referral' below). Share any action taken with the DSL as soon as possible.

7.5 If you have concerns about extremism

If a child is not suffering or likely to suffer from harm, or in immediate danger, where possible speak to the DSL first to agree a course of action.

If in exceptional circumstances the DSL is not available, this should not delay appropriate action being taken, seek advice from local authority children's social care. Make a referral to local authority children's social care directly and inform the DSL or deputy as soon as practically possible after the referral.

You can email counter.extremism@education.gov.uk. Note that this is not for use in emergency situations.

In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you:

- Think someone is in immediate danger
- Think someone may be planning to travel to join an extremist group
- See or hear something that may be terrorist-related

7.6 If you have a mental health concern

Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

Staff will be alert to behavioural signs that suggest a child may be experiencing a mental health problem or be at risk of developing one.

If you have a mental health concern about a child that is also a safeguarding concern, take immediate action by following the steps in section 7.4.

If you have a mental health concern that is not also a safeguarding concern, speak to the DSL to agree a course of action.

Mental Health concerns will be managed in line with safeguarding concerns.

Figure 1: procedure if you have concerns about a child's welfare (as opposed to believing a child is suffering or likely to suffer from harm, or in immediate danger)

7.7 Concerns about a staff member or volunteer

If you have concerns about a member of staff or volunteer or an allegation is made about a member of staff or volunteer posing a risk of harm to children, speak to the CEO as soon as possible. If the concerns/allegations are about the CEO, speak to the chair of trustees.

Where you believe there is a conflict of interest in reporting a concern or allegation about a member of staff or volunteer report it directly to the local authority designated officer (LADO).

7.8 Allegations of abuse made against other children

We recognise that children are capable of abusing their peers. Abuse will never be tolerated or passed off as “banter”, “just having a laugh” or “part of growing up”, as this can lead to a culture of unacceptable behaviours and an unsafe environment for child's.

We also recognise the gendered nature of child-on-child abuse. However, all child-on-child abuse is unacceptable and will be taken seriously.

See appendix 4 for more information about child-on-child abuse.

Procedures for dealing with allegations of child-on-child abuse

If a child makes an allegation of abuse against another child:

- You must record the allegation and tell the DSL, but do not investigate it
- If a charity or setting: the DSL will speak with the setting DSL who will then contact the local authority children's social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence. If a family visit then the DSL will contact the local authority children's social care team as above as well as the police.

If the incident is a criminal offence and there are delays in the criminal process, the DSL will work closely with the police (and other agencies as required) while protecting children and/or taking any disciplinary measures against the alleged perpetrator. We will ask the police if we have any questions about the investigation.

Creating a supportive environment at CAFT and minimising the risk of child-on-child abuse

We recognise the importance of taking proactive action to minimise the risk of child-on-child abuse, and of creating a supportive environment where victims feel confident in reporting incidents.

To achieve this, we will:

- Challenge any form of derogatory or sexualised language or inappropriate behaviour between peers, including requesting or sending sexual images
- Be vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female child, and initiation or hazing type violence with respect to boys
- Ensure children are able to easily and confidently report abuse using our reporting systems (as described in section 7.10 below)
- Ensure staff reassure victims that they are being taken seriously
- Be alert to reports of sexual violence and/or harassment that may point to environmental or systemic problems that could be addressed by updating policies, processes, or could reflect wider issues in the local area that should be shared with safeguarding partners
- Support children who have witnessed sexual violence, especially rape or assault by penetration. We will do all we can to make sure the victim, alleged perpetrator(s) and any witnesses are not bullied or harassed
- Ensure staff are trained to understand:
 - How to recognise the indicators and signs of child-on-child abuse, and know how to identify it and respond to reports
 - That even if there are no reports of child-on-child abuse at CAFT, it does not mean it is not happening – staff should maintain an attitude of “it could happen here”
 - That if they have any concerns about a child’s welfare, they should act on them immediately rather than wait to be told, and that victims may not always make a direct report. For example:
 - Children can show signs or act in ways they hope adults will notice and react to
 - A friend may make a report
 - A member of staff may overhear a conversation
 - A child’s behaviour might indicate that something is wrong

- That certain children may face additional barriers to telling someone because of their vulnerability, disability, gender, ethnicity and/or sexual orientation
- That a child harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy
- The important role they have to play in preventing child-on-child abuse and responding where they believe a child may be at risk from it
- That they should speak to the DSL if they have any concerns
- That social media is likely to play a role in the fall-out from any incident or alleged incident, including for potential contact between the victim, alleged perpetrator(s) and friends from either side

The DSL will take the lead role in any disciplining of the alleged perpetrator(s). We will provide support at the same time as taking any disciplinary action.

Disciplinary action can be taken while other investigations are going on, e.g. by the police.

7.9 Sharing of nudes and semi-nudes ('sexting')

Your responsibilities when responding to an incident

If you are made aware of an incident involving the consensual or non-consensual sharing of nude or semi-nude images/videos (also known as 'sexting' or 'youth produced sexual imagery'), you must report it to the DSL immediately.

You must not:

- View, copy, print, share, store or save the imagery yourself, or ask a child to share or download it (if you have already viewed the imagery by accident, you must report this to the DSL)
- Delete the imagery or ask the child to delete it
- Ask the child(s) who are involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility)
- Share information about the incident with other members of staff, the child(s) it involves or their, or other, parents and/or carers
- Say or do anything to blame or shame any young people involved

You should explain that you need to report the incident, and reassure the child(s) that they will receive support and help from the DSL.

The DSL will make an immediate referral to police and/or children's social care if:

- The incident involves an adult
- There is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example, owing to special educational needs)
- What the DSL knows about the images or videos suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent
- The imagery involves sexual acts and any child in the images or videos is under 13
- The DSL has reason to believe a child is at immediate risk of harm owing to the sharing of nudes and semi-nudes (for example, the young person is presenting as suicidal or self-harming)

8. Online safety and the use of mobile technology

We recognise the importance of safeguarding children from potentially harmful and inappropriate online material, and we understand that technology is a significant component in many safeguarding and wellbeing issues.

To address this, our charity aims to:

- Have robust processes in place to ensure the online safety of children, staff, volunteers and trustees
- Protect and educate the whole CAFT community in its safe and responsible use of technology, including mobile and smart technology (which we refer to as 'mobile phones')
- Set clear guidelines for the use of mobile phones for the whole CAFT community
- Establish clear mechanisms to identify, intervene in and escalate any incidents or concerns, where appropriate

The 4 key categories of risk

Our approach to online safety is based on addressing the following categories of risk:

Content – being exposed to illegal, inappropriate or harmful content, such as pornography, fake news, racism, misogyny, self-harm, suicide, antisemitism, radicalisation and extremism

Contact – being subjected to harmful online interaction with other users, such as peer-to-peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes

Conduct – personal online behaviour that increases the likelihood of, or causes, harm, such as making, sending and receiving explicit images (e.g. consensual and non-consensual sharing of nudes and semi-nudes and/or pornography), sharing other explicit images and online bullying; and

Commerce – risks such as online gambling, inappropriate advertising, phishing and/or financial scams

To meet our aims and address the risks above we will:

- o Promote the safe use of social media, the internet and technology
- o Keeping personal information private
- o How to recognise unacceptable behaviour online
- o How to report any incidents of cyber-bullying, ensuring children are encouraged to do so, including where they are a witness rather than a victim
- Train staff, as part of their induction, on safe internet use and online safeguarding issues including cyber-bullying and the risks of online radicalisation. All staff members will receive refresher training at least once each academic year
- Make sure staff are aware of any restrictions placed on them with regards to the use of their mobile phone and cameras, for example that:
 - o Staff use of personal mobile phones on site.
 - o Staff will not take pictures or recordings on their personal phones or cameras
- Require all school groups and groups where children are visiting without parents/guardian carers to have a risk assessment around use of mobile phones within their group.

This section summarises our approach to online safety and mobile phone use. For comprehensive details about CAFT's policy on online safety and the use of mobile phones, please refer to our online safety policy and mobile phone policy.

9. Children with special educational needs, disabilities or health issues

We recognise that children with special educational needs (SEN) or disabilities or certain health conditions can face additional safeguarding challenges, and are 3 times more likely to be abused than their peers. Additional barriers can exist when recognising abuse and neglect in this group, including:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration

- Children being more prone to peer group isolation or bullying (including prejudice-based bullying) than other children
- The potential for children with SEN, disabilities or certain health conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs
- Communication barriers and difficulties in managing or reporting these challenges

10. Complaints and concerns

10.1 Complaints against staff

Complaints against staff that are likely to require a child protection investigation will be handled in accordance with our procedures for dealing with allegations of abuse made against staff (see appendix 3).

10.2 Other complaints

Complaints should be made directly to the DSL /CEO. Where necessary, they will seek advice of the LADO.

10.3 Whistle-blowing

Refer to the Whistle-blowing policy.

11. Record-keeping

We will hold records in line with our records retention schedule.

All safeguarding concerns, discussions, decisions made and the reasons for those decisions, must be recorded in writing. If you are in any doubt about whether to record something, discuss it with the DSL.

Records will include:

- A clear and comprehensive summary of the concern
- Details of how the concern was followed up and resolved
- A note of any action taken, decisions reached and the outcome

Concerns and referrals will be kept in a separate child protection file for each child.

Any non-confidential records will be readily accessible and available. Confidential information and records will be held securely and only available to those who have a right or professional need to see them.

Safeguarding records relating to individual children will be retained for a reasonable period of time after they have left the charity.

Safeguarding records which contain information about allegations of sexual abuse will be retained for the Independent Inquiry into Child Sexual Abuse (IICSA), for the term of the inquiry.

12. Training

12.1 All staff

All staff members will undertake safeguarding and child protection training at induction, including on whistle-blowing procedures and online safety, to ensure they understand the charity's safeguarding systems and their responsibilities, and can identify signs of possible abuse or neglect.

This training will be regularly updated and will:

- Be integrated, aligned and considered as part of CAFT's safeguarding approach and wider staff training.

All staff will have training on the government's anti-radicalisation strategy, Prevent, to enable them to identify children at risk of being drawn into terrorism and to challenge extremist ideas.

Staff will also receive regular safeguarding and child protection updates, including on online safety, as required but at least annually.

Volunteers will receive appropriate training, if applicable.

12.2 The DSL and Deputies

The DSL and deputies will undertake child protection and safeguarding training at least every 2 years.

In addition, they will update their knowledge and skills at regular intervals and at least annually.

They will also undertake Prevent awareness training.

12.3 Trustees

All trustees receive training about safeguarding and child protection (including online safety) at induction, which is regularly updated. This is to make sure that they:

- Have the knowledge and information needed to perform their functions and understand their responsibilities, such as providing strategic challenge

- Can be assured that safeguarding policies and procedures are effective and support the charity to deliver a robust approach to safeguarding

As the chair of trustees may be required to act as the 'case manager' in the event that an allegation of abuse is made against the CEO, they receive training in managing allegations for this purpose.

12.4 Recruitment – interview panels

At least 1 person conducting any interview for any post at the charity will have undertaken safer recruitment training. This will cover, as a minimum, the contents of Keeping Children Safe in Education, and will be in line with local safeguarding procedures.

See appendix 2 of this policy for more information about our safer recruitment procedures.

13. Monitoring arrangements

This policy will be reviewed annually by the DSL. At every review, it will be approved by the full board.

Appendix 1: types of abuse

Abuse, including neglect, and safeguarding issues are rarely standalone events that can be covered by 1 definition or label. In most cases, multiple issues will overlap.

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

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Emotional abuse 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
- Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate
- 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 the child participating in normal social interaction
- Seeing or hearing the ill-treatment of another
- Serious bullying (including cyber-bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. 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
- 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.

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse.

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

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- Protect a child from physical and emotional harm or danger
- Ensure adequate supervision (including the use of inadequate care-givers)
- Ensure access to appropriate medical care or treatment

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

Appendix 2: safer recruitment and DBS checks – policy and procedures

Recruitment and selection process

To make sure we recruit suitable people, we will ensure that those involved in the recruitment and employment of staff to work with children have received appropriate safer recruitment training.

We have put the following steps in place during our recruitment and selection process to ensure we are committed to safeguarding and promoting the welfare of children.

Advertising

When advertising roles, we will make clear:

- Our commitment to safeguarding and promoting the welfare of children
- That safeguarding checks will be undertaken
- The safeguarding requirements and responsibilities of the role, such as the extent to which the role will involve contact with children
- Whether or not the role is exempt from the Rehabilitation of Offenders Act 1974 and the amendments to the Exceptions Order 1975, 2013 and 2020. If the role is exempt, certain spent convictions and cautions are 'protected', so they do not need to be disclosed, and if they are disclosed, we cannot take them into account

Application forms

Our application forms will:

- Include a statement saying that it is an offence to apply for the role if an applicant is barred from engaging in regulated activity relevant to children (where the role involves this type of regulated activity)
- Include a copy of, or link to, our child protection and safeguarding policy and our policy on the employment of ex-offenders

Shortlisting

Our shortlisting process will involve at least 2 people and will:

- Consider any inconsistencies and look for gaps in employment and reasons given for them
- Explore all potential concerns

Once we have shortlisted candidates, we will ask shortlisted candidates to:

- Complete a self-declaration of their criminal record or any information that would make them unsuitable to work with children, so that they have the opportunity to share relevant information and discuss it at interview stage. The information we will ask for includes:
 - o If they have a criminal history
 - o Whether they are included on the barred list
 - o Whether they are prohibited from working with children
 - o Information about any criminal offences committed in any country in line with the law as applicable in England and Wales
 - o Any relevant overseas information
- Sign a declaration confirming the information they have provided is true

We will also consider carrying out an online search on shortlisted candidates to help identify any incidents or issues that are publicly available online.

Seeking references and checking employment history

We will obtain references before interview. Any concerns raised will be explored further with referees and taken up with the candidate at interview.

When seeking references we will:

- Not accept open references

- Liaise directly with referees and verify any information contained within references with the referees
- Ensure any references are from the candidate's current employer and completed by a senior person.
- Obtain verification of the candidate's most recent relevant period of employment if they are not currently employed
- Secure a reference from the relevant employer from the last time the candidate worked with children if they are not currently working with children
- Compare the information on the application form with that in the reference and take up any inconsistencies with the candidate
- Resolve any concerns before any appointment is confirmed

Interview and selection

When interviewing candidates, we will:

- Probe any gaps in employment, or where the candidate has changed employment or location frequently, and ask candidates to explain this
- Explore any potential areas of concern to determine the candidate's suitability to work with children
- Record all information considered and decisions made

Pre-appointment vetting checks

New staff

All offers of appointment will be conditional until satisfactory completion of the necessary pre-employment checks. When appointing new staff, we will:

- Verify their identity
- Obtain an enhanced DBS certificate, including barred list information for those who will be engaging in regulated activity (see definition below). We will obtain the certificate before, or as soon as practicable after, appointment, including when using the
- Verify their mental and physical fitness to carry out their work responsibilities
- Verify their right to work in the UK. We will keep a copy of this verification for the duration of the member of staff's employment and for 2 years afterwards
- Verify their professional qualifications, as appropriate
- Ensure they are not subject to a prohibition order if they are employed to be a teacher

- Carry out further additional checks, as appropriate, on candidates who have lived or worked outside of the UK. These could include, where available:
 - o For all staff, criminal records checks for overseas applicants

Existing staff

In certain circumstances we will carry out all the relevant checks on existing staff as if the individual was a new member of staff. These circumstances are when:

- There are concerns about an existing member of staff's suitability to work with children; or
- There has been a break in service of 12 weeks or more

We will refer to the DBS anyone who has harmed, or poses a risk of harm, to a child or vulnerable adult where:

- We believe the individual has engaged in relevant conduct; or
- We believe the individual has received a caution or conviction for a relevant (automatic barring either with or without the right to make representations) offence, under the Safeguarding Vulnerable Groups Act 2006 (Prescribed Criteria and Miscellaneous Provisions) Regulations 2009; or
- We believe the 'harm test' is satisfied in respect of the individual (i.e. they may harm a child or vulnerable adult or put them at risk of harm); and
- The individual has been removed from working in regulated activity (paid or unpaid) or would have been removed if they had not left

Contractors

We will ensure that any contractor, or any employee of the contractor, who is to work at CAFT has had the appropriate level of DBS check. This will be:

- An enhanced DBS check with barred list information for contractors engaging in regulated activity
- An enhanced DBS check, not including barred list information, for all other contractors who are not in regulated activity but whose work provides them with an opportunity for regular contact with children

We will obtain the DBS check for self-employed contractors.

We will not keep copies of such checks for longer than 6 months.

Contractors who have not had any checks will not be allowed to work unsupervised or engage in regulated activity under any circumstances.

We will check the identity of all contractors and their staff on arrival at CAFT.

Volunteers

We will:

- Never leave an unchecked volunteer unsupervised or allow them to work in regulated activity
- Ask all volunteers to complete a self declaration, if they volunteer more than three times then we will obtain an enhanced DBS check.

Trustees

All trustees will have an enhanced DBS check

Appendix 3: allegations of abuse made against staff

Section 1: allegations that may meet the harms threshold

This section applies to all cases in which it is alleged that a current member of staff, trustee, volunteer or contractor, has:

- Behaved in a way that has harmed a child, or may have harmed a child, and/or
- Possibly committed a criminal offence against or related to a child, and/or
- Behaved towards a child or children in a way that indicates they may pose a risk of harm to children, and/or
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children – this includes behaviour taking place both inside and outside of charity

If we're in any doubt as to whether a concern meets the harm threshold, we will consult our local authority designated officer (LADO).

We will deal with any allegation of abuse quickly, in a fair and consistent way that provides effective child protection while also supporting the individual who is the subject of the allegation.

A 'case manager' will lead any investigation. This will be the CEO, or the chair of trustees where the CEO is the subject of the allegation. The case manager will be identified at the earliest opportunity.

Our procedures for dealing with allegations will be applied with common sense and judgement.

Suspension of the accused until the case is resolved

Suspension of the accused will not be the default position, and will only be considered in cases where there is reason to suspect that a child or other children is/are at risk of harm, or the case is so serious that there might be grounds for dismissal. In such cases, we will only suspend an individual if we have considered all other options available and there is no reasonable alternative.

Based on an assessment of risk, we will consider alternatives such as:

- Redeployment within the charity so that the individual does not have direct contact with the child or children concerned
- Providing an assistant to be present when the individual has contact with children
- Redeploying the individual to alternative work in the charity so that they do not have unsupervised access to children

If in doubt, the case manager will seek views from the designated officer at the local authority, as well as the police and children's social care where they have been involved.

Definitions for outcomes of allegation investigations

- Substantiated: there is sufficient evidence to prove the allegation
- Malicious: there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive, or to cause harm to the subject of the allegation
- False: there is sufficient evidence to disprove the allegation
- Unsubstantiated: there is insufficient evidence to either prove or disprove the allegation (this does not imply guilt or innocence)
- Unfounded: to reflect cases where there is no evidence or proper basis which supports the allegation being made

Procedure for dealing with allegations

In the event of an allegation that meets the criteria above, the case manager will take the following steps:

- Conduct basic enquiries in line with local procedures to establish the facts to help determine whether there is any foundation to the allegation before carrying on with the steps below
- Discuss the allegation with the designated officer at the local authority. This is to consider the nature, content and context of the allegation and agree a course of action, including whether further enquiries are necessary to enable a decision on how to proceed, and whether it is necessary to involve the police and/or children's social care services. (The case manager may, on occasion, consider it necessary to involve the

police before consulting the designated officer – for example, if the accused individual is deemed to be an immediate risk to children or there is evidence of a possible criminal offence. In such cases, the case manager will notify the designated officer as soon as practicably possible after contacting the police)

- Inform the accused individual of the concerns or allegations and likely course of action as soon as possible after speaking to the designated officer (and the police or children's social care services, where necessary). Where the police and/or children's social care services are involved, the case manager will only share such information with the individual as has been agreed with those agencies
- Where appropriate (in the circumstances described above), carefully consider whether suspension of the individual from contact with children at the charity is justified or whether alternative arrangements such as those outlined above can be put in place. Advice will be sought from the designated officer, police and/or children's social care services, as appropriate
- Where the case manager is concerned about the welfare of other children in the community or the individual's family, they will discuss these concerns with the DSL and make a risk assessment of the situation. If necessary, the DSL may make a referral to children's social care
- If immediate suspension is considered necessary, agree and record the rationale for this with the designated officer. The record will include information about the alternatives to suspension that have been considered, and why they were rejected. Written confirmation of the suspension will be provided to the individual facing the allegation or concern within 1 working day, and the individual will be given a named contact at the charity and their contact details
- If it is decided that no further action is to be taken in regard to the subject of the allegation or concern, record this decision and the justification for it and agree with the designated officer what information should be put in writing to the individual and by whom, as well as what action should follow both in respect of the individual and those who made the initial allegation
- If it is decided that further action is needed, take steps as agreed with the designated officer to initiate the appropriate action at CAFT and/or liaise with the police and/or children's social care services as appropriate
- Provide effective support for the individual facing the allegation or concern, including appointing a named representative to keep them informed of the progress of the case and considering what other support is appropriate.
- Inform the parents or carers of the child/children involved about the allegation as soon as possible if they do not already know (following agreement with children's social care

services and/or the police, if applicable). The case manager will also inform the parents or carers of the requirement to maintain confidentiality about any allegations made against staff (where this applies) while investigations are ongoing. Any parent or carer who wishes to have the confidentiality restrictions removed in respect of a staff member will be advised to seek legal advice

- Keep the parents or carers of the child/children involved informed of the progress of the case (only in relation to their child – no information will be shared regarding the staff member)
- Make a referral to the DBS where it is thought that the individual facing the allegation or concern has engaged in conduct that harmed or is likely to harm a child, or if the individual otherwise poses a risk of harm to a child

Where the police are involved, wherever possible the charity will ask the police at the start of the investigation to obtain consent from the individuals involved to share their statements and evidence for use in the charity's disciplinary process, should this be required at a later point.

Timescales

We will deal with all allegations as quickly and effectively as possible and will endeavour to comply with the following timescales, where reasonably practicable:

- Any cases where it is clear immediately that the allegation is unsubstantiated or malicious should be resolved within 1 week
- If the nature of an allegation does not require formal disciplinary action, appropriate action should be taken within 3 working days
- If a disciplinary hearing is required and can be held without further investigation, this should be held within 15 working days

However, these are objectives only and where they are not met, we will endeavour to take the required action as soon as possible thereafter.

Specific actions

Action following a criminal investigation or prosecution

The case manager will discuss with the local authority's designated officer whether any further action, including disciplinary action, is appropriate and, if so, how to proceed, taking into account information provided by the police and/or children's social care services.

Conclusion of a case where the allegation is substantiated

If the allegation is substantiated and the individual is dismissed or the charity ceases to use their services, or the individual resigns or otherwise ceases to provide their services, the charity will make a referral to the DBS for consideration of whether inclusion on the barred lists is required.

Individuals returning to work after suspension

If it is decided on the conclusion of a case that an individual who has been suspended can return to work, the case manager will consider how best to facilitate this.

The case manager will also consider how best to manage the individual's contact with the child or children who made the allegation, if they are still attending the charity.

Unsubstantiated, unfounded, false or malicious reports

If a report is:

- Determined to be unsubstantiated, unfounded, false or malicious, the DSL will consider the appropriate next steps. If they consider that the child and/or person who made the allegation is in need of help, or the allegation may have been a cry for help, a referral to children's social care may be appropriate
- Shown to be deliberately invented, or malicious, the charity will consider whether any disciplinary action is appropriate against the individual(s) who made it

Unsubstantiated, unfounded, false or malicious allegations

If an allegation is:

- Determined to be unsubstantiated, unfounded, false or malicious, the LADO and case manager will consider the appropriate next steps. If they consider that the child and/or person who made the allegation is in need of help, or the allegation may have been a cry for help, a referral to children's social care may be appropriate
- Shown to be deliberately invented, or malicious, the charity will consider whether any disciplinary action is appropriate against the individual(s) who made it

Confidentiality and information sharing

The charity will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

The case manager will take advice from the LADO, police and children's social care services, as appropriate, to agree:

- Who needs to know about the allegation and what information can be shared

- How to manage speculation, leaks and gossip, including how to make parents or carers of a child/children involved aware of their obligations with respect to confidentiality
- What, if any, information can be reasonably given to the wider community to reduce speculation
- How to manage press interest if, and when, it arises

Record-keeping

The case manager will maintain clear records about any case where the allegation or concern meets the criteria above and store them on the individual's confidential personnel file for the duration of the case.

The records of any allegation that, following an investigation, is found to be malicious or false will be deleted from the individual's personnel file (unless the individual consents for the records to be retained on the file).

For all other allegations (which are not found to be malicious or false), the following information will be kept on the file of the individual concerned:

- A clear and comprehensive summary of the allegation
- Details of how the allegation was followed up and resolved
- Notes of any action taken, decisions reached and the outcome
- A declaration on whether the information will be referred to in any future reference

In these cases, the charity will provide a copy to the individual, in agreement with children's social care or the police as appropriate.

Where records contain information about allegations of sexual abuse, we will preserve these for the Independent Inquiry into Child Sexual Abuse (IICSA), for the term of the inquiry. We will retain all other records at least until the individual has reached normal pension age, or for 10 years from the date of the allegation if that is longer.

References

When providing employer references, we will:

- Not refer to any allegation that has been found to be false, unfounded, unsubstantiated or malicious, or any repeated allegations which have all been found to be false, unfounded, unsubstantiated or malicious
- Include substantiated allegations, provided that the information is factual and does not include opinions

Learning lessons

After any cases where the allegations are substantiated, the case manager will review the circumstances of the case with the local authority's designated officer to determine whether there are any improvements that we can make to the charity's procedures or practice to help prevent similar events in the future.

This will include consideration of (as applicable):

- Issues arising from the decision to suspend the member of staff
- The duration of the suspension
- Whether or not the suspension was justified
- The use of suspension when the individual is subsequently reinstated. We will consider how future investigations of a similar nature could be carried out without suspending the individual

For all other cases, the case manager will consider the facts and determine whether any improvements can be made.

Non-recent allegations

Abuse can be reported, no matter how long ago it happened.

We will report any non-recent allegations made by a child to the LADO in line with our local authority's procedures for dealing with non-recent allegations.

Where an adult makes an allegation to the charity that they were abused as a child, we will advise the individual to report the allegation to the police.

Section 2: concerns that do not meet the harm threshold

This section applies to all concerns (including allegations) about members of staff, including trustees, volunteers and contractors, which do not meet the harm threshold set out in section 1 above.

Concerns may arise through, for example:

- Suspicion
- Complaint
- Safeguarding concern or allegation from another member of staff
- Disclosure made by a child, parent or other adult within or outside the charity
- Pre-employment vetting checks

We recognise the importance of responding to and dealing with any concerns in a timely manner to safeguard the welfare of children.

Definition of low-level concerns

The term 'low-level' concern is any concern – no matter how small – that an adult working in or on behalf of the charity may have acted in a way that:

- Is inconsistent with the staff code of conduct, including inappropriate conduct outside of work, and
- Does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the designated officer at the local authority

Examples of such behaviour could include, but are not limited to:

- Being overly friendly with children
- Having favourites
- Taking photographs of children on their mobile phone
- Engaging with a child on a one-to-one basis in a secluded area or behind a closed door
- Humiliating children

Sharing low-level concerns

We recognise the importance of creating a culture of openness, trust and transparency to encourage all staff to confidentially share low-level concerns so that they can be addressed appropriately.

We will create this culture by:

- Ensuring staff are clear about what appropriate behaviour is, and are confident in distinguishing expected and appropriate behaviour from concerning, problematic or inappropriate behaviour, in themselves and others
- Empowering staff to share any low-level concerns as per section 7.7 of this policy
- Empowering staff to self-refer
- Addressing unprofessional behaviour and supporting the individual to correct it at an early stage
- Providing a responsive, sensitive and proportionate handling of such concerns when they are raised
- Helping to identify any weakness in the charity's safeguarding system

Responding to low-level concerns

If the concern is raised via a third party, the CEO will collect evidence where necessary by speaking:

- Directly to the person who raised the concern, unless it has been raised anonymously
- To the individual involved and any witnesses

The CEO will use the information collected to categorise the type of behaviour and determine any further action, in line with the charity's staff code of conduct. The CEO will be the ultimate decision-maker in respect of all low-level concerns.

Record keeping

All low-level concerns will be recorded in writing. In addition to details of the concern raised, records will include the context in which the concern arose, any action taken and the rationale for decisions and action taken.

Records will be:

- Kept confidential, held securely and comply with the DPA 2018 and UK GDPR
- Reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified. Where a pattern of such behaviour is identified, we will decide on a course of action, either through our disciplinary procedures or, where a pattern of behaviour moves from a concern to meeting the harms threshold as described in section 1 of this appendix, we will refer it to the designated officer at the local authority
- Retained at least until the individual leaves employment at the charity.

Where a low-level concern relates to a contractor, we will notify the individual's employer, so any potential patterns of inappropriate behaviour can be identified.

References

We will not include low-level concerns in references unless:

- The concern (or group of concerns) has met the threshold for referral to the designated officer at the local authority and is found to be substantiated; and/or
- The concern (or group of concerns) relates to issues which would ordinarily be included in a reference, such as misconduct or poor performance

Appendix 4: specific safeguarding issues

Child criminal exploitation

Child criminal exploitation (CCE) is a form of abuse where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into criminal activity, in exchange for something the victim needs or wants, and/or for

the financial or other advantage of the perpetrator or facilitator, and/or through violence or the threat of violence.

The abuse can be perpetrated by males or females, and children or adults. It can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse. The victim can be exploited even when the activity appears to be consensual. It does not always involve physical contact and can happen online. For example, young people may be forced to work in cannabis factories, coerced into moving drugs or money across the country (county lines), forced to shoplift or pickpocket, or to threaten other young people. Indicators of CCE can include a child:

- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Suffering from changes in emotional wellbeing
- Misusing drugs and alcohol
- Going missing for periods of time or regularly coming home late
- Regularly missing charity or education
- Not taking part in education

If a member of staff suspects CCE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the police, if appropriate.

Child sexual exploitation Child sexual exploitation (CSE) is a form of child sexual abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity, in exchange for something the victim needs or wants and/or for the financial advantage or increased status of the perpetrator or facilitator. It may, or may not, be accompanied by violence or threats of violence.

The abuse can be perpetrated by males or females, and children or adults. It can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse.

The victim can be exploited even when the activity appears to be consensual. Children or young people who are being sexually exploited may not understand that they are being abused. They often trust their abuser and may be tricked into believing they are in a loving, consensual relationship.

CSE can include both physical contact (penetrative and non-penetrative acts) and non-contact sexual activity. It can also happen online. For example, young people may be persuaded or forced to share sexually explicit images of themselves, have sexual conversations by text, or take part in sexual activities using a webcam. CSE may also

occur without the victim's immediate knowledge, for example through others copying videos or images.

In addition to the CCE indicators above, indicators of CSE can include a child:

- Having an older boyfriend or girlfriend
- Suffering from sexually transmitted infections or becoming pregnant

If a member of staff suspects CSE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the police, if appropriate.

Child-on-child abuse

Child-on-child abuse is when children abuse other children. This type of abuse can take place inside and outside of the charity. It can also take place both face-to-face and online, and can occur simultaneously between the 2.

Our charity has a zero-tolerance approach to sexual violence and sexual harassment. We recognise that even if there are there no reports, that doesn't mean that this kind of abuse isn't happening.

Child-on-child abuse is most likely to include, but may not be limited to:

- Bullying (including cyber-bullying, prejudice-based and discriminatory bullying)
- Abuse in intimate personal relationships between children (this is sometimes known as 'teenage relationship abuse')
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse)
- Sexual violence, such as rape, assault by penetration and sexual assault (this may include an online element which facilitates, threatens and/or encourages sexual violence)
- Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse
- Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party
- Consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery)

- Upskirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm
- Initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element)

Where children abuse their peers online, this can take the form of, for example, abusive, harassing, and misogynistic messages; the non-consensual sharing of indecent images, especially around chat groups; and the sharing of abusive images and pornography, to those who don't want to receive such content.

If staff have any concerns about child-on-child abuse, or a child makes a report to them, they will follow the procedures set out in section 7 of this policy, as appropriate.

When considering instances of harmful sexual behaviour between children, we will consider their ages and stages of development. We recognise that children displaying harmful sexual behaviour have often experienced their own abuse and trauma and will offer them appropriate support.

Domestic abuse

Children can witness and be adversely affected by domestic abuse and/or violence at home where it occurs between family members. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse (abuse in intimate personal relationships between children) and child/adolescent to parent violence and abuse. It can be physical, sexual, financial, psychological or emotional. It can also include ill treatment that isn't physical, as well as witnessing the ill treatment of others – for example, the impact of all forms of domestic abuse on children.

Anyone can be a victim of domestic abuse, regardless of gender, age, ethnicity, socioeconomic status, sexuality or background, and domestic abuse can take place inside or outside of the home. Children who witness domestic abuse are also victims.

Older children may also experience and/or be the perpetrators of domestic abuse and/or violence in their own personal relationships. This can include sexual harassment.

Exposure to domestic abuse and/or violence can have a serious, long-lasting emotional and psychological impact on children and affect their health, wellbeing, development and ability to learn.

So-called 'honour-based' abuse (including FGM and forced marriage)

So-called 'honour-based' abuse (HBA) encompasses incidents or crimes committed to protect or defend the honour of the family and/or community, including FGM, forced marriage, and practices such as breast ironing.

Abuse committed in this context often involves a wider network of family or community pressure and can include multiple perpetrators.

All forms of HBA are abuse and will be handled and escalated as such. All staff will be alert to the possibility of a child being at risk of HBA or already having suffered it. If staff have a concern, they will speak to the DSL, who will activate local safeguarding procedures.

FGM

Section 7.3 of this policy sets out the procedures to be followed if a staff member discovers that an act of FGM appears to have been carried out or suspects that a child is at risk of FGM.

Indicators that FGM has already occurred include:

- A child confiding in a professional that FGM has taken place
- A mother/family member disclosing that FGM has been carried out
- A family/child already being known to social services in relation to other safeguarding issues
- A girl:
 - Having difficulty walking, sitting or standing, or looking uncomfortable
 - Finding it hard to sit still for long periods of time (where this was not a problem previously)
 - Spending longer than normal in the bathroom or toilet due to difficulties urinating
 - Having frequent urinary, menstrual or stomach problems
 - Demonstrating increased emotional and psychological needs – for example, withdrawal or depression, or significant change in behaviour
 - Being reluctant to undergo any medical examinations
 - Asking for help, but not being explicit about the problem
 - Talking about pain or discomfort between her legs

Potential signs that a child may be at risk of FGM include:

- The girl's family having a history of practising FGM (this is the biggest risk factor to consider)
- FGM being known to be practised in the girl's community or country of origin
- A parent or family member expressing concern that FGM may be carried out
- A family not engaging with professionals (health, education or other) or already being known to social care in relation to other safeguarding issues
- A girl:
 - Having a mother, older sibling or cousin who has undergone FGM
 - Having limited level of integration within UK society
 - Confiding to a professional that she is to have a "special procedure" or to attend a special occasion to "become a woman"
 - Talking about a long holiday to her country of origin or another country where the practice is prevalent, or parents/carers stating that they or a relative will take the girl out of the country for a prolonged period
 - Requesting help from an adult because she is aware or suspects that she is at immediate risk of FGM
 - Talking about FGM in conversation – for example, a girl may tell other children about it (although it is important to take into account the context of the discussion)

The above indicators and risk factors are not intended to be exhaustive.

Forced marriage

Forcing a person into marriage is a crime. A forced marriage is one entered into without the full and free consent of 1 or both parties and where violence, threats, or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological.

If a member of staff suspects that a child is being forced into marriage, they will speak to the child about their concerns in a secure and private place. They will then report this to the DSL.

The DSL will:

- Speak to the child about the concerns in a secure and private place
- Activate the local safeguarding procedures and refer the case to the local authority's designated officer

- Seek advice from the Forced Marriage Unit on 020 7008 0151 or fmufco.gov.uk

Preventing radicalisation

- Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups
- Extremism is vocal or active opposition to fundamental British values, such as democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces
- Terrorism is an action that:
 - Endangers or causes serious violence to a person/people;
 - Causes serious damage to property; or
 - Seriously interferes or disrupts an electronic system

The use or threat of terrorism must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

The charity have a duty to prevent children from being drawn into terrorism. The DSL will undertake Prevent awareness training and make sure that staff have access to appropriate training to equip them to identify children at risk.

We will ensure that suitable internet filtering is in place.

There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. Radicalisation can occur quickly or over a long period.

Staff will be alert to changes in child's behaviour.

The government website Educate Against Hate and charity NSPCC say that signs that a child is being radicalised can include:

- Refusal to engage with, or becoming abusive to, peers who are different from themselves
- Becoming susceptible to conspiracy theories and feelings of persecution
- Changes in friendship groups and appearance
- Rejecting activities, they used to enjoy
- Converting to a new religion
- Isolating themselves from family and friends

- Talking as if from a scripted speech
- An unwillingness or inability to discuss their views
- A sudden disrespectful attitude towards others
- Increased levels of anger
- Increased secretiveness, especially around internet use
- Expressions of sympathy for extremist ideologies and groups, or justification of their actions
- Accessing extremist material online, including on Facebook or Twitter
- Possessing extremist literature
- Being in contact with extremist recruiters and joining, or seeking to join, extremist organisations

Children who are at risk of radicalisation may have low self-esteem, or be victims of bullying or discrimination. It is important to note that these signs can also be part of normal teenage behaviour – staff should have confidence in their instincts and seek advice if something feels wrong.

If staff are concerned about a child, they will follow our procedures set out in section 7.5 of this policy, including discussing their concerns with the DSL.

Staff should always take action if they are worried.

Sexual violence and sexual harassment between children

Sexual violence and sexual harassment can occur:

- Between 2 children of any age and sex
- Through a group of children sexually assaulting or sexually harassing a single child or group of children
- Online and face to face (both physically and verbally)

Sexual violence and sexual harassment exist on a continuum and may overlap.

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing.

If a victim reports an incident, it is essential that staff make sure they are reassured that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting any form of abuse or neglect. Nor should a victim ever be made to feel ashamed for making a report.

When supporting victims, staff will:

- Reassure victims that the law on child-on-child abuse is there to protect them, not criminalise them
- Regularly review decisions and actions, and update policies with lessons learnt
- Look out for potential patterns of concerning, problematic or inappropriate behaviour, and decide on a course of action where we identify any patterns
- Remain alert to the possible challenges of detecting signs that a child has experienced sexual violence, and show sensitivity to their needs

Some groups are potentially more at risk. Evidence shows that girls, children with SEN and/or disabilities, and lesbian, gay, bisexual and transgender (LGBT) children are at greater risk.

Staff should be aware of the importance of:

- Challenging inappropriate behaviours
- Making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up
- Challenging physical behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, pulling down trousers, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them

If staff have any concerns about sexual violence or sexual harassment, or a child makes a report to them, they will follow the procedures set out in section 7 of this policy, as appropriate. In particular, section 7.8 and 7.9 set out more detail about our charity's approach to this type of abuse.

Serious violence

Indicators which may signal that a child is at risk from, or involved with, serious violent crime may include:

- Change in friendships or relationships with older individuals or groups
- Significant decline in performance
- Signs of self-harm or a significant change in wellbeing
- Signs of assault or unexplained injuries
- Unexplained gifts or new possessions (this could indicate that the child has been approached by, or is involved with, individuals associated with criminal networks or gangs and may be at risk of criminal exploitation (see above))

Risk factors which increase the likelihood of involvement in serious violence include:

- Being male
- Having experienced child maltreatment
- Having been involved in offending, such as theft or robbery

Staff will be aware of these indicators and risk factors. If a member of staff has a concern about a child being involved in, or at risk of, serious violence, they will report this to the DSL.

Checking the identity and suitability of visitors

All visitors will be required to verify their identity to the satisfaction of staff and to leave their belongings in a safe place during their visit.

Visitors are expected to sign in and wear a visitor's badge.

Missing child

Please see our missing children policy.

Neglect

Neglect is the ongoing failure to meet a child's basic needs. This may include a child or young person being left hungry or dirty, without proper clothing or supervision or health care.

Signs to look out for in children who visit CAFT: being smelly or dirty, being hungry, having unwashed clothes, having medical or dental issues, skin issues such as sores, rashes or flea bites, tiredness. The child may be clingy, or aggressive, withdrawn or anxious, they may not be able to concentrate on activities.

Physical

Physical abuse is when someone hurts or harms a child or young person on purpose.

Signs of physical abuse to look out for in children visiting CAFT: unexplained or inadequate explanations for wounds, bruising, broken or fractured bones, burns or scalds, bite marks or scarring.

The child/ young person may display apparent fear against family members, friends, or workers.

Signs of abuse

Sexual

Sexual abuse is when a child or young person is forced or tricked into sexual activities. There are two types of sexual abuse, contact and non-contact.

Signs to look out for in a child visiting CAFT: a child avoiding being alone with or frightened of a familiar person, language or sexual behaviour that you wouldn't expect them to know, self-harm, changes in eating habits, their mood, being angry or irritable. They may have unexplained bruises, bleeding, discharge, pains, or soreness in their genital or anal area. Children on residential may show signs of sleep problems and nightmares.

Emotional

Emotional abuse is any type of abuse that involves continual, emotional mistreatment of a child or young person. It can involve deliberately trying to scare, humiliate, isolate or ignore a child.

Signs to look out for in a child visiting CAFT: a child seeming unconfident or lacking self-assurance, struggles to control emotions, has difficulty making relationships and maintaining them, act in a way that is inappropriate for their age. They may exhibit extreme behaviour, transition from extreme anger to extreme tameness, display cruelty to others. Delay or regression in physical, emotional and social development.

This overview is to be used in conjunction with the safeguarding statement and defines how CAFT staff will respond if they observe or are told of any sign of abuse. It is mandatory for everyone working on behalf of CAFT including senior managers and the board of trustees, paid staff, volunteers, and students to abide by our safeguarding statement.

How to Respond and Report (refer to signs of abuse)

A child has disclosed to you that they are being abused- listen calmly and reassure them that they have done the right thing, tell them that you are going to have to share this information. Identify if they are at immediate risk of harm (if yes radio the DSL/Deputy DSL immediately if that's not you or back up from staff and ensure that 999 is contacted immediately). If they are not at immediate risk then report to the DSL (school/setting if it is a day or residential group, CAFT if it is a family visit)

You observe signs of abuse – report and discuss with DSL (school/setting if it is a day or residential group, CAFT if it is a family visit).



Now Record

As soon as possible record exactly and accurately what was said to you/ you observed. Do not add your own version of events. Make sure that you record all information on the CAFT Safeguarding form. The lead DSL will decide next steps (if child not at immediate risk) and contact ChECS or the LADO or NSPCC.



Review

Ensure safeguarding practices are reviewed regularly by Designated Safeguarding Leads and Trustees and that they are accurate and that all staff members safeguarding training is up to date

Designated Safeguarding lead Katy Fagan forestschooll@caft.co.uk	Deputy Designated Safeguarding leads (one always on site) Angela Greenway, Jess Condron, Lucy Cleworth, Charlie Fitzgerald, Jacqui Harris, Gwyn Grimshaw,	Named Safeguarding Trustee Vacant Position
NSPCC Helpline 0808 800 5000	Cheshire East Consultation Service (ChECS) Office hours 0300 123 5012 Out of hours 0300 123 5022	LADO (local authority designated officer): Phil Alcock 01270 685904 or 07794434422 LADO@cheshireeast.gov.uk Phil.Alcock@cheshireeast.gov.uk

IF A CHILD OR VULNERABLE ADULT IS AT IMMEDIATE RISK ALWAYS CONTACT THE POLICE on 999