

Safeguarding Policy*

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***This safeguarding policy relates to both children and young people and adults at risk of harm.**

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Christian Ethos

YMCA Black Country Group is a Christian organisation. We trust in a God of love, expressed through the life, teaching and sacrifice of Jesus Christ. This love is evidenced in our actions and values, inspiring and challenging us to trust steadily, hope unswervingly, and serve compassionately.

We promote an inclusive understanding of Christian teaching, and are committed to work in solidarity with the poor, the dispossessed, the homeless and the vulnerable, encouraging respect for the differing cultural and religious views of others. Our Christian foundation was established over 170 years ago, and forms a distinctive thread that weaves through our charitable activity. We recognise all people as made in God's image with equal value, and we welcome, serve and work with people of all faiths and of none.

YMCA enables people to develop their full potential in mind, body and spirit. Inspired by, and faithful to, our Christian values, we create supportive, inclusive and energizing communities, where young people can truly belong, contribute and thrive. While we are always willing to give a reason for our faith-based motivation; the use of our housing, childcare and community services is not dependent on adherence to, or response to the Christian faith.

1.0 Introduction

1.1 YMCA Black Country Group¹ (hereafter called "the Association") recognise the need to provide a safe and caring environment for all our service users. We acknowledge that children, young people² and adults can be the victims of physical, sexual and emotional abuse, and neglect. We accept the UN Universal Declaration of Human Rights and the International Convention of Human Rights, which states that everyone is entitled to "all the rights and freedoms set forth therein, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status". We also concur with the Convention on the Rights of the Child which states that children should be able to develop their full potential, free from hunger and want, neglect and abuse. They have a right to be protected from "all forms of physical or mental violence, injury or abuse, neglect or negligent treatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s), or any other person who has care of the child." The Association believes that all children, and adults at risk have an absolute right to protection from abuse, regardless of their age, ethnicity, religion, ability, gender, language, background or sexual identity and consider their welfare as paramount.

¹ For the purpose of this Policy, the term YMCA Black Country Group also refers to any subsidiary and any associated 'not for profit' trading companies.

² All references to 'children and young people' assumes anyone up to the age of their 18th birthday.

- 1.2 The Association recognises that 'safeguarding' is everyone's responsibility. For services to be effective, each staff member³ (including trustees, volunteers and residential hosts) and partner organisation should take seriously their responsibilities to foster a safeguarding culture throughout all areas of their work.
- 1.3 This Policy details the reasonable steps that the Association has put in place to enable its staff to operate a safeguarding culture in which safer practice is an integral part of day to day duties. In turn, all staff should refer to this policy guidance to know how to respond appropriately to safeguarding concerns risks and incidents. **Please familiarise yourself with all sections of this policy, and particularly the details of the Designated Safeguarding Officer relevant for your service area, set out below.**
- 1.4 The Association has adopted the procedures set out in this safeguarding policy in accordance with statutory guidance and is committed to building and sustaining constructive links with statutory and voluntary agencies involved in safeguarding. The Association has also signed up to membership with thirtyone:eight (formerly CCPAS), a national safeguarding charity through which it receives an additional layer of support via an annual service agreement and a designated relationship manager. More information about thirtyone:eight and its services can be found on their website here: <https://www.ccpas.co.uk/thirtyoneeight> This policy is based upon the model safeguarding policy provided by thirtyone:eight (formerly CCPAS).
- 1.5 The Association undertakes to endorse and follow all national and local safeguarding legislation and procedures, in addition to the international conventions outlined above and provide on-going safeguarding training for all its workers and will regularly review the operational guidelines attached. In addition the Association will support the Designated Safeguarding Officers in their work and in any action which they may need to take to support or protect children and adults at risk of harm.

³ The term 'staff member' in this Policy relates to any paid / unpaid employee, trustee, volunteer or residential host of the Association.

2. Roles and Responsibilities

2.1 Clear roles and responsibilities for Safeguarding are delegated by the Chief Executive to senior staff as detailed below to ensure the effective implementation of the Association’s Policy. These named individuals are available as a first point of contact⁴ for any safeguarding concerns and will give advice and guidance to you or your line manager should it be required.

	Designated Safeguarding Officer - DSO	Deputy Designated Safeguarding Officer – Deputy DSO
<u>Enterprise & Community</u> Cafés, Gym and Enterprise Units.	Jo Goldie – Chief Operations Officer – Programmes 01902 371550 07921 435492	Louise Kumar Head of Skills and Community 01902 371550 07935 504423
<u>Housing & Lead DSO for Association</u> Housing, Shops	Sally Cowan Chief Operations Officer – Places & Lead DSO 01902 371550 07801 372600	Rachael Taylor Supported Lodgings Manager 0121 5241950 07854 928988
<u>Skills & Community</u> Learning, Employability, Talent Match, Health & Well-being, Substance Misuse Recovery etc.	Jo Goldie – Chief Operations Officer – Programmes 01902 371550 07921 435492	Louise Kumar Head of Skills and Community 01902 371550 07935 504423
<u>Childcare</u> Nurseries Holiday Club	Sally Cowan Chief Operations Officer – Places & Lead DSO 01902 371550 07801 372600	Melanie Braden Head Of Nurseries and Quality 01902 371550 07736 880193
<u>HR & Ethos</u> and <u>Corporate Services</u>	For 'Safeguarding Incident' concerns contact the Lead DSO / Deputy DSO referenced above.	

⁴ The DSO’s are available as a first port of call for all safeguarding concerns, however it is accepted that it may be appropriate to speak to your line manager in the first instance. See flowchart on page ...for further details

2.2 Your Designated Safeguarding Officer (DSO)

2.3 The Designated Safeguarding Officer is available as the first point of contact for all staff to go to for advice if they are concerned about a child or adult at risk. The Deputy DSO should be available to cover times when the DSO is not at work or on a leave of absence.

2.4 In this Association DSO's (and Deputy DSO's) are appointed relevant to their operational service areas. **It is important that every staff member knows who their DSO is (and Deputy DSO) and has their contact details to hand. Please make a note of your relevant DSO's number where you will be able to easily locate it if required.**

2.5 DSO's / Deputy DSO's will:

- Have a higher level of safeguarding training and knowledge than the rest of the staff and will be expected to complete an advanced training course specific for DSO's.
- Ensure that the Association's Safeguarding Policy is fully implemented in their service area and all procedures and risk assessments are suitably compliant.
- Assess information from staff regarding concerns about children / adults at risk and make decisions about whether staff concerns are sufficient enough to notify the local Children's Services Department (or Adult Social Services), making referrals where appropriate.
- Support the HR & Ethos Department in the safer recruitment, induction and training of staff relating to their service area.
- Ensure that concerns are logged and stored securely in line with current General Data Protection Regulations (GDPR)
- Have delegated responsibility from the Board of Trustees to ensure that the organisation's safeguarding policy and related policies and procedures are followed and regularly updated.
- Promote a robust safeguarding culture and work hard to create a safer environment for children, and adults at risk of harm.
- Liaise with the relevant statutory agencies e.g. Children's Services, Adult Services, Police, Local Safeguarding Children Board, and the Local Authority Designated Officer (LADO) on safeguarding matters related to their service area.

[Note: It is not the responsibility of the DSO / Deputy DSO to decide whether a child has been abused or not - that is the responsibility of investigative statutory agencies such as Children's Services or the police.]

- 2.6** The Lead DSO will be appointed by the Chief Executive. The Lead DSO will take responsibility for:
- Ensuring there is a 'Nominated Person' for all OFSTED registered services. In his/ her absence, responsibility for handling nursery child protection issues is delegated to the relevant DSO / Deputy DSO.
 - Ensuring that the Association's Safeguarding Policies are kept up to date with current best practice requirements, and advising the CEO and Board appropriately.
 - Facilitating Safeguarding Review Meetings to monitor / discuss safeguarding incidents across the Associations services, involving representation from the DSO's / Deputy DSO's from each service area and reporting to the Board.
 - Liaising with the statutory agencies on matters of Policy.
- 2.7 Managers & Supervisors** are responsible for ensuring that their staff teams operate within this Safeguarding Policy and any associated procedures. Where there is any doubt, they must clarify their safeguarding responsibilities with the appropriate Designated Safeguarding Officer at the earliest opportunity.
- 2.8 The Head of HR & Ethos** is responsible for ensuring that all HR & Ethos procedures are compliant with the Safeguarding Policy, and for ensuring that all Association staff undertake appropriate Safeguarding training, relevant to their duties.
- 2.9 The Board of Trustees has** ultimate legal and strategic responsibility for Safeguarding. They approve the Association's Safeguarding Policy and delegate operational responsibility to the Chief Executive Officer.
- 2.10 Chief Executive Officer** (CEO) is responsible for overseeing the implementation of the Safeguarding Policy, and delegating responsibilities appropriately.
- 2.11 Monitoring & Reporting**
- 2.12** Project Managers are responsible for keeping a departmental record of all safeguarding issues as they arise in their service area. They should ensure that the relevant DSO / Deputy DSO are kept informed of safeguarding developments.
- 2.13** The Lead DSO will facilitate internal Safeguarding Review Meetings, and reports to the Board as highlighted above.
- 2.14** In addition, the Lead DSO will ensure that any serious incidents are reported as required to the relevant body e.g. Ofsted, The Charity Commission or HCA in a timely manner.

3. Understanding Abuse and Neglect

3.1 Defining child abuse or abuse against an adult is a difficult and complex issue. A person may abuse by inflicting harm or failing to prevent harm. Children and adults in need of protection may be abused within a family, an institution or a community setting. Very often the abuser is known or in a trusted relationship with the child or adult.

3.2 In order to safeguard those in our Association, we adhere to the UN Convention on the Rights of the Child and have as our starting point as a definition of abuse, which:

1. States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.

3.3 Also for adults the UN Universal Declaration of Human Rights with reference to Article 5 states: *No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.*

The Association recognises its responsibilities as set out in PREVENT duty Guidance April 19 by:

- **Acting in The charity's best interests and managing its resources responsibly.**
- **Not running an event or publishing material that glorifies terrorism or incites hatred on the grounds of race, religion or sexual orientation, as this would be a criminal matter.**
- **Carrying out the charity's purposes for the public benefit.**
- **Not holding Views or activities that incite hatred on the grounds of race, religion or sexual orientation cannot be for the public benefit because they are illegal.**

3.4 The four Statutory Definitions of Abuse (and a few additional categories) of abuse below operate in England based on the government guidance 'Working Together to Safeguard Children (2018)'.

3.5 Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger for example, via the internet. They may be abused by an adult or adults, or another child or children.

- **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 persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
- **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. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

- **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); or
 - ensure access to appropriate medical care or treatment.

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

- **Child sexual exploitation** is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur using technology.
- **Extremism** goes beyond terrorism and includes people who target the vulnerable – including the young – by seeking to sow division between communities on the basis of race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society.

All childcare services within the organisation recognise their responsibilities as set out in PREVENT duty guidance April 2019.

3.6 Signs of Possible Abuse The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life.

Physical

- Injuries not consistent with the explanation given for them
- Injuries that occur in places not normally exposed to falls, rough games, etc.
- Injuries that have not received medical attention
- Reluctance to change for, or participate in, games or swimming
- Repeated urinary infections or unexplained tummy pains
- Bruises on babies, bites, burns, fractures etc. which do not have an accidental explanation*
- Cuts/scratches/substance abuse*

Sexual

- Any allegations made concerning sexual abuse
- Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour
- Age-inappropriate sexual activity through words, play or drawing
- Child who is sexually provocative or seductive with adults
- Inappropriate bed-sharing arrangements at home
- Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
- Eating disorders - anorexia, bulimia*

Emotional

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging.
- Depression, aggression, extreme anxiety.
- Nervousness, frozen watchfulness
- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Attention-seeking behaviour
- Persistent tiredness
- Running away/stealing/lying

Neglect

- Under nourishment, failure to grow, constant hunger, stealing or gorging food, Untreated illnesses,
- Inadequate care, etc

*These indicate the possibility that a child or young person is self-harming. Approximately 20,000 are treated in accident and emergency departments in the UK each year.

3.7 **Definitions of Abuse (Adults) - The following information relates to the Safeguarding of Adults as defined in the Care Act 2014, Chapter 14. This replaces the previous guidelines produced in 'No Secrets' (Department of Health 2000) The legislation is relevant across England and Wales but on occasions applies only to local authorities in England.**

3.8 The Safeguarding duties apply to an adult who; *has need for care and support (whether or not the local authority is meeting any of those needs) and; is experiencing, or at risk of, abuse or neglect; and as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.*

- 3.9 The Association will always promote the adult's wellbeing in their safeguarding arrangements. People have complex lives and being safe is only one of the things they want for themselves. Staff should work with the adult to establish what being safe means to them and how that can be best achieved. Staff should not be advocating 'safety' measures that do not take account of individual well-being, as defined in Section 1 of the Care Act⁵ and the Care and Support Statutory Guidance under the Care Act 2014⁶
- 3.10 This section considers the different types and patterns of abuse and neglect and the different circumstances in which they may take place. This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour which could give rise to a safeguarding concern.
- **Physical abuse** – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
 - **Domestic violence** – including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence.
 - **Sexual abuse** – including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
 - **Psychological abuse** – including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
 - **Financial or material abuse** – including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

⁵ Details can be found at www.legislation.gov.uk for more information

⁶ Details can be found at [//www.gov.uk/government/publications](http://www.gov.uk/government/publications) for more information

- **Modern slavery** – encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
- **Discriminatory abuse** – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.
- **Organisational abuse** – including neglect and poor care practice within an Institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.
- **Neglect and acts of omission** – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.
- **Self-neglect** – this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Incidents of abuse may be one-off or multiple and affect one person or more.

4. Safeguarding awareness

- 4.1 The Association is committed to on-going safeguarding training and development opportunities for all workers, developing a culture of awareness of safeguarding issues to help protect everyone. All our workers will receive induction training and undertake recognised safeguarding training on a regular basis through our current provider: thirtyone:eight (formerly CCPAS). Safeguarding Training sessions are offered every other month in house and annually for DSO/Deputy DSO's.
- 4.2 The Association will also ensure that children and adults with care and support needs are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.

5. Responding to disclosure of abuse

- 5.1 It must be understood that a 'disclosure' has been made where a child/adults, voluntarily and without prompting, communicate that they have been, or are at risk of being abused.

- 5.2 It is the Association's policy to report all child 'disclosures', accurately, fully and promptly to the local Children's Services Department. The Association is not qualified to investigate the validity of such 'disclosures', hence its commitment to report all such 'disclosures'.
- 5.3 The reporting of adult disclosures must be done with due consideration to informed consent.
- 5.4 All staff in receipt of a 'disclosure' should act in accordance with the following guidance (Note: additional departmental guidance may be developed, as long as it is consistent with these guidelines): When receiving a 'disclosure' you should follow these guidelines:
- Accept what the child / adult says, keeping calm and looking at them directly.
 - Do not promise confidentiality.
 - Be aware that the child / adults at risk may have been threatened.
 - Reassure the child / adult they were right to tell you and that you are taking what they say seriously.
 - Where appropriate, let the child / adult know what you are going to do next and that you will let them know what the next steps are. Make detailed notes as soon as possible, writing down exactly what was said, by whom, and when it was said. Record dates and times of these events and, even if you subsequently write-up your notes in a neater format, keep your original hand-written record for future reference.
 - DO NOT ATTEMPT TO PROMPT OR ASK LEADING QUESTIONS AS THIS COULD COMPROMISE A CASE IF IT REACHES A COURT OF LAW.**
- 5.5 When an adult is making a disclosure, proportionality & informed consent needs to be applied.
- 5.6 In considering the protection of adults, staff should act in a proportionate manner, considering factors such as the extent of the vulnerability of the person concerned, the severity of the abuse and the prolonged nature of the abuse, before taking action.
- 5.7 It is a general legal principle that adults at risk of harm, as defined by the Care Act 2014, need to give their informed consent before staff should intervene in a situation in which an adult may be at risk, or before information held by the Association is passed on, or referred, to another agency.

- 5.8 There are exceptions to this however, such as when a crime has been committed, or when a judgement is made, based upon an informed risk assessment that the adult at risk of harm does not have the mental capacity to give consent. Also, when a judgement is made, based upon an informed risk assessment, that the adult at risk of harm is mentally ill and may be a danger to themselves or to others.
- 5.9 These examples are not exhaustive. Advice on how to proceed should be sought from the appropriate Designated Safeguarding Officer (or Deputy DSO).

6. What to do after you have received a disclosure

- 6.1 For Children - Do not delay. (In the case of an adult at risk of harm– consider proportionality & informed consent, see section 5 above)
- 6.2 Inform your Line Manager (who will inform the DSO) or, in their absence, go direct to the Designated Safeguarding Officer (or Deputy DSO).
- 6.3 The Designated Safeguarding Officer (or Deputy DSO) will provide advice on how to proceed which will in most cases will be a referral to the local Children's Services Department (or Adult Social Services). A **Safeguarding Concern Report** (see Appendices) should be completed within 24 hours.
- 6.4 However, if you are unable to reach your Line Manager or the Designated Safeguarding Officer (or Deputy DSS), or you are not confident in the Association's ability to act appropriately, you should contact the relevant local authority Children's Services Department (or Adult Social Services) yourself. The Association is professionally responsible in placing the welfare of children / adults at risk over and above its own reputation or standing in the community.
- 6.5 In the absence of the DSO/Deputy DSO, you are permitted to call thirtyone:eight (formerly CCPAS) to get advice from their helpline on 0303 003 1111. The Association has an Information Sharing Agreement in place which will generate a duplicate copy of the email advice sent to the Lead DSO.
- 6.6 **Do not discuss the concern** with anyone other than:
- your Line Manager
 - Designated Safeguarding Officer (or Deputy DSO)
 - Chief Executive Officer (only if there is a concern about one of the DSO's)
 - appropriate individual(s) within the Children's Services Department (or Adult Social Services)
 - Police
 - Thirtyone:eight Helpline (formerly CCPAS)
 - Chair of Board (only if there is a concern about the Chief Executive Officer)

- 6.7 **Confidentiality is vitally important.** For the protection of the child/ adult at risk, as well as for the parent(s)/ carer, and to preserve the quality of evidence, the parent(s)/ carer must not be informed of the 'disclosure' without authorisation from the relevant local authority Children's Services Department (or Adult Social Services) or the Designated Safeguarding Officer.

7. Dealing with a suspicion or concern about abuse

- 7.1 If a 'disclosure' has not been made, but you are nevertheless concerned by what you observe or hear, you should act on your 'suspicion' in accordance with the following guidance:
- Discuss with your line manager the nature of your concerns.
 - Keep a log of your concerns as this may create a pattern to the occurrence.
 - Sensitively ask the child / adult at risk (or parent / carer if appropriate) questions that, in as far as possible, do not draw attention to your concerns.
 - If your concerns are alleviated by what you hear continue to monitor. If you remain concerned, take action; speak to your line manager or contact the DSO.
- 7.2 The decision to complete a **Safeguarding Concern Report** (see Proforma in appendices) and to inform the local Children's Services Department (or Adult Social Services), should be taken and advice sought from your line manager of the Designated Safeguarding Officer (or Deputy DSO).

8. Safeguarding concerns regarding staff members or contractors

- 8.1 If a staff member or external provider using our facilities is accused or suspected of abuse against a child / adult at risk, the Association will act professionally, promptly and decisively to remove them from duty or exclude them from the premises, so as to protect the interests of both child/ adult at risk and the person accused, until an investigation is completed.
- 8.2 All allegations of abuse regarding staff should be immediately reported to the appropriate Designated Safeguarding Officer, the Head of HR & Ethos, and to the relevant LADO within one working day (Note: Contact the Social Services Emergency Duty Team, out of normal LADO working hours). In the event that an allegation of abuse is made against one of the Association's Designated Safeguarding Officers (or Deputy DSO's) this must be referred immediately to the Chief Executive Officer (or Head of HR & Ethos). In the event that an allegation of abuse is made against the Chief Executive Officer this should be reported to the Chairperson of the Board of Trustees.

- 8.3 Where a member of staff is under investigation for the alleged abuse of a child / adult at risk, he/ she may be subject to the provisions of the Staff Disciplinary Procedure following guidance from the relevant Local Authority Designated Officer (LADO).
- 8.4 In order to protect the child/ adult at risk, and to support the worker, the individual will generally be suspended on full pay and without prejudice, to allow time and space for the allegation to be fully investigated. The Association will suspend the individual(s) at the earliest opportunity, having consulted with the Local Safeguarding Board and/ or Police. During this time of suspension, the staff worker member must, as a condition of employment, co-operate reasonably with the investigating process and comply with any reasonable restrictions on their contact or communications with the Association's staff or service users until such time as the investigation is completed.
- 8.5 The Association will provide without prejudice, the individual under investigation with an appropriate 'peer support' to accompany them through the process.
- 8.6 In the event of dismissal or resignation of a staff member as a result of safeguarding concerns (including abuse and neglect either deliberate or for any other reason including competence issues) the appropriate Designated Safeguarding Officer will refer the conduct of that staff member or volunteer to the Disclosure and Barring Agency. Compromise agreements will not be used in situations such as this to exit staff from the organisation.

9. Safer recruitment, induction and training

- 9.1 The Association will take reasonable steps during the recruitment process to ensure that staff undertaking work on behalf of the organisation are suitable individuals to work with children / adults at risk, including the requirement to have an appropriate Disclosed and Barring Service check (level dependant on duties) prior to commencing work.
- 9.2 As part of safer recruitment practice the Association will:
- Explore the experience of applicants, of working with or having had contact with children / adults at risk, before appointment.
 - Give adequate time post-interview to fully explore the professional working background of all successful applicants.
 - Obtain a complete career history, detailing what applicants were doing, from when and to, and with what organisation. Applicants must give a satisfactory explanation for any and all gaps.
 - All applicants will be asked self-declaration 'recruitment housekeeping' questions, to declare if they have any criminal convictions or cautions. Failure to disclose relevant information in sufficient detail will be treated as a 'breach of trust'.

- Successful applicants for positions will be required to produce any relevant certificates of qualification prior to confirmation in post.
- A minimum of two acceptable references are required. One must be from the applicant's current or most recent employer. All reference requests will include a copy of the Job Description/ Person Specification. Generic or applicant presented references will not be accepted, nor will incomplete previous employer references.
- Where any doubt about the completeness of references is perceived, a verbal reference must be sought. Offers of employment are conditional on obtaining suitable references and may be withdrawn.
- Safeguarding children/ adults at risk training is provided to staff during induction (including a copy of this Policy) and through departmental training and group-wide courses to equip them with the skills and knowledge to safeguard the children / adults at risk in their care.

10. The Disclosure & Barring Service

- 10.1 Depending on their role, all staff working with children / adults at risk are required to complete one of the following Disclosure and Barring Service (DBS) checks:
- Standard DBS
 - Enhanced DBS
 - Enhanced DBS with list checks
- 10.2 Advice about the type of DBS check required for each role can be obtained from the Head of HR & Ethos.
- 10.3 All employment situations which involve work with children / adults at risk are exempt from the Rehabilitation of Offenders Act 1974, therefore, all convictions which relate to children and vulnerable adults, however old the conviction, must be declared by applicants. Information about other criminal convictions must also be declared, as these may be relevant to the suitability of an applicant.
- 10.4 Successful applicants that have a criminal conviction and / or narrative comments on their DBS checks will be risk-assessed for their suitability for work, by the Association's DBS panel, prior to being confirmed in employment.
- 10.5 Disclosure and Barring Service checks should be repeated for each staff member every 3 years.
- 10.6 All staff must immediately fully disclose to their line manager, if they are arrested or charged with a criminal offence or receive a criminal caution or conviction. Failure to do so may be treated as a disciplinary matter.

- 10.7 Where there is significant evidence of a staff member displaying dangerous, neglectful or illegal behaviour relating to children / adults at risk, the appropriate authorities will be notified, and concerns reported to the Local Authority Designated Officer for the area where the service is based. In such instances a referral to the Disclosure and Barring Authority will be considered by the relevant Designated Safeguarding Officer.
- 10.8 Where there is any concern over safeguarding practice, compromise agreements will not be used to exit employees from the YMCA, nor will generic or 'employee bearer' references be issued to any such staff leaving the Association.
- 10.9 A separate **DBS Procedure** provides more process detail.

11. Line management and supervision

- 11.1 As an Association, we are committed to supporting all staff and ensuring they receive support and appropriate supervision relevant to their role.
- 11.2 Managers are expected to provide regular supervision & support for staff as a means of protecting children / adults at risk, developing transparent accountability and identifying training and development needs.
- 11.3 All staff should have a clear understanding of their duties, with clear reporting lines that enable them to seek clarity when needed and hold them accountable for their performance and actions.
- 11.4 Line managers/ supervisors will ensure work is managed on a day-to-day basis in ways that protect both children/ adults at risk and staff, ensuring neither are placed in unreasonable positions of vulnerability.
- 11.5 Line managers and staff should be mindful of The Home Office issued guidance on the 'Abuse of Trust - caring for young people and the vulnerable: Guidance for preventing abuse of trust'. This guidance is intended to apply to those caring for young people or adults with care and support needs in both paid and unpaid work, including volunteers, regardless of whether they are in the public, private, voluntary or volunteering sectors. In order to avoid power imbalances, it is important to encourage a culture of mutual respect and also challenge throughout the Association. This will also help prevent situations that may be perceived as coercive and controlling.

12. Other relevant Association / departmental policies

- 12.1 Safeguarding issues may be dealt with in other Association or departmental policies / procedures, provided that they are consistent with the content of this Safeguarding Policy.

13. Whistle Blowing

- 13.1 Staff may also consider the use of the Association's **Whistle-Blowing Policy** where they have serious safeguarding concerns regarding the behaviour, actions or lack of actions by volunteers, trustees or another staff member.

14. Confidentiality

- 14.1 Children have the right to confidentiality unless the Association considers that they are at risk of serious harm.
- 14.2 Adults over the age of 18 generally have the legal right to confidentiality, and to give their informed consent that information about them can be shared. There are exceptions to this where individuals are deemed to be particularly vulnerable (see Section 4.1.2 above).
- 14.3 Any information recorded regarding safeguarding issues must be stored securely and every effort made to maintain confidentiality.
- 14.4 Details of any suspected abuse should only be discussed with those staff and external agencies that is appropriate and necessary to do so.
- 14.5 A **Safeguarding Concern Report** (see Proforma in section 7) should be used for recording all 'disclosures' of abuse across the association's services and provided to the Designated Safeguarding office within two working days of the disclosure. In the situation of 'suspected' abuse the requirement to complete a **Safeguarding Concern Report** should be made in discussion with and on the advice of the Designated Safeguarding officer (or Deputy DSO).

15. YMCA Black Country – General Code of Conduct

- 15.1 The Association takes steps to minimise situations where a staff member may knowingly or unwittingly place themselves at risk by having a clear code of conduct for all staff. These guidelines are outlined below.

- 15.2 **Lone working:** Staff need to ensure that they plan their work so that they are not left completely alone with a child / adult at risk and/or where there is little or no opportunity of the activity or piece of work being undertaken to be observed by others. This may require groups to work within the same large room or work in adjoining rooms with the door left open where possible. It is however recognised that some lone-working situations are unavoidable. In these exceptional situations, managers should train their staff to follow the departmental Lone Working Policy, implementing appropriate procedures and risk assessments to avoid placing children / adults at risk or staff at risk. Such departmental policy/procedures should be approved by the appropriate Designated Safeguarding Officer.
- 15.3 **Meeting children/Young People for non-work purposes:** Staff should not meet a child/adult at risk (who receives services from the Association) away from the Association's premises without a parent/carer or other adult being present, and without informing their line manager. The report of any such meeting would be investigated and this could result in the member of staff being disciplined. Staff should be informed of the risks of 'grooming', and how to guard against it through foundational level safeguarding training.
- 15.4 **Supervision of under 8's:** Children under eight years of age are not permitted to move around any Association premises unless supervised by their parents or as part of an organised activity.
- 15.5 **Taking Children off-site:** Any group of children which leaves the Association's premises should be accompanied by no fewer than two adults (ideally both male and female for mixed gender groups). Ofsted-registered services must comply with the worker/ child ratio requirements. Where children have to be transported by minibus or car, the Association will, as far as possible, arrange to have more than one staff member in the vehicle (see 'Lone Working' section above).
- 15.6 **Working with external Children's groups:** All external groups who use the Association's facilities will be required to comply with the Association's minimum standards for the safeguarding of children. In particular:
- The organiser should have an up to date DBS and these details must be provided to the Association's appropriate Designated Safeguarding Officer if requested.
 - Contact details must be provided of the person(s) responsible for safeguarding children on behalf of their group.
 - Children aged under eight years of age must remain the full responsibility of their parent/ carer for the full duration of each and every activity.

- External groups should make clear that, though they use the Association's facilities, they do so without the Association accepting any responsibility or liability for any of their activities or the standards of care that they provide towards their group participants.

15.7 **Mobile Phones / Cameras:** Staff should not carry personal mobile phones or cameras on their person whilst undertaking any duties working directly with or supervising children unless necessary for communication. Nursery staff must abide by their settings Mobile Phone Policy and not have their personal mobile phone on their person at any time whilst working in the nursery settings.

All Association staff and Volunteers must abide by the individual service Mobile Phone policy and in accordance with the Employee Staff handbook.

15.8 **Contractors on YMCA Premises:** As a general principle (i.e. other than in emergency situations) all contractors undertaking work on behalf of the Association must ensure that their staff have clear, current DBS Checks. Where contractors wish to employ staff that do not have a clear and current DBS, this must be referred to the appropriate Designated Safeguarding Officer for risk assessment as to the person's suitability to work at the Association's premises.

15.9 **Relationships with service users:** Staff must maintain a professional relationship with Service Users always. It is essential that you do not form a sexual or close personal relationship with Service Users or Residents of the YMCA. To allow your relationship to develop beyond the boundaries of a professional one could be an abuse of your relationship with the Service User or resident. A breach of professional boundaries may lead to disciplinary action being taken against you and in serious instances could lead to dismissal. The Association has the following expectations of all staff:

- a. Staff must not initiate or respond to any unprofessional physical contact towards or from Service Users. This includes contact that may be perceived as sexual, that may cause harm or reasonably be perceived as threatening. All contact should be within the boundaries of what is considered fair and reasonable in the circumstances.
- b. Staff must not disclose any personal information to Service Users relating to yourself or relating to other colleagues including personal phone numbers or addresses. You should not take a Service User into your own home.
- c. Staff must not lend or make personal gifts to a Service User. Where the Association would normally give money to Service Users, you may do so within the confines of your delegated authority making it clear that the money is given on behalf of the Association.
- d. Staff must not borrow money or property from a Service User or buy from or sell property to a Service User.

- e. Staff must not assist any Service User outside of normal hours without the prior consent of your Line Manager.
- f. Staff must respect the dignity, independence and the rights of the Service User to take risks and to make informed choices regarding their own care and welfare.

15.10 **Use of internet social networking sites:** In accordance with Safeguarding Children legislation and guidance and Data Protection legislation, you are not permitted to publish photographs of children who are in the care of the nursery, or of children that you may come into contact in the course of your work activities without the signed expressed permission or the parent or legal guardian. Breach of these rules may lead to disciplinary action, and if failure to follow this policy leads to a serious detriment in respect of any individual or the Association, you may be dismissed for gross misconduct. If you are unsure about your obligations under this policy, or wish to discuss this in more detail, please speak to your Line Manager.

16. Appendices

Concerned About Potential Child Abuse?

[Emotional / Physical / Neglect / Sexual / Financial]
See Safeguarding Policy Section 3 for definitions

Act Now - Do Not Delay
NOTE: If you feel a Child is in immediate risk of harm, call the police on 999

Has the child voluntarily and without prompting, communicated that they have been, or are at risk of being abused?

YES
You are dealing with a **Disclosure**, see Section 5 of the Safeguarding Policy
Do not prompt or ask leading questions. Discuss with your line manager.

No
You are dealing with a **Suspicion**, see Section 7 of the Safeguarding Policy
Sensitively ask open questions. Keep a log of your concerns. Discuss with your Line Manager

Immediately

Still Concerned?

If your DSO/Deputy DSO is unavailable you may contact any DSO/Deputy for advice.	Designated Safeguarding Officer	Deputy Designated Safeguarding Officer
Enterprise Cafés, Enterprise Units, Gyms	Jo Goldie Chief Operations Officer (Programmes) 01902 371550 or 07921 435492	Melanie Braden Head Of Nurseries and Quality 07736 880193
Housing Housing, Shops	Sally Cowan Chief Operations Officer (Housing) & Lead DSO - 07801 372600	Rachael Taylor Supp. Lodgings Manager 07854 928988
Skills & Community Employability, Talent Match, Health & Wellbeing, Substance Misuse Recovery etc.	Jo Goldie Chief Operations Officer (Programmes) 01902 371550 or 07921 435492	Louise Kumar Head of Skills & Community 01922 700954 / 07935 504423
HR & Ethos and Corporate Services	Sally Cowan Chief Operations Officer (Housing) & Lead DSO - 07801 372600	Melanie Braden Head Of Nurseries and Quality 07736880193
Childcare	Sally Cowan Chief Operations Officer (Housing) & Lead DSO - 07801 372600	Melanie Braden Head Of Nurseries and Quality 07736 880193

Can't contact DSO/Deputy DSO or still concerned?

If you are unable to contact the DSO or Deputy DSO or are not confident of YMCA's ability to respond, discuss your concern with the Duty Social Worker for your area. You can also call thirtyone:eight (formerly CCPAS) to get advice on their helpline on 0303 003 111.						
	Birmingham	Dudley	Sandwell	South Staffs	Walsall	Wolverhampton
Working Hours	0121 303888	0300 5550050	0121 5693100	08001313126	0300 5552866	01902 555392
Out of Hours	0121 6754806	0300 5558574	0121 5613100	0845 6042886	0300 5552922/2836	01902 552999
Say that you have a Child Protection issue. Have all the relevant information ready (names, contacts, dates etc.) The Duty Social Worker will advise you of any further action required. Follow up your concern in writing. Keep accurate records (sign, date, keep secure, including original notes.)						

REMEMBER: The Child's safety is the overriding concern

Concerned About an Adult at Risk?

[Emotional / Physical / Neglect / Sexual / Financial]

See Safeguarding Policy Section 3 for definitions

Act Now - Do Not Delay
 NOTE: If you feel an Adult at Risk is in immediate risk of harm, call the police on 999

Has the Adult at Risk voluntarily and without prompting, communicated that they have been, or are at risk of being abused?

YES

You are dealing with a **Disclosure**, see Section 5 of the Safeguarding Policy
 Do not prompt or ask leading questions

No

You are dealing with a **Suspicion**, see Section 7 of the Safeguarding Policy
 Sensitive ask open questions. Keep a log of your concerns. Discuss with your Line Manager

↓
Immediately

↓
Still Concerned?

If your DSO/Deputy DSO is unavailable you may contact any DSO/Deputy for advice.	Designated Safeguarding Officer	Deputy Designated Safeguarding Officer
Enterprise Cafés, Enterprise Units, Gyms	Jo Goldie Chief Operations Officer (Programmes) 01902 371550 or 07921 435492	Louise Kumar Head of Skills and Community 01902 371550 or 07935 504423
Housing Housing, Shops	Sally Cowan Chief Operations Officer – Places & Lead DSO 01902 371550 or 07801 372600	Rachael Taylor Supported Lodgings Manager 0121 5241950 or 07854 928988
Skills & Community Employability, Talent Match, Health & Wellbeing, Substance Misuse Recovery etc.	Jo Goldie Chief Operations Officer (Programmes) 01902 371550 or 07921 435492	Louise Kumar Head of Skills and Community 01902 371550 or 07935 504423
HR & Ethos and Corporate Services	Sally Cowan Chief Operations Officer (Housing) & Lead DSO - 07801 372600	Melanie Braden Head Of Nurseries and Quality 07736880193
Childcare	Sally Cowan Chief Operations Officer (Housing) & Lead DSO - 07801 372600	Melanie Braden Head Of Nurseries and Quality 07736 880193

↓
Can't contact DSO/Deputy DSO or still concerned?

If you are unable to contact the DSO or Deputy DSO or are not confident of YMCA's ability to respond, discuss your concern with the Duty Social Worker for your area. You can also call thirtyone:eight (formerly CCPAS) to get advice on their helpline on 0303 003 111.						
	Birmingham	Dudley	Sandwell	South Staffs	Walsall	Wolverhampton
Working Hours	0121 303 1234	0300 555 0055	0121 569 2266	0345 6042719	0300 555 2922	01902 551199
Out of Hours	0121 675 4806	0300 555 8574	0121 569 2355	0345 6042719	0300 555 2922	01902 552999
Say that you have a Safeguarding issue. Have all the relevant information ready (names, contacts, dates etc.) The Duty Social Worker will advise you of any further action required. Follow up your concern in writing. Keep accurate records (sign, date, keep secure, including original notes.)						

REMEMBER: The Adult and Risk's safety is the overriding concern

Safeguarding Concern Report

SECTION A – ‘This is information about you, the person filling in the form’	
Name & job role of person completing this report:	
Signature:	
Date of completing this report:	

SECTION B – ‘The basic information about the individual/s’
Name of child/ren or adult/s at risk (if an unborn baby please state this):
Age/date of birth if known (if an unborn baby please state expected due date):
Address (if known):

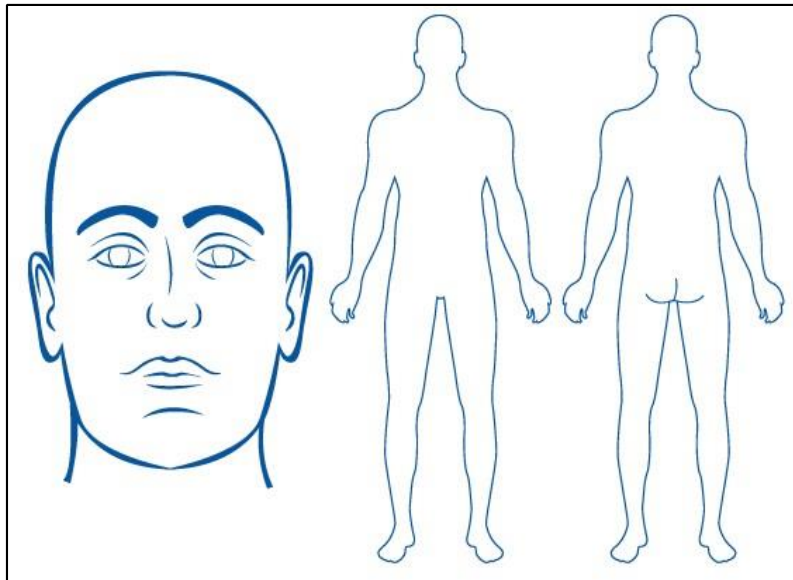
SECTION C – ‘This is where we talk about the issue’
Is this a Safeguarding; Concern <input type="checkbox"/> Incident <input type="checkbox"/> or Disclosure <input type="checkbox"/>

Description of the concern, incident or disclosure:	
Date concern was identified, or the incident/disclosure occurred:	
Time concern was identified, or the incident/disclosure occurred:	
Location where concern was identified, or the incident/disclosure occurred:	
Person(s) present when concern was identified, or the incident/disclosure occurred:	

SECTION D – ‘Only complete if applicable, for a young person under 16 or for an unborn child.’	
Name of person with parental responsibility (if known):	
Contact details for person with parental responsibility (if known):	
Has the concern, incident or disclosure been discussed with the person with parental responsibility?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date and time of discussion:	
Explanation/Response from person with Parental Responsibility:	

SECTION E – ‘Only complete if applicable to show any injury/suspected injuries.’

In the event of an injury/suspected injury please complete the diagram below, clearly marking where the injury is, and the size of the injury.



Please also describe the injury

Was medical advice required?
G.P Out of hours Surgery/Walk in Centre Pharmacist A&E
Other..... (Please state)

SECTION F – ‘This is where you detail what action has been taken as a result of the concern that has been identified, or the incident/ disclosure occurring.’

Description of the action taken:

SECTION G – ‘This is where we talk about other agencies already involved with the child/ren or adult/s at risk and who has been notified.’

What other agencies do you know of that are already working with the child/ren or adult/s at risk?

Which agencies has the concern, incident or disclosure been reported to?
(Agency/Date/Contact Person)

Any Other Relevant Information:

SECTION H – ‘This is where you note the outcome of any action taken’ (only complete if applicable – it might be too soon to have achieved an outcome)

What was the outcome of the action taken?

SECTION I – ‘This is about the person who receives the form from you.’

Name & job role of person receiving this report:	
Signature:	
Date:	

Original Report to be given to the YMCA Black Country Group Designated Safeguarding Children’s Officer immediately. A photocopy to be retained within the project. All information to be treated as Sensitive & Confidential.

Definitions of Additional Forms of Abuse

Significant Harm - This relates to the degree of harm that triggers statutory action to protect a child. It is based on the individual child's health or development compared to that which could reasonably be expected of a similar child. E.g. severity of ill treatment, degree and extent of physical harm, duration and frequency of abuse and neglect, premeditation. Department of Health guidance suggests that 'significant' means 'considerable, noteworthy or important.'

Children in Whom Illness is Fabricated or Induced (formerly known as Munchausen's Syndrome By Proxy) - This is a form of child abuse in which the parents or carers give false accounts of symptoms in their children and may fake signs of illness (to draw attention to themselves). They seek repeated medical investigations and needless treatment for their children. The government guidance on this is found in 'Safeguarding Children in whom Illness is Fabricated or Induced' (2002).

Domestic Violence - The shared Association of Chief Police Officers (ACPO), Crown Prosecution Service (CPS) and government definition of domestic violence is: 'any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults, aged 18 and over, who are or have been intimate partners or family members, regardless of gender and sexuality.' (Family members are defined as mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.)

In 2004 the Government's definition of domestic violence was extended to include acts perpetrated by extended family members as well as intimate partners. Consequently, acts such as forced marriage and other so-called 'honour crimes', which can include abduction and homicide, can now come under the definition of domestic violence.

The Government revised its definition of domestic violence and abuse in March 2013 as:

"Any incident or pattern of incidents of controlling coercive or 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." This can encompass, but is not limited to, the following types of abuse:

1. Psychological
2. Physical
3. Sexual
4. Financial
5. Emotional

"Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependant by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour."

"Coercive behaviour is: an act or a pattern of acts of assaults, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim."

Family members are defined as mother, father, son, daughter, brother, sister and grandparents whether directly related, in-laws or step-family. However, this is not an exhaustive list and may also be extended to uncles, aunts and cousins etc.

The Home Office (2009) *What is Domestic Violence?* London: Home Office defines domestic violence as:

“Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality”

Nearly a quarter of adults in England are victims of domestic violence. Although both men and women can be victimised in this way, a greater proportion of women experience all forms of domestic violence, and are more likely to be seriously injured or killed by their partner, ex-partner or lover. Forced marriage and honour-based violence are human rights abuses and fall within the Government’s definition of domestic violence.

Investigating complex (organised or multiple) abuse

This abuse may be defined as abuse involving one or more abusers and a number of children. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse.

Complex abuse occurs both as part of a network of abuse across a family or community, and within institutions such as residential homes or schools. Such abuse is profoundly traumatic for the children who become involved. Its investigation is time-consuming and demanding work, requiring specialist skills from both police and social work staff. Some investigations become extremely complex because of the number of places and people involved, and the timescale over which abuse is alleged to have occurred. The complexity is heightened where, as in historical cases, the alleged victims are no longer living in the setting where the incidents occurred or where the alleged perpetrators are also no longer linked to the setting or employment role. (Working Together 2010 Sections: 6.10 – 6.11)

Sexually exploited children and young people

The Sexual Offences Act 2003 introduced a number of new offences to deal with those who sexually exploit children and young people. The offences protect children up to the age of 18 and can attract tough penalties. They include:

- paying for the sexual services of a child;
- causing or inciting child prostitution;
- arranging or facilitating child prostitution; and
- controlling a child prostitute.

Child Sexual Exploitation

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

With regards to the addressing sexual exploitation of children at a more international level, the Interpol has also specified as list of appropriate terminology when referring to sexual crimes against children.

Female Genital Mutilation (FGM)

The World Health Organization defined FGM as all procedures involving partial or total removal or stitching up of the female genitalia or other injury to the female genital organs whether for cultural or other non-therapeutic reasons.

Working Together (2018) states that:

“Female genital mutilation (FGM) is a collective term for procedures which include the removal of part or all of the external female genitalia for cultural or other nontherapeutic reasons. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life. The procedure is typically performed on girls aged between four and thirteen, but in some cases FGM is performed on new born infants or on young women before marriage or pregnancy. A number of girls die as a direct result of the procedure from blood loss or infection, either following the procedure or subsequently in childbirth.”

FGM has been a criminal offence in the UK since the Prohibition of Female Circumcision Act 1985 was passed. The Female Genital Mutilation Act 2003 replaced the 1985 Act and made it an offence for UK nationals or permanent UK residents to carry out FGM abroad, or to aid, abet, counsel or procure the carrying out of FGM abroad, even in countries where the practice is legal.

A mandatory reporting duty for FGM requires regulated health and social care professionals and teachers in England and Wales to report known cases of FGM in under 18-year-olds to the police. The FGM duty came into force on 31 October 2015.

Breast Ironing in the UK

Concerns have been raised that breast ironing is also to be found amongst African communities in the UK, with as many as a 1,000 girls at risk. Keeping Children Safe in Education (2016) mentions breast ironing on page 54, as part of the section on so-called ‘Honour Violence’. Staff worried about the risk of breast ironing in their organisation should speak to the Designated Safeguarding Lead as soon as possible. Associations need to know the risk level within their communities and tackle the risk as appropriate.

Summary of Amendments V10 to V11

Page 5 Section 2 - Roles and Responsibilities contact details updated.

Page 24 Appendices 16.1 Flowchart (Child Abuse) contact details updated.

Page 25 Appendices 16.2 Flowchart (Adults at Risk) contact details updated.