

**Green Corridor**  
**Safeguarding Children & Adults at Risk**  
**Policy and Procedure incl. PREVENT Duty.**

## DOCUMENT CONTROL

Document Number	<b>1</b>
Description	This document describes the procedure for safeguarding children and adults at risk incl. PREVENT Duty
Document Type	Policy and Procedure
Document Owner	CEO
Document Approvers	Board of Trustees
Approval Date	Feb 2023
Date of Next Review	Sept 2023

## ISSUE CONTROL

Version	Date	Comments	Author
1.3	14/12/20	Updated annually to take account of recent legislation	T Knight
1.4	Feb 2021	Updated annually to take account of recent legislation	T Knight
1.5	Feb 2023	Updated annually to take account of recent legislation	Dan Grant

## PRINCIPAL RELATED POLICIES & PROCEDURES

Document Title	Location
Equality & Diversity	GC Policies & Procedures
Whistleblowing	GC Policies & Procedures
Social Media	GC Policies & Procedures
Learner Behaviour	GC Policies & Procedures
Health & Safety	GC Policies & Procedures
Disciplinary & Grievance	GC Policies & Procedures
Data Protection	GC Policies & Procedures
Positive Handling	GC Policies & Procedures
Personal Care and Medicine	GC Policies & Procedures

## CONFIRMATION OF RECEIPT OF POLICY & PROCEDURE

Name	
Job Title	
Line Manager	

I confirm I have received a copy of this policy and procedure and have read and understood the contents. I also confirm that I have read KCSIE Statutory Guidance Part One Information for all school and college staff issued in September 2022. I also confirm I have sought clarification from my line manager on any issues which I am not clear about.

Signed:

Date:

Please return this signed copy to your individual Policies and Procedures folder for future reference.

## CONTENTS

### SECTION 1

1. INTRODUCTION.....	4
2. PRINCIPLES.....	4
3. SCOPE.....	5
4. DEFINITIONS.....	5
5. EXPECTATIONS.....	6
6. LEGISLATION AND GUIDANCE.....	6
7. ROLES AND RESPONSIBILITIES FOR DSL, DSO and TRUSTEES.....	7
8. SUSPICION OF ABUSE.....	9
9. CURRENT ISSUES.....	9
10. SAFER RECRUITMENT & SELECTION.....	14
11. STAFF SUPPORT & TRAINING.....	15
12. PLANNING & SUPERVISION.....	16
13. PHYSICAL CONTACT.....	16
14. APPROPRIATE COMMUNICATION.....	17
15. STAFF AND VOLUNTEER BEHAVIOUR.....	17
16. SITE SECURITY AND TRANSPORT.....	18
17. IMAGES AND E-SAFETY.....	18
18. CONFIDENTIALITY.....	19
19. CONTACT OUTSIDE WORK.....	19
20. GIFTS AND INDUCEMENTS.....	19
21. COMMUNICATING POLICY AND CONCERNS.....	19
22. BREACH OF POLICY.....	20
23. IMPLEMENTATION, MONITORING & REVIEW.....	20
Section 2.....	20
24. SAFEGUARDING PROCEDURES.....	20
25. INDICATORS OF ABUSE.....	20
26. TAKING ACTION.....	23
27. CONSENT and CONFIDENTIALITY.....	24
28. HANDLING ALLEGATIONS about WORKERS and VOLUNTEERS.....	25
29. INFORMATION MANAGEMENT.....	25
30. SAFEGUARDING CONTACTS.....	26
APPENDIX 1: REPORTING & ESCALATING SAFEGUARDING CONCERNS.....	27
APPENDIX 2: SUSPECTED ABUSE REPORT FORM.....	28-29
APPENDIX 3: PREVENT REFERRAL FORM.....	30
APPENDIX 4: PREVENT RISK ASSESSMENT AND ACTION PLAN.....	31-39

## SECTION 1

### 1. INTRODUCTION

Safeguarding is everyone's responsibility and Green Corridor (GC) is fully committed to safeguarding all children, young people and adults at risk that come into contact with our work. We are fully aware that young people with special educational needs and learning disabilities (SEND) can face additional safeguarding challenges. These can include communication barriers, that they can be disproportionately impacted by issues such as bullying without outwardly showing any signs and are more prone to peer group isolation than other young people. We believe that all children, young people and adults at risk have an equal right to protection from abuse, regardless of their age, race, religion, ability, sex, language or background and consider the welfare of the child/ young person / adult at risk is paramount. We will take every reasonable step to ensure that children, young people and adults at risk are protected where our staff and associates are involved in the delivery of our work. All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately. Any allegations against the CEO will be reported to the Lead Trustee for all Safeguarding matters, Arnie Wickens.

The overall aim of this policy is to provide clear direction for employees, workers (incl. subcontractors), volunteers and site visitors about expected behaviour in dealing with safeguarding issues, ensuring concerns and referrals are handled sensitively and professionally in supporting children and adults at risk. We also ensure parents and carers are aware of our policies and procedures.

### 2. PRINCIPLES

- Provide a welcoming and safe environment for children and adults at risk to learn about the world around them.
- We will never assume that indicators of possible abuse such as behaviour mood and injury relate to a leaners disability without further exploration.
- Recognise that all children and adults at risk have an equal right to protection from all sorts of abuse and should be listened to if they express any concerns.
- Ensure all our staff and volunteers take responsibility to act on any disclosure or suspicion that a child or adult may be at risk.
- Respond swiftly and appropriately in a child centred and coordinated manner to all suspicions or allegations of abuse and provide parents and carers with the opportunity to voice concerns;
- Have robust escalation arrangements and appropriate systems of support in place for children adults at risk, staff and volunteers.
- Operate a culture of transparency and willingness to share information with Local Authority Designated Officers (LADO), Safeguarding Children Partnerships and Safeguarding Adults Partnerships and other local agencies such as the Police as protecting children and adults at risk is everyone's responsibility.

We also recognise that all children and adults at risk should have access to this and other policies to enable them to feel willing and able to raise issues of concern and complaints. Our staff and Designated Safeguarding Officers (DSO) are well trained and experienced in

reassuring, listening to and dealing with issues and complaints from children and adults at risk. We recognise that we need to offer information about our policies and procedures in a variety of formats, age appropriate and taking into account any additional needs that they may have. In line with Children's Commissioner guidance on developing child friendly processes GC will adopt these common principles as we review policies and procedures on a rolling annual programme.

### 3. SCOPE

This policy applies to all employees, workers including contractors and volunteers whose duties bring them into contact with children and/or adults at risk.

### 4. DEFINITIONS

#### **Child:**

Anyone who has not yet reached their 18th birthday. 'Children' therefore means 'children and young people' throughout. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate for children and young people, does not change his or her status or entitlement to services or protection under the Children Act 1989.

#### **Adult at risk:**

"An adult at risk (often referred to a vulnerable adult) is a person aged 18 years or over who may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of himself or herself, or unable to protect him or herself against significant harm or exploitation;" *No Secrets* (DH/Home Office 2000)

The ADASS National Framework of Standards (2005) argues against the use of the word "vulnerable" and suggested that local safeguarding adults' procedures should apply to "every adult who is or may be eligible for community care services "

The Safeguarding Vulnerable Groups Act (2006) uses the term "adult at risk" in a much wider context to apply to people using certain types of services or residing (even temporarily) in certain types of places

Therefore consider that a "adult at risk" is a person aged 18 years or over who is:

- In residential accommodation provided connection with care or nursing or receiving care or nursing at home
- Receiving health care
- In lawful custody or under the supervision of a probation officer
- Receiving a welfare service of a prescribed description or direct payments from a social services authority
- Receiving services, or taking part in activities, aimed at people with disabilities or special needs because of his/her age or state of health.

It may be a person who is unable to take care of him/herself, or unable to protect him/herself against significant harm or exploitation. He/she may be elderly or frail, have learning disabilities, suffer from mental illness, have a physical disability, be a substance misuser, be homeless or in an abusive relationship.

## 5. EXPECTATIONS

Across all GC sites and throughout all our project activities we expect all our employees, workers, supply staff, volunteers and visitors to:

- Be familiar with our Safeguarding Children and Adults at risk Policy and Procedure;
- Be subject to Safer Recruitment processes and checks whether they are new staff, consultants, contractors or volunteers;
- Be vigilant and alert to signs and indicators of mental, physical, emotional or sexual abuse and to be aware of other specific risks e.g. radicalisation, forced marriage, honour based violence and female genital mutilation;
- Be aware of how to record and escalate concerns immediately;
- Deal with disclosures of abuse from a child or adult at risk in line with safeguarding procedures;
- Treat every child and adult at risk with dignity and respect at all times;
- Conduct ourselves in a manner consistent with our position as a positive role model;
- Immediately report or raise concerns for the safety or wellbeing of a child or adult at risk to our GC DSO or DSL
- Listen to children and adults and take any concerns raised seriously.

## 6. LEGISLATION AND GUIDANCE

There is a considerable body of legislation and guidance designed to ensure that children and adults at risk are protected and it is important to understand that everyone is responsible for their safety. The main pieces of legislation that affect this policy are:

- Children Act 1989, 2004
- The Health and Safety at Work Act 1974 (HASAWA)
- The Rehabilitation of Offenders Act 1974
- The Police Act 1997
- The Working Time Regulations 1998
- The Protection of Children Act 1999/Criminal Justice and Court Services Act 2000 the Care Standards Act 2000
- The Conduct of Employment Agencies and Employment Business Regulations 2003
- The Safeguarding Vulnerable Groups Act 2006 (VBS)
- The Protection of Freedoms Act 2012
- Working Together to Safeguard Children 2018, 2020
- Safeguarding Children and Young People from Sexual Exploitation – Supplementary Guidance to Working together to Safeguard Children
- Keeping Children Safe in Education 2022
- The Prevent Duty for England and Wales (2015) under section 26 of the Counter Terrorism and Security Act 2015
- Revised Prevent Duty Guidance July 2015
- Work based learners and the Prevent statutory duty Guidance for providers' DoE September 2021
- Section 5B of the Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015)
- Mandatory Reporting of Female Genital Mutilation – Procedural information 2020
- Statutory Guidance on FGM
- Dealing with Allegations of Abuse against Teachers and Other staff (2012)
- Information Sharing (2018)

- What to do if You are Worried a Child is Being Abused (2015)
- Domestic Abuse Act 2021
- Controlling or Coercive Behaviour Statutory Guidance Framework 2015
- Care Act 2014
- The United Nations Convention on the Rights of the Child.

## 7. ROLES AND RESPONSIBILITIES

### Designated Safeguarding Lead (DSL).

The Designated Safeguarding Lead (DSL) for Green Corridor is Hayley Harris and in her absence a member of our Safeguarding team – Dawn Mowbray or James Lovelock. Arnie Wickens on our Board of Trustees is the Safeguarding Trustee.

This role has defined responsibilities as follows:

- Oversight of all cases of suspected abuse referred via DSO's to Local Authority Designated Officer (LADO), the appropriate Safeguarding Children Partnership and Safeguarding Adults Partnerships, Disclosure and Barring Service (DBS), Local Authority Channel Referral and Intervention processes and/or local Police in cases where a crime may have been committed.
- Liaise with the GC Senior Management and Delivery support teams to inform them of on-going enquiries and/or investigations regarding safeguarding activity.
- Ensure they themselves have full refresher training every 2 years and ensure the same for the DSO. In addition to in-house training the lead will also ensure full compliance with training requirements from local authorities and multi-agency safeguarding training programmes.
- Ensure the DSO and staff are fully aware of multi-agency tools for identifying, assessing and recording safeguarding concerns e.g. screening tools.
- Act as our Transport Lead for all occasions where GC is directly responsible, either through use of our own transport or via contractors, for the safe transit of children or adults at risk to and from day or residential activities.
- Ensure our Safeguarding Policy and Procedure is reviewed annually and procedures updated and reviewed regularly to keep up with changes in legislation, guidance and best practice.
- Ensure the GC Safeguarding Policy and Procedure is made available publicly and ensure that parents and carers are aware of the fact that referrals about suspected abuse or neglect may be made.
- Embed across GC an ethos and culture of listening to children and adults at risk and taking account of their wishes and feelings amongst all staff, workers and volunteers.
- Be especially aware that children and adults are at risk of abuse and exploitation in situations outside the centre and outside their families. **All staff**, but especially our DSL and DSO, will be aware of contextual safeguarding e.g. that extra-familial harm can take many forms including sexual and criminal exploitation and serious youth violence.

**Designated Safeguarding Officer (DSO).**

The Designated Safeguarding Officer within GC responsible for Safeguarding and Child Protection will be James Lovelock and Dawn Mowbray. The name of our DSO will be advised to all new staff at their induction and thereafter as necessary.

The DSO is responsible for:

- Establishing contact with the senior member of social services staff responsible for child and adult protection in the organisation's catchment area. This should be a first step before an incident occurs.
- Provide information and advice on safeguarding within the organisation
- Ensuring that our safeguarding policy and procedures is implemented and followed and particularly to inform the GC Delivery Team of relevant concerns about individual children or adults at risk;
- Being closely linked into the Safeguarding Children Partnership and Safeguarding Adults Partnership and be familiar with local procedures, information, advice and guidance e.g. from multi-agency screening teams / hubs.
- Ensuring that appropriate information is available at the time of referral and that the referral is confirmed in writing, under confidential cover as quickly as possible (e.g. within one working day);
- Liaising with Local Authority Designated Officer (LADO) and other agencies, as appropriate;
- Keeping relevant people within GC e.g. Designated Safeguarding Lead (DSL) and Senior Management Team informed about any action taken and any further action required, for example, disciplinary action against member of staff;
- Ensuring that individual case records are maintained of the action taken by the organisation, and liaison with other agencies and the outcome;
- Advising the organisation on local safeguarding training needs;
- Dealing with the aftermath of an incident in the organisation.

The GC CEO will deputise at times when the DSO is on leave or otherwise engaged.

**Responsibilities of Trustees.**

Our lead trustee for safeguarding matters is Arnie Wickens and our Board has overall accountability for ensuring the safety of all people involved with our charitable activities and delegate operational management to the CEO and the SMT. Our Trustees ensure that:

- GC has a safeguarding policy in accordance with all relevant legislation and guidance;
- Safeguarding and child protection at the forefront of all activity and has the best interests of the child at its heart.
- The wishes and feelings of the child/adult are taken into account when determining the action taken where there is a safeguarding concern.
- Systems are in place to enable learners to confidently report abuse and that these systems are well promoted, easily understood and accessible to support learners to know that their concerns will be treated seriously, where they can express their views and give feedback.
- Our charity operates safer recruitment procedures to ensure adequate checks are carried out on staff, contractors and volunteers;
- At least one Senior Manager acts as Designated Safeguarding Lead;



- The Designated Safeguarding Lead attends appropriate refresher training and ensures that the DSO is trained fully at regular intervals and in accordance with Local Safeguarding Children and Adults Partnerships and KCSiE 2022;
- Staff are made aware of the role and identity of the DSL and deputies upon induction.
- GC has procedures to deal quickly professionally and sensitively with any allegations of any sort of abuse against staff, contractors and/or volunteers, including low-level concerns about staff conduct.
- Safeguarding policy and procedures are reviewed annually.
- As trustees they all receive safeguarding update training at L2 as a minimum each year.
- Online monitoring and filtering arrangements are appropriate.
- Child protection files are maintained in accordance with Keeping Children Safe in Education 2022.
- Safer recruitment policies are in place in accordance with Keeping Children Safe in Education 2022.
- More than one emergency contact number is held for each learner where this is reasonably possible.
- Seek assurance that safeguarding and child protection arrangements in place where the training facilities are used by external organisations for activities.

## 8. SUSPICION OF ABUSE

Any GC staff member or volunteer who witnesses or suspects abusive behaviour towards a child or adult at risk should immediately report it to the DSO for their area (**see reporting and escalation flowchart Appendix 2**). If a worker has suspicions, he/she must act on these and not ignore a potentially very serious situation. It is NOT the individual's responsibility to decide how serious the matter might be nor to investigate his/her suspicions - this requires expertise he/she is not expected to have. Our Whistleblowing Policy enables all our staff, workers and volunteers to raise any concerns in confidence.

Any allegations of abuse made against anyone working for GC will be thoroughly investigated and dealt with through our disciplinary procedure. Serious breaches may lead to dismissal. The DSO will appropriately record an allegation or reported incident.

If a child or adult at risk themselves discloses to a staff member or volunteer that they are being abused the staff member will reassure them to let them know that they are doing the right thing in speaking about this and that we must then pass this information onto the DSO.

Our DSO will be responsible for contacting the Local Authority Designated Officer (LADO), statutory child and adult protection agencies, the school/residential home, parent/carer if appropriate and/or the police if necessary.

We will aim to maintain any request for witness anonymity, where appropriate and possible, and to provide support if required.

## 9. CURRENT ISSUES

Unfortunately there are many other current issues affecting children and adults at risk e.g. neglect, bullying, harassment, gender violence, emotional, mental, financial and physical abuse, criminal violence and homelessness and we will ensure that all staff and volunteers

will be trained to identify signs of risk and indicators and that any concerns will be treated inline with existing reporting and escalation processes detailed in Appendix 2.

### **Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE).**

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people, both girls and boys, receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim, which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyber bullying and grooming.

Any GC staff or volunteers noticing the presence of any indicators that they have received training to look for in terms of sexual exploitation will trigger the escalation process outlined in Appendix 1.

Child Criminal Exploitation (CCE) is a similar form of abuse where an individual or group takes advantage of a power imbalance to coerce, manipulate or deceive a child into criminal activity. Whilst age may be the most obvious, this power imbalance can also be due to other factors such as gender, sexual identity, cognitive ability, physical strength status and access to economic or other resources. As with CSE this abuse is usually in exchange for something the victim wants or needs and /or will be to the financial benefit or other advantage (such as increased status) of the perpetrator. This abuse can be perpetrated by individuals or groups, males or females, children or adults. Abuse can be a one-off incident or series of incidents over time and range from opportunistic to complex organised abuse. It can involve force or enticement (carrot and stick) methods of compliance. Victims can be exploited even when activity appears consensual and this exploitation can be physical, facilitated and/or take place online.

### **Peer-on peer-abuse / Child-on-child abuse**

All staff are aware that children can abuse other children and recognise that such peer-on-peer / child-on-child abuse is most likely to include, but may not be limited to:

- bullying (including cyberbullying);
- physical abuse such as hitting, spitting, kicking, shaking, biting, hair pulling or otherwise causing physical harm;
- sexual violence such as rape, assault by penetration and sexual assault;
- sexual harassment such as sexual comments, remarks, jokes, and online sexual harassment which may be stand-alone or part of a broader pattern of abuse;
- upskirting which typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm;
- sexting (also known as youth produced sexual imagery); and
- initiation / hazing type violence and rituals

All staff are clear on our policy with regard to peer-on-peer / child-on-child abuse as governed by our Learner Behaviour and Exclusion Policy.

### **Serious Violence.**

All staff are aware of indicators which may signal that our young people are at risk from or are involved with serious violent crime. These may include increased absence from our provision, a change in friendships or new relationships with older individuals or groups, a significant decline in academic performance, signs of self-harm or significant change in wellbeing, signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that they have been approached by, or are involved with, individuals associated with criminal networks or gangs.

Our DSL and DSO will ensure all staff are aware of the associated risks and understand measures in place to manage these e.g. Home Office's **Preventing Youth Violence and Gang Involvement** and **Criminal Exploitation of Children and Adults at risk : County Lines guidance**.

### **County Lines**

This is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs (primarily crack cocaine and heroine) into one or more areas within the UK using dedicated mobile phone lines or other form of 'deal line'.

This form of abuse is of particular concern to us as learners have been targeted and recruited into county lines from a number of institutions including special needs schools and colleges, pupil referral units, children's homes and care homes.

Exploitation is an integral part of county lines via coercion, intimidation, violence and weapons to ensure victim compliance. Children and adults at risk are recruited to move drugs and money between locations and are known to be exposed to techniques such as 'plugging' where drugs are concealed internally to avoid detection. Children and adults at risk can easily become trapped by this type of exploitation as county lines gangs create drugs debts and can threaten serious violence and kidnap towards victims and their families if they attempt to leave the county lines network.

All our staff will look out for signs of our learners being potentially involved in county lines through episodes of going missing from home or our provision when the victim may have been trafficked for the purpose of transporting drugs. Under such circumstances we will consider referral to the National Crime Agency for human trafficking. If we suspect a child to be at risk or involved with County Lines we will also consider a safeguarding referral.

### **Domestic Abuse**

Domestic violence and abuse is defined as any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial and emotional.

All children can witness and be adversely affected by domestic abuse and can suffer long lasting emotional and psychological impact.

Operation Encompass is a system that ensures that police are called to a domestic abuse incident where there are children in the house the police will then inform the key adult (usually the DSL) in school or college before they arrive at provision the following day. We will also encourage potential victims as well as those who are worried about friends and loved ones to call the following helpline run by Refuge, free of charge and in confidence 24/7:

**National Domestic Abuse Helpline Tel: 0808 2000 247**

### **Homelessness**

Being homeless or being at risk of becoming homeless presents a clear risk to a child's welfare. Our DSL and DSO have links with all our Local authority partners housing departments to raise any concerns at the earliest opportunity. Indicators that a family may be at risk of homelessness include debt, rent arrears, domestic abuse or anti-social behaviour. A referral to housing will not replace a referral into the local authority social care department where a child or adult at risk has been harmed or is at risk of harm.

### **Radicalisation, Extremism and Fundamental British Values.**

The current threat from terrorism and extremism in the UK may include the exploitation of vulnerable people, to involve them in terrorism or in activity in support of terrorism. The normalisation of extreme views may also make children and adults vulnerable to future manipulation and exploitation.

We are clear that this exploitation and radicalisation should be viewed as a safeguarding concern and GC Board of Trustees will hold the CEO to account via a Preventing Extremism Risk Assessment (see Appendix 3) to ensure compliance with the Prevent Duty. The board will ensure that their behaviour, that of staff and volunteers, the GC curriculum, policies and procedures demonstrate the British values of democracy, the rule of law, individual liberty, mutual respect and tolerance, including for those with different faiths and beliefs.

GC will therefore intervene in delivery of our charitable activities to prevent children and adults at risk from being radicalised and drawn into terrorism.

Our staff and volunteers will be trained to look out for indicators of individuals being at risk of becoming radicalised. Our site based and activity risk assessments will include consideration of the use of our premises for events, use by external agencies, integration of individuals by gender and SEN, anti-bullying policy and other issues specific to the communities we serve and our charitable ethos. We have a Single Point of Contact (SPOC) who will be the lead within the organisation for safeguarding in relation to protecting individuals from radicalisation and involvement in terrorism. The SPOC for Green Corridor is Tim Whitelaw.

When any member of GC staff or a volunteer has concerns that an individual may be at risk of radicalisation or involvement in terrorism, will speak with the SPOC / Designated Safeguarding Lead. This may result in the individual at risk of radicalisation given appropriate support e.g. PREVENT referral to the Channel programme (see referral form in Appendix 4.)

### **Female Genital Mutilation**

Female Genital Mutilation (FGM) comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. GC Staff will be made aware of the signs and indicators of FGM and will follow the escalation process as detailed in

Appendix 1. If any member of staff discovers that an act of FGM appears to have been carried out on a girl under the age of 18 this will be reported to the police as a **specific legal duty** on teaching staff.

### **Forced Marriage and Honour Based Violence.**

A forced marriage is where one or both people do not (or in cases of people with learning disabilities, cannot) consent to the marriage and pressure or abuse is used. In the UK it is recognised as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights. Honour based violence can be described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code. GC Staff and volunteers on noticing the presence of any indicators as identified during training will trigger the escalation process as detailed in Appendix 1.

### **Mental Health.**

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

Only appropriately trained professionals will make a diagnosis of a mental health problem e.g. Children and Adolescent Mental Health Services (CAMHS). However all staff are expected to observe our young people daily and identify those whose behaviour suggest that they may be experiencing a mental health problem or be at risk of developing one.

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. Our staff are made aware through the sharing of EHCP information in this regard of how these children's experiences can impact on the mental health, behaviour and education and will react accordingly.

Any member of staff that has a mental health concern about one of our learners that is also a safeguarding concern with immediately speak to the DSL or DSO.

We will promote positive mental health, wellbeing and resilience amongst our learners including specific sessions as part of our enrichment programme using resources available from the DfE, PHE and other reputable sources of mental health advice.

### **Children Looked After (previously Looked After Children)**

The most common reason for children becoming looked after is as a result of abuse / neglect. Staff should have the skills, knowledge and understanding to keep looked after children safe. Staff need information in relation to a looked after child's legal status (whether they are looked after under voluntary arrangements or with the consent of parents or on an interim or full care order) and contact arrangements with birth parents or those with parental responsibility. Information should be available on care arrangements and the level of authority delegated to the carer by the authority looking after him/her.

A previously looked after child potentially remains vulnerable and all staff should have the skills, knowledge and understanding to keep previously looked after children safe. It is important that all agencies work together and that prompt action is taken.

The designated teacher for students who are looked after will work with local authorities to promote the educational achievement of looked after children, this will include those who

have left care through adoption, special guardianship or child arrangement orders or who were adopted from state care outside of England and Wales. At Halesowen College the Designated Teacher is Mandy Downing. The designated teacher will work with the virtual school head where appropriate.

### **Care Leavers**

The designated safeguarding lead will have details of the local authority Personal Advisor appointed to help and guide the care leaver and liaise with them when there are issues of concern.

## **10. SAFER RECRUITMENT & SELECTION**

In line with DfE Keeping Children Safe in Education 2022 Statutory Guidance we will prevent people who pose a risk of harm from working with children or adults at risk by adhering to statutory responsibilities to check staff who work with children, take proportionate decisions on whether to ask for any checks beyond what is required and ensure volunteers are appropriately supervised.

For all posts that require working with children our DSO trained in Safer Recruitment, will sit on the interview panel. Our DSL will ensure that the DSO is fully trained in Safer Recruitment and will take advice from Safeguarding Children (and Adults) Partnerships in so doing.

Our recruitment process will embed safeguarding at all stages from initial job applications to confirmation in post by ensuring:

- Job Adverts and Job Description refers to responsibility for safeguarding
- Face-to-Face Interviews undertaken (no appointments made without)
- The DSO is trained in Safer Recruitment and on Interview Panel
- Safeguarding scenarios and question areas form key part of interview process
- Take up minimum of 2 suitable references (verbal and/or written) one of which must be last employer
- Pre-employment requirement for original qualification certificates, enhanced with barred list check, teacher prohibition and interim prohibition order checks, section 128 directions, further checks on people who have lived or worked outside the UK. To include Disclosure and Barring Service (DBS) checks and Certificates of Good Character and checks on the right to work in the UK.
- In some circumstances we may seek applicants' consent to a social media background check.

Those who are involved in work situations where they have sustained or prolonged unsupervised access to children or adults at risk are exempt from the Rehabilitation of Offenders legislation.

This means that prospective employees, self-employed contractors and volunteers must declare all criminal convictions, however long ago; and these will be taken into account when deciding on their suitability for working with children or adults at risk.

No-one, either paid or volunteering, will be permitted to undertake a regulated activity without a satisfactory enhanced DBS check and other checks as detailed above.

A 'regulated activity' is defined by the DfE as work with children or adults at risk that a barred person cannot do and comprises in summary:



- unsupervised activities i.e. teach, train, instruct, care for or supervise children or provide advice / guidance on wellbeing or drive a vehicle only for children;
- work for a limited range of establishments or specified places with opportunity for contact e.g. schools and colleges.

## **11. STAFF SUPPORT & TRAINING**

Abuse is clearly devastating for a child or adult at risk and will cause stress and anxiety for families and for staff. We recognise that working with children and adults at risk can sometimes be stressful and potentially traumatic and we support staff and volunteers by providing an opportunity to talk through anxieties with the DSO and/or Designated Safeguarding Lead as appropriate.

Staff and volunteer training is not only crucial in protecting children and adults at risk but also helps make them aware of how their own behaviour can protect themselves against allegations. All new staff and volunteers are required to read and sign that they have received and understood this Safeguarding Children and Adult at risk Policy and Procedure as part of our induction process, receive online NSPCC training and safeguarding briefings both in-house and from Safeguarding Children and Adult Partnerships.

They also receive training on all related policies and are required to read and sign that they have received and understood all these policies and this is recorded in their individual GC Policy & Procedure hard copy ring binders.

Our DSO and DSL will also undertake a L3 or higher safeguarding training course and regular refresher training every 2 years as well as annual refreshers. In addition, specific training via Safeguarding Children or Adults Partnerships our DSL, via the DSO, will ensure all staff and volunteers are made aware of any changes in safeguarding policies and procedures e.g. recently revised 'Prevent' Duty Guidance on radicalisation of young people via regular monthly team meetings at operational area level.

In the event of an allegation against a member of staff or a volunteer, we will support the member of staff or volunteer involved through line-management advice, referral to our helpline and signposting to union representation if appropriate and also extend this offer to other members of the team affected if required.

## **12. PLANNING & SUPERVISION**

All activities or assignments involving children or adults at risk will be planned in advance to ensure they take into account the age range and ability of the participants. Staff, volunteers or freelancers supervising assignments involving children/adults at risk will be competent and trained to do so. Ratios of the number of skilled and experienced supervisors to the number of learners /participants will be selected to ensure that both the quality of learning and safety are maximised. This policy does not prescribe ratios because they will vary according to the age and needs of the participants, the nature of the activity and the competence of the participants and staff involved. Our approach is that activity supervision plans, including ratios, will match the level of risk involved. Decisions on ratios and effective supervision will take into account, as part of the risk assessment, the following factors:

- competence of staff and the person in charge

- competence of volunteer assistants and apprentices
- gender, age, behaviour and ability of participants
- any special medical, educational or capability needs of the participants
- the duration and nature of the activity e.g. classroom based, land based, water based, ICT based
- the nature of the local site and environment
- specific site requirements e.g. permits
- contingency options
- level of first aid cover required
- access to emergency services
- the season and the local weather forecast
- specific guidance from professional national bodies

All staff should avoid working alone with a child or adult at risk wherever possible. If it is not avoidable they should plan their work so that at least two supervising adults are present at any time, where possible including a GC employee. If possible, the worker should also move to a workstation where he/she and the child/adult at risk can both be seen by other colleagues or other adults. This guidance applies also to transport in vehicles - workers should not offer to transport a child or adult at risk anywhere unless accompanied by a further person or as part of a formal arrangement.

### **13. PHYSICAL CONTACT**

On no account will any GC employee, worker or volunteer have any physical contact with a child or adult at risk unless it is to prevent accident or injury to themselves or anyone else (e.g. to prevent a fall), or in the case of medical assistance being needed (e.g. to administer first aid), or to provide nursing or other general care, in which case the prior consent of the affected person should be requested where possible. Where appropriate, consent from parents or those with parental or caring responsibility should be obtained.

If a child/adult at risk is hurt or distressed, the worker should do his/her best to comfort or reassure the affected person without compromising his/her dignity or doing anything to discredit the person's own behaviour.

If a child or adult at risk requires intimate care this will be written into a care plan delivered by their carer that staff will adhere to and be trained to deliver. Please also see the GC Personal Care and Medicines Policy.

### **14. APPROPRIATE COMMUNICATION**

Communication with children/adults at risk is vital in establishing relationships built on trust. Those working with children or adults at risk should listen to what they are saying, and respond appropriately. Children and adults at risk are entitled to the same respect as any employees, workers and volunteers. It should also be made clear to them what standards of behaviour and mutual respect are expected from them.

Where appropriate, the appropriate consent from parents/those with parental or caring responsibility should be obtained.

### **15. STAFF AND VOLUNTEER BEHAVIOUR**



We all aim to promote an environment of trust and understanding. Those working with children and adults at risk should not tolerate unsociable behaviour but should try to ensure good working relationships. We aim to encourage the highest professional and ethical standards and require all employees to maintain our good reputation by behaving with responsibility and integrity and acting in a courteous, honest and fair manner towards anyone with whom they deal. We therefore ensure that the dress, appearance, conduct and personal hygiene of all our staff and volunteers presents us in a professional manner at all times.

Those working with children/adults at risk should behave appropriately, ensure that language is moderated in their presence and should refrain from adult jokes or comments, which are clearly unsuitable. Workers should also note that what may be acceptable language to their friends may not be regarded as such by vulnerable young people. All our staff, supply staff workers and volunteers have a strict duty of care never to subject any child or adult at risk to any form of harm or abuse. This means that it is unacceptable, for example, to treat a child/adult at risk in any of the following ways:

- to cause distress by shouting or calling them derogatory names
- to slap them
- to hold them in such a way that it causes pain, or to shake them
- to physically restrain them (except to protect them from harming themselves or others)
- to take part in horseplay or rough games
- to allow or engage in inappropriate touching of any kind
- to do things personal in nature for the person that they can do themselves (this includes changing clothing, or going to the toilet with them unless another adult is present)
- to allow or engage in sexually suggestive behaviour within a person's sight or hearing, or make suggestive remarks to or within earshot
- to give or show anything which could be construed as pornographic
- to seek or agree to meet anywhere outside of our normal workplace without the full prior knowledge and agreement of GC management and the parent, guardian or carer
- to engage with them online in an unacceptable manner.
- to steal from the person
- to cheat them
- to use them for financial gain
- to put pressure on them about wills, property, inheritance or financial transactions
- to misuse or steal their property, possessions or benefits
- to borrow money or lend money
- to give or accept personal gifts

All our staff, workers and volunteers should not, without the full knowledge and consent of a manager and an appropriate record made of why this behaviour is necessary and when it occurred:

- Be visible when working with children and adults at risk, endeavouring to ensure other adults are present. Avoid being alone with them;
- Take a child or adult at risk to his/her own home;
- Take a child or adult at risk alone on car journey, unless this forms part of the organisation's core activities.

## **16. SITE SECURITY AND TRANSPORT**

The safety and wellbeing of the people we work with is paramount and we are committed to providing a safe environment within which to work. Those working with children/adults at risk will ensure all appropriate site-based risk assessments are in place.

All visitors to our sites are asked to sign in, where required to show ID and on certain sites to wear a visitor lanyard / badge and will be escorted or supervised whilst on site based on the judgement of the operations manager.

If transporting children/adults at risk, the transport will be checked to ensure it is roadworthy and adequate for the purpose. Any equipment used must be safe and only used for the purpose for which it is intended. Users will be adequately trained. Appropriate insurance will be up to date and adequate to cover such assignments.

Our DSL will also act as our Transport Lead for all occasions where GC is directly responsible either through use of our own transport or via contractors for the transit of children or adults at risk to and from day or residential activities.

## **17. IMAGES AND E-SAFETY**

Photographs and videos of our charitable work are sometimes taken for publicity purposes and/or at a funders request but we always seek prior consent from parents/carers to take any image of their children and their permission to do so is recorded on our Photo / Video Consent form. When permission is given we still do not use learners' names against any image. We also ensure that children and adults at risk in our care tell a member of staff if they are concerned that someone is taking pictures of them. This approach also extends to children and adults at risk sending messages that could be considered as cyber bullying and/or sexting. GC will treat any such issues just as seriously as any other type of bullying and will be dealt with in line with our anti-bullying policy.

Some social network sites, chat rooms and websites are a clear source of inappropriate material and we do not allow access to such sites on our premises. Acceptable Use of IT for staff and volunteers is laid out in a related policy. All our staff, workers and volunteers should:

- Not photograph/video a child or adult at risk, even by mobile phone, without their valid consent and that of their parent/guardian or carer.
- Ensure that any photographs/videos taken are appropriate;
- Report any inappropriate use of images.

All our staff, workers and volunteers using ICT on projects with children and adults at risk will:

- Ensure that they are made aware of the dangers associated with social networking sites and the internet, and know to tell someone if they encounter anything that makes them feel unsafe or threatened.
- Ensure access is supervised at all times.
- Design access to the Internet and ICT services expressly for their use and will include filtering appropriate for their age and understanding.
- Give clear objectives for how the ICT is to be used, relevant to the activity requirement.
- Limit the amount of time spent accessing the computer, relevant to the activity requirements.

## **18. CONFIDENTIALITY**

All personal information regarding children/adults at risk is highly confidential and will only be shared with appropriate people on a need to know basis.

Information will be stored securely at our Learning & Development Centre and access will be limited to the Designated Safeguarding Officer and Designated Safeguarding Lead and will only be kept for as long as is needed. We comply fully with GDPR.

Anyone who is likely to have access to confidential material regarding children or adults at risk, or any of the bodies on behalf of whom GC is working, will be required to sign a non-disclosure agreement. The requirement for confidentiality is emphasised.

## **19. CONTACT OUTSIDE WORK**

Contact will not be made with any of the children/adults at risk with whom we are working for any reason unrelated to the particular work. In particular, our employees are required to maintain our reputation for integrity and responsibility in dealing with such people, and should not enter into any social or other non-work related arrangements with them.

## **20. GIFTS AND INDUCEMENTS**

On no account will anyone from GC give a child/adult at risk a gift or buy refreshments etc. that could be in any way considered as grooming, a bribe or inducement to enter into a relationship with the GC person or give rise to any false allegations of improper conduct against the individual.

## **21. COMMUNICATING POLICY AND CONCERNS**

All employees, workers and volunteers at GC will be made aware of this policy, sign and receive a copy to be held in their individual Policy & Procedure ring binder.

Furthermore, a copy of this policy will be given to all relevant bodies with whom we work and will be made available to parents and carers of children/adults at risk with whom we plan to work. Any concerns about the assignment or people involved should be addressed with the Operations Manager.

## **22. BREACH OF POLICY**

Failure to follow the guidelines in this policy is considered a serious offence and will be investigated thoroughly and dealt with through our disciplinary procedure. Serious breaches may lead to dismissal (for employees) and termination of any agreement (for workers or volunteers).

## **23. IMPLEMENTATION, MONITORING & REVIEW**

All line managers/staff are responsible for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation and additionally whenever there are relevant changes in legislation or to our working practices.

Any questions or concerns about the interpretation or operation of this policy should be taken up in the first instance with the Designated Safeguarding Lead.

## Section 2.

### 24. SAFEGUARDING PROCEDURES

For us to ensure that all children and adults at risk that we work with are protected from any harm we need to understand what types of behaviour constitute abuse and neglect and what signs to look out for. Categories of abuse and neglect are shown below with signs and symptoms :

### 25. INDICATORS OF PHYSICAL, SEXUAL, PSYCHOLOGICAL, EMOTIONAL and FINANCIAL ABUSE.

What is abuse?

Abuse is something that is done to another person, without their full understanding or consent, which harms them in some way. It may consist of a single act or repeated acts and can be one or more of the following::

**Physical Abuse**, which includes hitting, pinching, physically restraining someone in an inappropriate way.

Signs of physical abuse may be :

- Scratches
- Bite Marks
- Bruises in places that are not consistent with normal play, e.g. on the fleshy parts of the face and around the ears, and on the backs of the legs
- Bruises or marks consistent with straps, sticks, finger or pinch marks
- Burns of all kinds that do not have an explanation consistent with the marks, especially friction and cigarette burns
- Undue fear of adults, fearful watchfulness and failure to thrive.
- Fear of changing for physical activities
- Isolation from peers
- Aggression towards others including bullying

**Physical Neglect**, which includes ignoring or withholding physical or medical care needs. Examples are failing to provide appropriate food, shelter, heating, clothing, medical care, hygiene, personal care; inappropriate use of medication or over-medication.

Signs of physical neglect may be:

- Inadequate/inappropriate clothing
- Constant hunger, scavenging for food/hoarding food
- Poor standard of hygiene
- Untreated illness
- Low level of concentration, tiredness or listlessness
- Responsibility for non age appropriate activities e.g. cooking, ironing, caring for siblings

**Financial Abuse**, which includes taking another person's money or possessions - for example, having money or property stolen, being pressured into giving people money or changing a will, misuse of benefits, not being allowed access to money

**Sexual Abuse**, which includes any sexual act to which the child or adult at risk has not consented and may not understand. For example, being touched or kissed when it is not wanted, being made to touch or kiss someone else, being raped, being made to listen to sexual comments or forced to look at sexual acts or materials

Signs of sexual abuse may be

- Difficulty in walking or sitting
- Recurrent tummy pain, discharges or headaches
- Sexually explicit play
- Unusual compliance
- Regressive behaviour soiling, masturbation, touching others inappropriately
- Inappropriate language and drawings for the child's age

**Psychological Abuse.** This can happen where someone is isolated, verbally abused or threatened

**Discrimination.** Discriminating abuse includes any type of abuse aimed at a child or adult at risk because of their colour, religion, appearance or sexuality. For example, ignoring spiritual or religious beliefs, comments or jokes about a person's disability, age, race, sexual orientation, or gender / gender identity, ignoring cultural needs, for example diet or clothing.

**Abuse of Individual Rights/discriminatory abuse/racial abuse.** Abuse of individual rights is a violation of human and civil rights by any other person or persons. Discriminatory abuse consists of abusive or derisive attitudes or behaviour based on a person's sex, sexuality, ethnic origin, race, culture, age, disability or any other discriminatory abuse - this includes hate crime. Forced marriage is also an abuse of human rights and falls within the definition of adult abuse. The Foreign and Commonwealth Office has issued draft guidance entitled 'Young people and vulnerable adults facing forced marriage – practice guidance for social workers'. Read more at [www.fco.gov.uk/forcedmarriage](http://www.fco.gov.uk/forcedmarriage)

**Professional Abuse.** Professional abuse is the abuse of trust by professionals, the failure of professionals to act on suspected abuse/crimes, neglect in services, and culpability as a result of poor management systems/structures.

Examples of professional abuse may be:

- entering into a sexual relationship with a child or adult at risk,
- failure to refer disclosure of abuse,
- failure to whistle-blow on issues when internal procedures to highlight issues are exhausted.

## Emotional Abuse

Emotional abuse may occur by itself or in conjunction with physical and/or sexual abuse. It may occur when a child or adult at risk is physically well catered for.

Signs of emotional abuse may be:

- Overly withdrawn
- Overly aggressive
- Neurotic behaviour, persistent rocking movement, tics and twitches
- Very poor language development
- Inability to relate to peers or adults
- Negative self description e.g. stupid, naughty, ugly

- Appetite Disorder
- Soiling, smearing faeces, enuresis

When working with children or adults at risk with disabilities, our staff and volunteers are also aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that might not be of concern on an ambulant child such as the shin, might be of concern on a non-mobile child;
- Malnourishment;
- Poor toileting arrangements;
- Lack of stimulation;
- Unjustified and/or excessive use of restraint;
- Rough handling, extreme behaviour modification such as deprivation of food or clothing, disabling wheelchair batteries;
- Unwillingness to try to learn the child's/adult's means of communication;
- Ill-fitting equipment. for example callipers
- Misappropriation of money;

Any staff or volunteers noticing the presence of any indicator for abuse or neglect should trigger a referral to children's social care as outlined in Appendix 2.

## LGBTQI+ learners

Some learners may be vulnerable due to their sexual orientation or gender identity, either, because they have been subjected to homophobic, bi-phobic or transphobic bullying, or because of negative responses from parents/carers or others, which may result in increased risk of self-harm, suicide or homelessness.

Several studies also evidence that LGBTQ+ young people may be at increased risk of becoming victims of CSE.

It is important that staff remain aware of increased risk factors to enable access to the appropriate support for these learners when required and that there is access to a trusted adult who they can be open with.

## 26. TAKING ACTION

It is the clear responsibility of all our staff and volunteers to immediately report any concerns they may have over a child or adult at risk to the Designated Safeguarding Officer (DSO) in line with the reporting and escalation flow chart in Appendix 1. Failure to report immediately will have consequences in line with our Disciplinary Policy & Procedure.

The signs of abuse aren't always obvious, and a child or adult at risk might not tell anyone what's happening to them. The same process is to be followed if a child or adult at risk discloses abuse of any sort or if you have concerns that abuse may be happening.

This procedure must be followed whenever any staff or volunteer hears an allegation from a child or adult at risk that abuse has, or may have, occurred or where there is a significant concern that there may be such abuse. However it is not their role to conduct an investigation or to make further enquiries themselves, but only to take the following steps in terms of gathering information and making notes:

- Listen to what is said.
- Accept what you are told – you do not need to decide whether or not it is true; and listen without displaying shock or disbelief.
- Reassure the person reporting their concern.
- Do not promise confidentiality and request consent to share the information; (see section 27).
- Do not promise that “everything will be alright now” (it might not be).
- Respond to the person reporting but do not interrogate,
- Avoid leading questions but ask open ended ones,
- Clarify anything you do not understand,
- Explain what you will do next, i.e. inform the DSO,
- Make notes as soon as possible – during the interview if you can.
- Use the person's own words – do not assume – ask, e.g. “Please tell me what xxxxx means?”
- Include: time date place.
- Describe observable behaviour and appearance.
- Cross out mistakes – do not use correction fluid.
- Do not destroy your original notes – they may be needed later on and must be given to the DSO.
- Discuss immediately with your DSO.



- Once reported to them the DSO will take responsibility for the matter and will take all of the necessary actions. However if you have questions or need additional support then ask.

## 27 CONSENT and CONFIDENTIALITY

### **Remember that what you are being told is confidential**

You should try wherever possible to obtain consent to share confidential information, but a lack of consent should not prevent you sharing information with the DSO.

When information is shared without the subject's consent or knowledge, it is recommended that the decision on sharing be discussed with the DSL and CEO in consultation with a legal adviser to add a further level of protection should the decision to disclose in this way be challenged. A record of the decision to disclose and reasons for it must be endorsed in the safeguarding section of the learners individual file.

If a child or adult is in immediate danger and / or requires immediate attention, call the emergency services on 999.

If there are concerns about a child or adult who is vulnerable this should be reported to the children or adult social care team who operate 24 hours. Any reports made should be also be reported to the DSO/L

The statutory authorities or others (e.g. the police or social services) may provide a safeguarding adviser with information which could be shared in order to manage a safeguarding risk. Where this occurs the following guidelines may be helpful:

The information provided must be in writing and agreed or confirmed in writing with the body or person supplying the information. A careful note of all these elements must be recorded on the relevant file and be evident to anyone else looking at the file.

The key in this situation is to decide whether the public interest in sharing the information overrides the interest in maintaining confidentiality. It is therefore important to weigh up what might happen if the information is shared against what might happen if it is not shared, (for instance, will the proposed sharing help to prevent any safeguarding risk?). Although each case needs to be decided on its own particular facts, generally, if there is a clear risk of significant harm to a child or serious harm to an adult, the public interest test will usually be satisfied. If unsure, seek advice.

If consent is obtained, it should be 'informed', meaning the person giving consent must understand why information needs to be shared, what information will be shared and with whom, how the information will be used, and the possible implications of sharing the information.

You should ensure that any information shared with the local DSO is done in a secure and timely way .

You should share only the information necessary for the purpose for which it is being shared and only share the information with the DSO at this stage.

Check that the information is accurate and up-to-date.

Share it in a secure way (i.e. ensure that a conversation or phone call can't be overheard; use secure email; password protect any typed notes).

Establish with the recipient whether they intend to pass it on to other people, and ensure they understand the limits of any consent that has been given;

If safe and appropriate, inform the person to whom the information relates and, if different, any other person who provided the information.

## **28 HANDLING ALLEGATIONS about WORKERS and VOLUNTEERS**

Any allegation of abuse will have a significant impact on the individual and therefore it is essential that the facts of the case, as they are known and alternative courses of action are carefully considered in deciding action to be taken. The Disciplinary Policy and procedure should be followed.

Being asked to take a leave of absence can give rise to great anxiety for the individual subject to the allegations. It must also be recognised that colleagues may be affected by this absence and consideration should be given to the necessary support required to address this.

Consideration should be given as to a work reassignment, which does not involve direct contact with children or adults at risk whilst investigation continues.

Agreement must be reached with the member of staff/volunteer as to how information will be shared throughout the investigative process and what support/counselling will be offered.

## **29 Information Management**

All safeguarding concerns raised either about the suspected abuse of a child/ adult at risk or about the behaviour of staff or volunteers (e.g. if they hurt a child/adult, breach this policy and procedure or do something considered to be poor practice) must be recorded.

Safeguarding records should only be seen by those who need to have proper access to them, An accurate record should be kept of:

- date and time of incident/disclosure
- parties who were involved, including any witnesses to an event
- what was said or done and by whom
- any action taken
- any further action taken
- where relevant, the reasons why a decision was taken not to refer those concerns to a statutory agency
- any interpretation/inference drawn from what was observed, said or alleged should be clearly recorded as such

- name of person reporting the concern, name and designation of the person to whom the concern was reported, date and time and their contact details.
- The record should be signed.

Records should be stored electronically on the GC network, to ensure regular back-up, password protected and only available to the local DSO and DSL. Paper copies of notes and interviews must be shredded with the approval of the CEO. Where information is shared with external agencies, the information will be encrypted and email to people in named roles who need to know about the information in those records. The protocols of the LADO in regard to retention of safeguarding documentation will be followed.

### 30. SAFEGUARDING CONTACTS

Designated Safeguarding Lead:	Hayley Harris	Tel No 07984 323599
Deputy DSL:	James Lovelock	

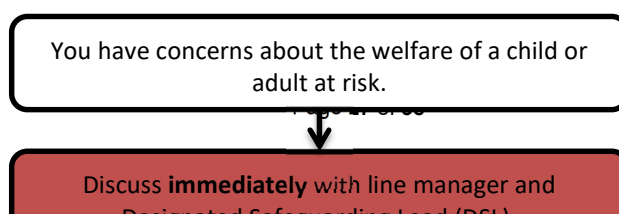
Designated Safeguarding Officer	Dawn Mobrey	Tel No 07933133864
---------------------------------	-------------	--------------------

Single Point Contact (Radicalisation):	Tim Whitelaw	Tel No: 07891 576519
--	--------------	----------------------

DSL must ensure that the DSO has an up to date contact details for the Local Authority Designated Officer (LADO) covering the local authority in which activity takes place:

LB Hounslow:	Tel No: 0208 583 6600
Surrey CC:	Tel No: 0300 200 1006
LB Hillingdon:	Tel No: 01895 277 590
Slough BC:	Tel No: 01753 474 053
LB Harrow:	Tel No: 0208 901 2690
LB Ealing:	Tel No: 0208 825 8930
LB Kingston & LB Richmond	Tel No: 0208 547 5008
NSPCC Child Protection Helpline	Tel No: 0808 800 5000

### APPENDIX 1: REPORTING AND ESCALATING SAFEGUARDING CONCERNS



APPENDIX 2: SUSPECTED CHILD / ADULT AT RISK ABUSE REPORT FORM

Please complete this form immediately that you have any concerns over the safety or welfare of a child/young person.

Actions:

- ☐ Receive, Reassure and React to the Child/Adult at risk
- ☐ Record on Form and Inform Line Manager
- ☐ Refer to DSO and Designated Safeguarding Lead
- ☐ Reflect and seek support if required

Name of child/adult: .....

Date of birth and age: ..... Ethnicity:.....

Religion: ..... First Language:.....

Disability: .....Any special factors: .....

Parent's/carers' name(s): .....

Home Address (and phone number if available): .....  
.....  
.....

Postcode.....

School.....

Known to social services Y/N

What are your concerns?

Please continue on to a separate sheet if required

Your name and position: .....

Staff members signature.....Date.....

Actions taken – Continue on separate sheet, remember to record the date and time of each action

Line Manager informed at ...../.....hrs.. Date .../...../20.....

Line Manager Name.....

Signature.....

DSO informed at ...../.....hrs Date ...../.../20.....

DSO name.....Signature.....

Social services referral made YES/NO to Name.....

Time of referral ...../.....hrs Date...../.....

**Responsibilities**

All members of staff have a responsibility to be aware of this policy and to report any suspicions that they might have concerning children and adults at risk of abuse.

**Appendix 3**
**Prevent Referral Form**

Restricted and Confidential

Please send completed form to: Mr Timothy Whitelaw.

Details of the individual being referred		
Name of the individual being referred		
Parents contact details (if person is under 18)		
Gender	Date of Birth	
Address	Telephone number	
Address of The Green Corridor		
The Green Corridor, Main Road Nurseries, Stanwell Moor Road, Hillingdon, TW19 6BS .		
Name of member of staff	Contact Number	Email Address
Details of any other agencies involved (if known).	Name of Contact	Contact details email/Telephone number
Referral Details		
Please give a full description on why the referral is being made and vulnerabilities to extremism identified.		

## Appendix 4

### Prevent Risk Assessment and Action Plan

1.	<b>Clear Leadership and Accountable Structures are in place and visible throughout the organisation.</b>	
	There is an identified strategic PREVENT Lead within the Organisation.	Mr Timothy Whitelaw.
	The Strategic Lead understands the expectations and key priorities to deliver PREVENT and that this is embedded within safeguarding procedures	Prevent lead has attended training.
	GC line managers are aware of the PREVENT strategy and its objectives	All have completed online training
	There is a clear awareness of roles and responsibilities throughout the organisation regarding PREVENT	Prevent is discussed in regular team meeting since March 2019. All staff complete online training as part of their induction.
	PREVENT safeguarding responsibilities are explicit within the organisations safeguarding team.	Guidance is given by TW to the team.
	The PREVENT Agenda and its objectives have been embedded within the appropriate safeguarding processes	Policies are updated as and when required.
2.	<b>Staff and the Governing Body have been appropriately trained accordingly in their roles</b>	
	A plan is in place to raise awareness of PREVENT (Work shop to Raise Awareness of Prevent - WRAP) training so that key staff and Trustees understand the risk of radicalisation and extremism and know how to recognise and refer children who may be vulnerable.	Prevent lead will give further training if staff feel WRAP was not sufficient. Prevent lead will ensure all staff complete WRAP training. CEO will ensure Board Level Safeguarding Lead (Arnie) and Support (Ray) complete online training by end May 2019.
	Details of WRAP courses including frequency and availability are cascaded to all relevant staff	Prevent lead to ensure this happens.
	There is appropriate staff guidance and literature available to staff on a Prevent Agenda	All available policy documents etc on staff shared area.

3.	<b>An appropriate reporting and referral process is in place and referrals are being managed effectively</b>	
	Ensure that preventing young people from being exposed to radicalisation or extremism is part of the organisations safeguarding policies and precedures	See Safeguarding and PREVENT Policy. PREVENT training is delivered to learners.
	A single point of contact [SPOC] for any PREVENT concerns raised by staff within the Organisation has been identified	Mr Tim Whitelaw
	An appropriate internal PREVENT referral process has been developed	Process for referrals are clear.
	Leads in partner agencies are known	Mr Whitelaw meets up with agencies.
	An audit trail for notification reports/referrals exists	Yes, in ILP folders. Any significant safeguarding is reported and recorded at board meetings.
4.	<b>A broad and balanced curriculum that helps protect learners against extremism and promotes community cohesion</b>	
	The organisation has a range of initiatives and activities that promote the spiritual, moral, social and emotional needs of children aimed at protecting them from radicalisation and extremism influences	Visiting Speakers, cross- curricular themes.
	Green Corridor delivers education that helps develop critical thinking the power of influence, particularly online and through social media	Delivery by Tim Whitelaw for all learners that access social media online.
	Learners are aware of the benefits of community cohesion and the damaging effects of extremism on community relations	Through learner forum discussions.
	Staff are able to provide appropriate challenge to learners, parents and trustees if opinions are expressed that are contrary to fundamental British Values and promotion of community cohesion	Whistleblowing is promoted in the organisation. Staff are clear of the action needed if they are to challenge learners re: British Values. Staff share experiences in team meetings and discuss best practice.

<b>Date of Review:</b>		<b>Document Owner:</b>	
------------------------	--	------------------------	--



### Extremism and Radicalisation Risk Assessment

#### Risk Assessment Guidance

The assessor can assign values for the hazard severity (a) and likelihood of occurrence (b) (taking into account the frequency and duration of exposure) on a scale of 1 to 5, then multiply them together to give the rating band:

Hazard Severity (a)	Likelihood of Occurrence (b)
<b>1 – Trivial</b> (eg discomfort, slight bruising, self-help recovery) <b>2 – Minor</b> (eg small cut, abrasion, basic first aid need) <b>3 – Moderate</b> (eg strain, sprain, incapacitation > 3 days) <b>4 – Serious</b> (eg fracture, hospitalisation >24 hrs, incapacitation >4 weeks) <b>5 – Fatal</b> (single or multiple)	<b>1 – Remote</b> (almost never) <b>2 – Unlikely</b> (occurs rarely) <b>3 – Possible</b> (could occur, but uncommon) <b>4 – Likely</b> (recurrent but not frequent) <b>5 – Very likely</b> (occurs frequently)

	Trivial	Minor	Moderate	Serious	Fatal
Remote	1	2	3	4	5
Unlikely	2	4	6	8	10
Possible	3	6	9	12	15
Likely	4	8	12	16	20
Very likely	5	10	15	20	25

The risk rating (high, medium or low) indicates the level of response required to be taken when designing the action plan.

Rating Bands (a x b)		
Low Risk (1-8)	Medium Risk (9 – 12)	High Risk (15 – 25)
Continue, but review periodically to ensure controls remain effective.	Continue, but implement additional reasonably practicable controls where possible and monitor regularly.	- STOP THE ACTIVITY- Identify new controls. Activity must not proceed until risks are reduced to a low or medium level.

	<b>Significant Hazards and Associated Risks</b> [Those hazards which may result in serious harm or affect several peoples]	<b>People at Risk</b>	<b>Initial Risk Rating</b>	<b>Control Measures (CMs)</b> 1. Controls, including relevant sources of guidance (eg Generic Risk Assessments, Guidance from Provider etc) 2. Specific CMs not included in the generic RA (eg briefings, actions by leaders / participants, qualifications / experience of supervisors).	<b>Additional CMs required? (Dynamic Risk Assessment)</b> If existing CMs cannot be met or circumstances have changed	<b>Risk</b>
<b>Curriculum</b>	<p>Harzard:</p> <ul style="list-style-type: none"> <li>Some staff may not recognise signs of radicalisation.</li> <li>British values not being embedded in lessons.</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>Learners views may go unchallenged.</li> </ul>	Learners	9	<p>Prevent teaining for all staff (Online course).</p> <p>Discussions in team meetings regarding safeguarding and prevent.</p> <p>Behaviour Policy implemented consistently.</p>	<p>Learners receive prevent training form lead prevent.</p> <p>Further staff training in signs to be delivered to staff by lead prevent if and when required.</p>	4

<b>PERSONAL, SPIRITUAL, MORAL, SOCIAL AND CULTURAL EDUCATION (PSMSC)</b>	<p>Hazard:</p> <ul style="list-style-type: none"> <li>Time available</li> <li>Staff not taking message seriously</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>Consistency could be diluted</li> </ul>	<p>Learners</p>	<p>9</p>	<p>All staff discuss learner issues at weekly team meetings.</p> <p>Key staff and Trustees to undertake PREVENT/WRAP training.</p>	<p>Review process to include promotion of PSMCS as and when appropriate.</p>	<p>6</p>
<b>COMMUNITY COHESION</b>	<p>Hazard:</p> <ul style="list-style-type: none"> <li>Inconsistent message</li> <li>Decline of behaviour</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>Rise in racist incidents in Organisation</li> <li>Rise in community complaints for racist behaviour</li> <li>Lack of engagement with message</li> </ul>	<p>Learners and staff in Organisation</p> <p>Members of the community</p>	<p>9</p>	<p>Anti-bullying and Behaviour Policy operation.</p> <p>Learners clear re: messages to combat racism, bullying and unacceptable</p> <p>PSHCE Programme ensures consistent message</p> <p>Key staff / Trustees to undertake PREVENT / WRAP training</p> <p>Staff training is part of induction and annual Safeguardingprevent and Equality &amp; Diversity training.</p>	<p>Safeguarding and Prevent lead to ensure staff training on PSMSC and identification / referrals is clear and consistent</p> <p>On-going training of staff and Trustees as new guidance emerges</p>	<p>6</p>

<b>LEARNER AWARENESS OF RISKS AND REMEDIES</b>	<p>Hazards:</p> <ul style="list-style-type: none"> <li>Inconsistent message as wider range of staff teach PSMSC and e-safety</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>Learners misconstrue/misunderstand message or do not take it seriously</li> <li>Message has the reverse effect and pushes learners towards extremists</li> <li>Learners unable to recognise risks and seek help when needed</li> </ul>	<p>Learners</p>	<p>9</p>	<p>PSMSC to be implemented in youth steering groups and embedded in curriculum where possible.</p> <p>Website to be updated regularly</p> <p>Key staff to undertake PREVENT / WRAP training</p>	<p>Learner Council and Senior Leadership Team to seek their view and monitor impact</p> <p>Key messages will be shared with parents as required</p>	<p>6</p>
<b>STAFF TRAINING</b>	<p>Hazards:</p> <ul style="list-style-type: none"> <li>Part-time staff</li> <li>Limited staff training time available</li> <li>Staff leaving</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>Some staff will miss the training / fail to read key documents</li> <li>Inconsistency of message</li> <li>Vulnerable learners not identified</li> <li>Weak or uncommitted staff are less likely to engage with this message</li> </ul>	<p>Learners and staff</p>	<p>12</p>	<p>Basic training given to staff September 2018</p> <p>Key staff to undertake PREVENT / WRAP training</p> <p>Staff training is part of induction and annual Safeguarding and Equalities training</p> <p>Agency and temporary staff receive information as part of their induction</p> <p>All staff on action plans are checked for their sharing of key messages such as radicalisation</p>	<p>Source online training to give us more flexibility to include part-time and temporary staff</p>	<p>8</p>

<b>TRUSTIE TRAINING</b>	<p>Hazards:</p> <ul style="list-style-type: none"> <li>Trustees do not have a share awareness of the importance of this issue as a safeguarding one</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>It is not given sufficient resource</li> <li>Learners are put at risk of, or become radicalised</li> </ul>	Learners, staff and Trustees	9	<p>Key Trustees undertake training e.g. Safeguarding and prevent appointed trustee.</p> <p>Key messages will be disseminated to the Trustees through meetings</p> <p>The training will cover whistleblowing so that we are aware of staff/Trustees putting Learners at risk because of not following protocol</p>	Source online training to give us more flexibility to include Trustees	6
<b>COMMUNICATION WITH PARENTS</b>	<p>Hazards:</p> <ul style="list-style-type: none"> <li>Lack of clarity about our key messages and methods of delivery</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>Families feel targeted</li> <li>Parents do not understand referrals</li> <li>Parents withdraw their learner from GC</li> </ul>	Learners	12	<p>Prior to induction parents meetings and literature handed out.</p> <p>Key messages will be shared with parents through the parents evenings, so they can support learners at home.</p>	Parents/carers can request a meeting at any time during the year. GC staff can request a meeting if required.	6
<b>REFERRAL SYSTEMS</b>	<p>Hazards:</p> <ul style="list-style-type: none"> <li>Staff do not follow the correct procedures</li> <li>Staff unaware of vulnerability features</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>Learners are put at risk of, or become radicalised</li> </ul>	Learners	12	<p>Staff training is part of induction and annual Safeguarding and Equalities training</p> <p>The training covers procedures but also whistleblowing so that we are aware of staff putting children at risk because of not following protocol</p>	Monitoring of safeguarding now includes monitoring of referrals for radicalisation	6

<b>INTERVENTIONS</b>	<p>Hazards:</p> <ul style="list-style-type: none"> <li>• Staff do not know who to contact in local agencies</li> <li>• Local agencies cannot provide appropriate support</li> <li>• High potential cost/time resource implications of support</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>• Delay in getting support for a child/family heightens risk on child</li> <li>• Impact on other areas of Organisation if resources diverted to supporting a child/family</li> </ul>	Learners and families	12	<p>Control Measures</p> <p>Special contact provision map available for all SLT</p> <p>Escalation procedures are known and used as and when required.</p>	Additional Request	6
<b>IT SYSTEMS</b>	<p>Hazards:</p> <ul style="list-style-type: none"> <li>• Learners can access radicalisation websites on the Organisation network</li> <li>• Learners are not equipped to identify such websites when accessing the internet out of Organisation</li> <li>• Parents are not equipped with IT knowledge to ensure appropriate firewalls etc on</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>• Learners are groomed by radical extremists</li> </ul>	Learners	10	<p>Learners have restricted access to computers and all activity is monitored by a tutor.</p> <p>Discussion on internet use at home and staying safe online is discussed at learner focus and parents evening.</p> <p>Leaflets to be sent out for learners and parents.</p>	Regular safeguarding information on the website to cover guidance for parents about e-safety on the internet	8