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1. Introduction

YMCA Robin Hood Group aims to ensure that all children and young people are welcomed into a safe, caring, and trusted environment where safeguarding is taken seriously, and any concerns or issues are dealt with appropriately.

All children and young people have the right to be protected from abuse and neglect regardless of their age, gender identity, disability, culture, language, racial origin, religious beliefs, sexual orientation, personality, or lifestyle.

RHG is committed to:

Ensuring that the welfare of the child or young person is paramount and that all those who work directly with or have regular access to children and young people are familiar with the contents of this policy and are offered support and on-going training.

Appropriately vetting and screening all staff, casual workers and volunteers who work with children and young people.

Ensuring that full consideration is given to the appropriateness of venues and locations to carry out safe and enjoyable activities.

Working with appropriate statutory agencies where there are allegations or suspicions of abuse.

Treating all suspicions and allegations of abuse seriously.

Implementing, maintaining, and regularly reviewing procedures and guidelines.

Providing a range of high quality and safe provisions for children and young people

2. Purpose of this Policy and Procedure

- To set out the principles underpinning the Group's approach to the safeguarding of children
- To assist staff, casual workers, and volunteers through the process of safeguarding children
- To define the different types of abuse and identify associated signs, recognising that this will not include every potential area of abuse.
- To set out a clear procedure for employees and volunteers who suspect possible abuse.
- To set out a clear procedure for dealing with staff, casual workers or volunteers who are suspected of harming a child.

- To provide a framework for vetting, training, and supporting those who work with children and young people.
- To ensure we meet our legal obligations in terms of The Counter Terrorism and Security Act 2015, the Mental Capacity Act 2005, The Children Act 1989 and 2004, Working together to safeguard children 2018, Keeping children safe in education 2020.

3. FAO

When should you use this policy? – Immediately when you have a concern- we want you to report any concern you might have that

Who this policy and procedure meant for? - Staff, volunteers, and casual workers.

Who is being safeguarded within the policy and process? - Child-Anyone who has not yet reached their 18th birthday. 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, does not change their status or entitlements to services or protection. Young people with SEN are supported until the age of 25, our practice and policy this is covered within our Vulnerable Adults policy.

Who should you talk to as employee when you have a concern? - your line manager, any manager, People & Culture staff, or Designated Safeguarding officer. See contact details below.

Robin Hood Group Safeguarding Procedure

1. Internal Safeguarding Contact Details

Executive Safeguarding team

INTERIM Designated Safeguarding Officer: Jo Bradley – Fortune

Tel 07734952168

Email: rhqsafequarding@ymcarhq.orq

Chief Executive Officer: Craig Berens

Email: RHG safeguarding@ymcarhq.org Tel 07398386543 / 0115 9489829

People and Culture Senior designated safeguarding officer Email: Peoplesafeguarding@ymcarhq.org Tel 07398364378

What information would help the Safeguarding lead to make decision if to report to Local Area Designated Officer (LADO)?

- Date and Time of incident
- Date reported to Manager
- What is your concern
- Person's name and age
- Does it involve a staff member / volunteer and casual worker
- YMCA Department

A departmental designated safeguarding officer will contact LADO. Referrals to LADO should be made as soon as possible once a concern has been received and certainly no more than 24 hours later.

The Designated Safeguarding Officer <u>must</u> be informed of <u>all</u> referrals made by.

In the first instance, unless the concern relates to the behaviour or conduct of our employees or volunteers, any issues, concerns, questions etc regarding safeguarding children and young people should be referred to one of the following designated officers.

Children, Youth and Families:

Head of Children Youth and Families Tel 07852769847 CYFsafequarding@ymcarhg.org

Health, Wellbeing and Sports

ED Newark and Sherwood Tel 07939368820 <u>HWBsafeguarding@ymcarhg.org</u>

Therapeutic Residential Care:

Head of Service – TRCsafegaurding@ymcarhg.org

Operations Manager – trcsafeguarding@ymcarhg.org

Queens Registered Manager - queenssafequarding@ymcarhq.org

Poppies Registered Manager - poppiessafequarding@ymcarhq.org

Maythorne Registered Manager- maythornesafegaurdingymcarhg.org

Cornerstone – <u>cornerstonesafeguarding@ymcarhq.org</u>

White City Registered Manager- whitecitysafequarding@ymcarhq.org

Brooklands Registered Manager - <u>Brooklandssafequarding@ymcarhq.orq</u>

Hollydene Registered Manager - hollydenesafequarding@ymcarhq.org

Housing:

Nhousingsafeguarding@ymcarhg.org Tel 0787064038 or Tel 07857552300 shousingsafegaurding@ymcarhg.org Tel 07587 5522300

Human Resources:

Peoplesafeguarding@ymcarhq.org Tel 07398364378

If you cannot get in contact with your departmental manager please contact am member the executive leadership team – details on the intranet

Executive Leadership Team:

Designated Safeguarding officer – leadsafeguarding@ymcarhg.org

CEO- leadsafeguarding@vmcarhg.org

People safeguarding Lead - leadsafeguarding@ymcarhq.org

In the very unlikely event that none of the designated officers are contactable then, depending on where the child lives, a referral can be made to or advice sought from: -

2. External safeguarding contacts

Nottingham City Council - Childrens and Families direct 0115 876 4800 or e-mail candfdirect@nottinghamcity.gcsx.gov.uk

Out of hours/Emergency Duty Team - 0115 876 5600 / 0115 87610

Professional consultation Line - 0115 947 4249

Nottinghamshire County Council - Multi Agency Safeguarding Hub - 0300 500 80 90 or email www.nottinghamshire.gov.uk/MASH

Core hours.

08:30am - 5:00pm Monday, Tuesday Thursday

10:30am - 5pm Wednesday

08:30am - 4:30pm Friday

Outside of the core hours, and in an emergency, contact the emergency duty team (EDT) - 0300 456 4546

Nottinghamshire Police - 999 or 101

The NSPCC can also be contacted for advice or guidance on their free helpline - 0808 800 5000.

If a referral is made, then the Senior Designated Officer **MUST** be informed as soon as possible.

If an allegation or concern relates to a volunteer or member please see section 4b above.

Nottingham City Council

LADO email account - lado@nottinghamcity.gov.uk or Tel 0115 8764762

Or ask for safeguarding on 0115 950 5050

Nottinghamshire County Council

LADO Referrals – <u>lado@nottscc.gov.uk</u> Tel: 0115 8041272

LADO Strategic issues:

Service Manager, Safeguarding Children (Strategic) & LADO, Tel: 0115 9773921

Eva Callaghan - Schools, FE Colleges and Early Years (including nurseries & childminders), Tel: 0115 8041272.

East Riding

East Riding of Yorkshire
Early Help and Safeguarding Hub (EHaSH)
https://www.eastriding.gov.uk/living/children-and-families/childrens-social-care/support-and-protection-for-children/

Monday to Thursday 9am-5pm Friday 9am-4.30pm

Tel: (01482) 395500

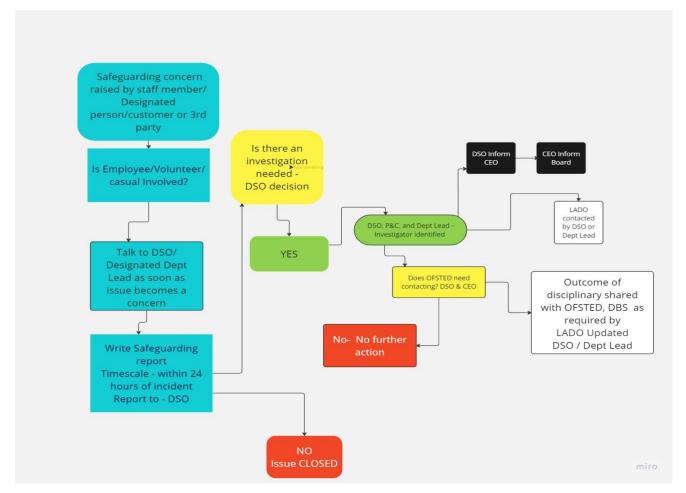
Email: childrens.socialcare@eastriding.gcsx.gov.uk

Outside of office hours, please contact the emergency duty team:

Tel: (01377) 241273

Email: emergency.duty.team@eastriding.gcsx.gov.uk

3. Reporting a concern flowchart



4. Staffing

4a. Selection and Vetting of Workers

All applicants for roles working with children will be subject to a thorough an OFSTED focused recruitment process including full completion of an application form, shortlisting by at least two panel members and interviewing by at least two staff / managers of which at least one must be trained in Safer Recruitment (covered by the internal Recruitment and Selection Workshop) and with questions covering safeguarding, motivation for working with children, forming appropriate relationships and professional boundaries, gaps in employment or education must be covered.

For those working in Childrens Residential Care additional "Warner" questions around emotional resilience, motivation; integrity and values;

authority; accountability; ethical standards and teamwork will also be covered as part of the recruitment process.

Thorough notes of all responses given is vital to ensure we have adequate evidence to make a safe, balanced recruitment decision.

Once conditionally offered a role or during the recruitment process, all staff, casual workers, volunteers, and trustees will be required to complete a criminal record declaration and a minimum of two written references will be requested and verbally verified. For those working directly with children, at least one of the references should be from the most recent setting where the applicant worked with children. Calls will be made to verify references. Where concerns are raised on a reference / declaration these will be discussed with the applicant, fully documented and could lead to the withdrawal of the conditional offer in discussion with HR.

An Enhanced Disclosure and Barring Service (DBS) Disclosure with a Check of the Barred List for Children and Young People or a check via the DBS Update Service will be undertaken for all staff casual workers and volunteers who have unsupervised, close, or substantial access to children. We are a charity that works with children, young people, and adults at risk, therefore all trustees will also be subject to an Enhanced Disclosure and Barring Service (DBS) Disclosure.

It is a criminal offence to allow someone to work with children and young people if they are barred from doing so.

Currently, in very exceptional circumstances new starters offered posts with unsupervised or substantial access to children <u>may</u> be allowed to start work, subject to strict supervision and the full completion of a risk assessment form (available from People and Culture) prior to a DBS clearance being received. This risk assessment must include two verified satisfactory references and be discussed with and agreed by People and Culture and the Lead designated safeguarding officer or the Chief Executive Officer, or in their absence one of the other departmental designated officers and, <u>before</u> a date of commencement is agreed.

As appropriate, DBS disclosures / checks of the DBS Update Service will be repeated during employment. For those working directly with children and young people this will be on at least a three-yearly basis. Refusal to comply could be grounds for dismissal. YMCA RHG – all staff working with children and young people must be signed up to DBS update service.

On an annual basis People and Culture team will ask staff and volunteers working directly with children and young people will complete a confidential annual declaration form regarding their ongoing suitability to continue working with children.

4b. Induction and Training

All staff, casual workers and volunteers will receive basic training in safeguarding children and identifying and responding to evidence or suspicions of abuse. This training is included in the induction process for all staff and is then supplemented by formal training and individual supervision for those working with children. Ongoing safeguarding training will be provided throughout employment / volunteering as appropriate to the role.

All staff and volunteers can access:

<u>nottinghamcity.gov.uk/ncscb,nottinghamshire.gov.uk/nscb</u> http://nottinghamshirescb.proceduresonline.com,

for general advice and information regarding safeguarding children.

4c. Professional boundaries

All staff have a responsibility to maintain public confidence in their ability to safeguard the welfare and best interests of children. They should adopt high standards of personal conduct to maintain confidence and respect of the public and those with whom they work.

There may be times where an individual's actions in their personal life come under scrutiny from the community, the media, or public authorities, including about their own children, or children or adults in the community. Staff should be aware that their behaviour, either in or out of the workplace, could compromise their position within the work setting in relation to the protection of children, loss of trust and confidence, or bringing the employer into disrepute.

The Childcare (Disqualification) Regulations 2018 set out grounds for disqualification under the Childcare Act 2006 where the person meets certain criteria set out in the Regulations. For example, an individual will be disqualified where they have committed a relevant offence against a child; been subject to a specified order relating to the care of a child; committed certain serious sexual or physical offences against an adult; been included on the DBS children's barred list; been made subject to a disqualification order by the court; previously been refused registration as a childcare provider or provider or manager of a children's home or had such registration cancelled. A disqualified person is prohibited from providing relevant early or later years childcare as defined in the Childcare Act 2006 or being directly concerned in the management of such childcare. Schools and private childcare settings are also prohibited from employing a disqualified person in respect of relevant early or later years childcare.

RHG Professional boundaries are that staff must:

- Maintain professionalism in their conversations, language, and conduct.
- Maintain appropriate dress and personal appearance when working with children and young people (this includes not getting changed in front of children or young people)
- Not undertake other work e.g., babysitting services, childminding etc for children / young people who are receiving services from us or attending our provisions.
- Never disclose their home address or personal phone numbers, share information about their personal lives, arrange to meet children, young people or their parents socially or allow access to their personal social networking sites, online messaging systems or other digital social messaging platforms
- Never start a personal relationship with a young person or child receiving our services or accessing our schemes. In posts working directly with children and young people any potential relationship with a young person who has previously accessed our provisions should be discussed with the line manager and formally declared.
- In the interests of transparency, all pre-existing relationships <u>must</u> be declared to the line manager and on a declaration of interest form, submitted to HR.
- Pre-existing on-line relationships e.g., Facebook friends <u>must</u> be declared and, where appropriate should be stopped whilst the child is in receipt of our services and for 6 months afterwards.
- Not accept personal gifts from the children or give gifts to them. Please see section 2.8 of the Association's Code of Conduct for more information and clarification.

4d. Barring and Criminal Offences

Employees / volunteers who, whilst employed or volunteering with us in any capacity, become barred from working with children and / or adults at risk must inform their manager and People and Culture immediately so that appropriate action (which may include redeployment or dismissal) can be taken. Failure to inform will result in dismissal.

If an employee or volunteer is facing criminal charges or is convicted of a criminal offence, they <u>must</u> inform their manager and People and Culture immediately so that appropriate action (which may include redeployment or dismissal) can be taken. Failure to inform will result in dismissal.

Employees / volunteers should also inform managers of any other concerns about themselves that could impact on their suitability to work with

children/young people. For example, if they or their partner are subject to child protection or safeguarding enquiries in relation to their own children.

Responsibilities

It is the responsibility of everyone:

- to be familiar with this Policy and Procedure, to reread it annually and to also be aware of the
- Whistleblowing Policy and procedure
- to ensure the wellbeing of the children and young people with whom they work
- who receive an allegation or disclosure of abuse from any source, or who suspect abuse, to report their concerns to their line manager and / or a departmental designated safeguarding officer. (if an allegation or suspicion of abuse involves or implicates the line manager or designated officer, they must inform a different designated officer or Designated Safeguarding Officer)
- to be aware of contextual safeguarding in recognising that children are exposed to many influences outside of their family and that professionals working with children need to be proactive and alert to these influences and ensure that their own professional influence is positive and wholesome.

Manager and Departmental Designated Safeguarding Officers:

- to ensure that safeguarding is a standing agenda item at Pulse/team meetings and 121 meetings and to create a culture where concerns are raised early and openly, where safeguarding is always considered, and staff and volunteers can learn good practice from each other.
- receive allegations to refer the concerns to the appropriate bodies as appropriate, informing the Designated Safeguarding Officer and maintaining confidential record to report safeguarding concerns and issues to the senior safeguarding officer as soon as possible for advice, support and monitoring, although responsibility for investigating and dealing with the issue remains with the line manager / designated officer.
- to ensure that staff and volunteers are aware of and comply with this Policy and Procedure and that they receive training appropriate to their role –
- to review the policy at least annually for formal approval by the Board of Trustees
- to liaise with the Local Authority Designated Officer (LADO) if allegations relate to staff or volunteers before progressing the issue
- to make any required referrals to the Disclosure and Barring Service (DBS) post investigation completion

The Chief Executive Officer:

- to escalate serious incidents to the Charity's Commission
- to escalate serious and report to the nominated board member for Safeguarding
- to provide guidance and leadership in the absence of the Designated Safeguarding Officer
- to inform Ofsted if appropriate
- to inform DBS if appropriate)

The Board of Trustees

 to ensure that there is a safe and trusted environment, an organisational culture that prioritises safeguarding, a robust policy and procedure for safeguarding children and young people and to monitor safeguarding issues at each Board meeting.

5Allegations / Suspicions of Abuse 5a. Referrals and concerns

A child, a young person, a colleague, relative or member of the public may disclose to a member of staff or volunteer, information about an incident or incidents that could be construed as abuse. They must listen to and record exactly what is said, encouraging them to speak without asking questions directly as far as possible about the incident itself, other than clarifying basic factual details. They may ask if the person is injured in case immediate medical treatment is required. Every allegation must be recorded and reported to a designated officer, whether the staff member/volunteer hearing the allegation believes it is well founded.

YMCA staff who are school based, must firstly notify a YMCA departmental designated safeguarding officer and then inform the school of the actions taken.

If a member of staff or volunteer suspects abuse, it is their responsibility to report their concerns to a YMCA designated officer or their line manager who will then report the issue immediately to one of the designated officers.

They should give as much detail:

- Nature of their concerns
- Time
- Place
- Content
- People involved

Grounds for suspecting that abuse is occurring may also be based on personal knowledge of the child/young person and observations of changes in their mood, behaviour, or personal presentation, as well as evidence of injury or disclosure. These indicators should be reported to a designated officer and recorded in detail.

The departmental safeguarding designated officer will document the full details of the situation and refer to the threshold to pathway provision making further enquiries, if necessary, to ensure that the child or young person is protected from any further harm while the appropriate authorities are informed. They will also notify the Designated Safeguarding Officer as soon as possible of the issue. Where risk of harm is suspected, the manager/designated officer will take further steps to protect that child/young person from further harm.

https://www.nottinghamshire.gov.uk/care/childrens-social-care/nottinghamshire-children-and-families-alliance/pathway-to-provision#:~:text=The%20Pathway%20to%20Provision%20%5BPDF,appropriate%20service%20to%20provide%20support.

If there is not an immediate explanation, the suspicion that abuse has occurred must be referred to Children's Social Care at the City or County Council by one of the departmental designated safeguarding officers. The Designated Safeguarding Officer MUST be informed at this stage if not previously

If the departmental designated safeguarding officer decides, after investigation, that a referral is not required (for example independent witnesses to an accident) the incident must still be fully documented, and the Designated Safeguarding Officer informed.

Staff and Volunteers can report social care agencies if they feel the concerns warrant a referral even if they are not in agreement with the managers decision not to make a referral.

If staff/volunteers believe that a child/young person has injuries or requires medical attention, they should be supported in gaining access to emergency treatment. The clinical staff should be informed of the nature of the suspicions about the source of the injury so that they can take steps to ensure that potential evidence is not destroyed or compromised.

5b. Concerns regarding employees, casual workers, or volunteers

If any concerns or allegations relate to an employee, casual worker or volunteer, the Designated Safeguarding Officer must be informed <u>immediately</u> and they, the Chief Executive Officer, or the Head of People,

will consult the Local Authority Designated Officer (LADO) at Nottingham City or Nottinghamshire County Council <u>prior</u> to any action and before the employee / volunteer is informed. This is to ensure that child protection processes and any criminal investigations are not compromised. In the absence of all these YMCA managers, this contact should be made by the appropriate designated officer and, in either case, must be done within one working day of being advised of the concern.

If such an allegation is received out of office hours that requires immediate attention, then the Designated Safeguarding Officer / Chief Executive Officer or departmental designated safeguarding officer should consult the Childrens Social Care Emergency Duty Team or the local police and then inform the LADO.

Once the investigation / hearing is concluded Ofsted will be advised of the outcome. If the employee is working in an Ofsted regulated service, then Ofsted will be informed of the nature of the allegations and the action we are taken. Notification (Regulation 40 of the children's homes regulations 2015) to Ofsted will be by one of the departmental safeguarding designated Officers or Designated Safeguarding Office.

An allegation against an employee / volunteer could come from several sources including a report from a child, a concern from a colleague or a complaint by a parent. It may also arise from the volunteer's / employee's life outside work.

When a departmental designated staff member/ employee becomes aware or is informed of a concern or allegation against an employee / volunteer some discreet enquiries can be made but they must not investigate the matter with the child, parent, volunteer, employee, or witness. They should collect and write the details of the concern / allegation, which must be signed and dated by the person receiving or making the allegation. The departmental designated safeguarding officer will seek advice from the Designated Safeguarding Officer (DSO)/CEO or Head of P&C. Based on advice LADO must then be contacted and the allegations discussed with them. The LADO and reporting officer will consider how much information can be shared with the employee, whether a police investigation may be required, whether the child needs additional support, if anyone else needs to be informed and what the next steps will be.

We want to encourage staff and volunteers to feel confident about raising concerns about the actions and attitudes of colleagues and want to create an atmosphere of transparency, openness, shared good practice and professionalism. If a concern is raised but the individual does not believe it is being dealt with appropriately then the individual should speak to the Designated Safeguarding Officer or Chief Executive Officer or the Head of People and, if still not satisfied, should without fear of recrimination or

contact the MASH (contact details – page 6 of this policy) directly as per our whistleblowing procedure.

Employees and Volunteers of the Group must also read the organisations whistleblowing policy in line with this policy.

Staff and volunteers can also report anonymously to the NSPCC whistleblowing advice line on help@nspcc.org.uk or Telephone 0800 028 0285.

5. Other Groups using YMCA RHG Premises

When letting Group premises to individuals or organisations, the following clause will be included in letting agreements:

"The Licensee confirms that they are aware of the principles of safeguarding children, young people and vulnerable adults and have taken appropriate steps to ensure that people in those groups are not placed at risk".

6. Guidance when dealing with a Disclosure

General Points:

- Show acceptance / belief of what the child says (however unlikely the story may sound)
- Keep calm.
- Look at the child directly.
- Tell the child you will need to let someone else know don't promise confidentiality.
- Even when a child has broken a rule eg used the internet when told not to, they are not to blame for the abuse
- Be aware that the child may have been threatened or bribed not to tell.
- Never push for information. If the child decides not to tell you, then
 accept that and let them know you are always ready to listen and
 record immediately.

Helpful things you may say or show:

- I believe you (or showing acceptance of what the child says)
- Thank you for telling me.
- It's not your fault.
- I will help you.

Don't

- Say "Why didn't you tell anyone before?"
- Say "I can't believe it"
- Say "Are you sure this is true?"
- Ask "Why? How? When? Who? Where?"
- Make false promises.

- Probe or ask questions other than to clarify points made
- Never make statements such as "I am shocked, don't tell anyone else"
- Say you won't tell anyone else.

Concluding:

- Reassure the child that they were right to tell you and show acceptance.
- Let the child know what you are going to do next and that you will let them know what happens (we might have to consider referring to the Police – see Extreme Circumstances 7 below)
- Contact one of the designated officers directly or via your line manager as soon as possible.
- Consider your own feelings and seek appropriate pastoral support if needed whilst maintaining confidentiality.

Follow Up

- Make notes as soon as possible (preferably within one hour of being told), writing down exactly what the child said and when, what you said in reply and what was happening immediately beforehand (e.g., description of activity)
- Record dates and times of these events and when you made the record. Keep all hand-written notes securely, even if these have been typed subsequently.
- Report the discussion to your manager and / or one of the designated officers as soon as possible. If you are school based, then the person responsible for safeguarding in the school must also be informed.
- You must not discuss your suspicions, allegations or any disclosure with anyone other than those named in this policy.

8. Extreme Circumstances

A child may be in immediate danger due to extreme circumstances e.g., their life is at risk, they are likely to run away, they need urgent medical attention.

If this is the case, then call the Police and seek their advice or consult the Lead Designated officer or one of the other designated officers (see sections) as a matter of urgency.

9. Good Practice with Children and Young People

As a worker with children and young people you should act as an ambassador for Nottinghamshire YMCA and embody our core values of caring, honesty, respect, and responsibility in all that you do. We aim to

create an atmosphere of professionalism, support, caring and transparency where good practice can be shared, and concerns raised and resolved.

Except in very exceptional circumstances or when working in our Young People's Residential Provisions you should not be alone as the only worker with a group of children or young people where the activity cannot be seen. Special measures, permissions, risk assessments and checking procedures are in place in Young People's Residential Provisions to allow for lone working.

The Children Act 1989 recommends the following numbers of leaders to children according to their age:

- For 0 to 2 years 1 leader to every 3 children (1:3)
- For 2 to 3 years 1 leader to every 4 children (1:4) (1:5 from September 2023)
- For 3 to 8 years 1 leader to every 8 children (1:8)
- For over 8 years 1 leader for the first 8 children followed by 1:12
- In addition to these ratios, there should be at least two leaders for a group of any size, of any age.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment data/file/974907/EYFS framework - March 2021.pdf

If possible, have at least one self-identified male and one self-identified female if the group is mixed.

There are different agreed and approved guidelines for those working in Young People's Residential Provisions which must be adhered to. Staff working in Young People's Residential Provisions receive full training on those guidelines and receive regular support and monitoring in relation to them.

In a situation with a child or young person where privacy and confidentiality are important ensure that any meeting that takes place in a private setting, involves at least one other adult in close proximity who is aware that additional support is necessary. The child / young person should be made aware of their additional presence and any such meetings should be conducted under CCTV surveillance where possible.

You should treat all children and young people with respect and dignity befitting their age and always be sure to be mindful of your own language, tone of voice, body language and dress.

You should never encourage the use of alcohol, drugs, or tobacco or the watching /playing of violent films, games etc and you must never smoke or drink alcohol in front of the children or young people in your care and you

must be prepared to actively intervene to stop any inappropriate games / activities / conversations etc.

Where possible, make sure another adult is present if, for example, a young child has soiled their underclothes and needs to be washed, or needs medical attention.

Staff / volunteers must not use their own cars to transport children or young people except in **very** exceptional circumstances and only with the approval of their line manager <u>and</u> the senior designated officer or one of the designated officers. When driving any children or young people in Group owned vehicles, the vehicle tracking system **must** be activated.

Except in Young People's Residential Care, Staff/volunteers should always check the young person's risk assessments regarding travelling in vehicles before commencing a journey. Where a staff member may be required to transport more than one young person alone authorisation must be obtained from the homes registered manager of area manager. Take steps when giving lifts to drop a minimum of two young people off at the last point, involving staff, carers, and parents if necessary. Young People's Residential Care staff should always ensure they can contact a colleague or their manager by carrying the allocated "home" mobile phone with them whilst driving and ensuring the vehicle tracking system is activated.

All destinations, stops, and areas where the vehicle is stopped for long periods of time must be pre-planned and approved by the employees' line-manager. Any emergency / unplanned departures from the pre-approved travel itinerary should be reported to the line manager as soon as it is safe to do so. Participants must never travel to, enter, or know the location of private dwellings that are related to staff members or volunteers.

Those working with children and young people should never:

- 1. Engage in any of the following: -
- Participation in rough, physical or sexually provocative games your role could be to supervise for example a game of rugby etc
- Inappropriate and intrusive touching of any form
- Telling of inappropriate jokes
- Bad language
- Any scapegoating, intimidating, ridiculing or rejecting of a child or young person
- 2. Invade the privacy of children when they are showering or toileting.

- 3. Make sexually suggestive comments to or about a young person, even in 'fun'.
- 4. Let children or young people involve you in excessive attention seeking, especially that which is overtly sexual or physical in nature.
- 5. Invite a child or young person to your home or communicate with them via personal social media / online messaging sites.
- 6. Use corporal, physical, verbal, or psychological punishment in dealing with children and young people.

10. Use of Cameras, Recording Equipment and Mobile Phones

Please remember that only the PR and Marketing Team is authorised to publish photos, images or moving images on behalf of the Group.

When taking still or moving images the following key principles MUST be remembered; -:

- Parents/carers/children and young people have a right to decide whether images are to be taken, and how those images may be used.
- Parents/carers/children and young people must provide written consent using the YMCA consent form, to take and use their image, which will be stored confidentially by the Group, for images to be taken and used. This consent must explicitly state how long the image(s) will be stored for as well as for what purpose(s).
- Care must be taken to ensure that images are never sexual or exploitative in nature, nor open to misinterpretation and misuse.
- All images of children and young people will be securely stored and in the case of images used on websites, particular care will be taken to ensure that no identifying details facilitate contact with a child/young person by a potential abuser.
- If we use external photographers they will be advised of our safeguarding and other pertinent polices and will sign to acknowledge that they have read, understand, and will abide by them.

If carers / parents or other spectators are intending to photograph or video at an event/activity, they must be told of our expectations and wherever possible written notices to this effect will be displayed. Any concerns regarding inappropriate or intrusive photography / filming should be

reported to the event / activity manager / co-ordinator immediately and dealt with in the same manner as any other safeguarding concern.

On childcare sites and children's holiday camps, parents / carers are not allowed to use mobile phones whilst on site where the children are, due to the risks posed. They will be advised of this by signage on site and by our staff.

On childcare sites, holiday camps and in our residential care homes, only the designated home or site camera should be used to take any photographs on site or on outings. This is to ensure that photographs are taken and stored appropriately to safeguard the children and young people in our care. Images taken and stored on the camera must be downloaded immediately by the designated person (in Childcare / Camps this is normally the Site Manager or Programme Manager) onto designated YMCA equipment and then deleted from the camera.

Under no circumstances must cameras of any kind be taken into the bathrooms without prior consultation with the Site Manager or Programme Manager. If photographs need to be taken in a bathroom, e.g. photographs of the children washing their hands, then the Programme Manager or Site Manager must be asked, and staff must be supervised whilst carrying out this kind of activity.

Within Childcare / Camps settings, the camera must always be placed in a prominent place where it can be seen.

Mobile Phones / similar devices

We believe our staff and volunteers should be completely attentive during their hours of work to ensure all children and young people are properly looked after. For those working directly with children and young people, personal mobile devices must not be used during working hours and must be kept on silent or switched off and placed with staff belongings and may only be used on a designated break and only in a child / young person free area of the setting.

Ideally for residential care staff and Early Years staff the site / home mobile must be used on outings. However, in the unlikely event that this is not available, staff may use mobiles on outings for programme/emergency use only with explicit permission. Personal mobiles must never be used to take photographs of any of the children. It is the responsibility of all members of staff to be vigilant and report any concerns to a manager or designated officer.

Staff should not allow young people / children to use Robin Hood Group phones without supervision. Staff must never allow young people / children in our provisions to use the staff members personal phone.

Concerns will be taken seriously, logged, and investigated appropriately and thoroughly.

The Programme Manager/Registered Manager or another designated manager, in their absence, reserves the right to check the image contents of a member of staff's personal mobile phone or similar device should there be any cause for concern over its use. The Group has the absolute right to examine and hold Group owned devices at any time.

Should inappropriate material be found on any personally owned or Group owned device then a designated safeguarding offer / the Senior Designated Officer / Operations Manager – Childrens Residential, People and Culture will be contacted immediately, and they will inform the LADO.

All parents/carers that enter childcare / children's services setting are asked to ensure their mobile phones are not used. If they need to use their phones, they are asked to wait until they leave the setting. This is to safeguard against risk. Staff must remain vigilant and will remind any parents/carers and visitors if they observe anyone not adhering to this policy.

11 Female Genital Mutilation (FGM)

FGM is a form of child abuse and is against the law in the UK.

It is defined as

'A procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways.'

It is important that all staff working with children are aware of the indicators that could suggest that a girl or young woman is particularly at risk of FGM. Guidance produced by Nottingham City and Nottinghamshire County Safeguarding Boards is attached at Appendix 11

12. Charities Commission Escalation and Monitoring Process

THE CEO will contact the charity commission in agreement with the Board.

APPENDIX

1. Principles

The Group is based on the Christian core values of caring, honesty, respect and responsibility and believes that everyone is entitled to live free from abuse. We also recognise that children are at particular risk of abuse and exploitation.

Working Together to Safeguard Children (2018) aims to help professionals understand what they are expected to do and what they can expect from each other in relation to safeguarding and promoting the welfare of children. This statutory guidance defines.

Everyone who works with children has a responsibility for keeping them safe. All staff and volunteers have a duty to protect children and report suspicions or disclosures of abuse. Children and young people should be made aware, prior to the commencement of any service, that staff / casual workers and volunteers have a duty to report any concerns, allegations or suspicions of abuse and will not be able to 'keep secrets' of this nature. All confidentiality clauses must clearly state that confidentiality cannot be maintained where there is an allegation of abuse although clearly any investigations, reporting etc will be done only to appropriate bodies / persons.

This means;

- Individual staff must understand that they cannot singularly, on their own, meet the complex needs of our children, which means that they must work together to ensure that children and young people remain safe from harm;
- In order that organisations and practitioners collaborate effectively, it is vital that every individual working with children and families is aware of the role that they play and the role of other professionals;
- Staff must be clear that effective safeguarding systems are child centred

We have a clear legal duty to take the views, wishes and feelings of children placed in our residential homes and homelessness accommodation into account, particularly in relation to matters affecting their care, welfare and their lives. Children and young people want to be respected, their views to be heard, to have stable relationships with professionals built on trust and to have consistent support provided for their individual needs.

The Children Act 1989 and 2004 places a duty on all Local Authorities and other agencies to safeguard and promote the welfare of children whilst ensuring they cooperate in the best interests of children (i.e. individuals under the age of 18) including sharing information as appropriate. When

sharing information, it should be necessary and proportionate, relevant, accurate and always shared with confidentiality in mind.

The Mental Capacity Act 2005 protects the rights of people aged 16 and over to make their own decisions as far as they are able and provides a framework for supporting and involving people in making decisions about their own care, treatment, and support. Supported Housing has guidelines on the application of the Mental Capacity Act and Care Act so staff and volunteers working with people in those services (some of whom are under 18 so classed as children and young people) will be familiarised in their application.

2. Recruitment and Selection

Applications for employment, casual roles or volunteering in roles working directly with children must be made via a fully completed application form. All shortlisted applicants will be interviewed by at least two panel members and roles will be offered subject to a minimum of 2 satisfactory written references, that are also verbally verified and a satisfactory DBS disclosure along with additional references from the most recent childcare employment and a reference from most recent employer, alongside checks upon all social care related employment as per OFSTED Safer Recruitment. At least one of the interview panel must be trained on Safer Recruitment Practice and questions must cover safeguarding, motivation for working with children, any gaps in employment / education since leaving full time education must be accounted for forming appropriate relationships and professional boundaries. Any potential concerns arising at any stage during the process will be discussed with the applicant, investigated, and documented before any final decision is made in discussion with HR.

3. Safeguarding Children and Young People Against Radicalisation and Extremism

In accordance with the Counter Terrorism and Security Act 2015, our organisation has a responsibility to prevent those accessing our services from being drawn into terrorism. "Prevent" is one of the strands of the Governments counter terrorism strategy (CONTEST) and its aim is to stop people being drawn into terrorism.

Our Prevent Strategy and we will ensure appropriate training for all those working directly with children and adults at risk. We have a named designated officer to lead on our work in this area to support the Lead designated safeguarding officer.

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THE PREVENT STRATEGY

A Definitions

British values - British values are defined as "Democracy, the rule of law, individual liberty and mutual respect and tolerance for those with different backgrounds, characteristics, beliefs and faiths"

Extremism- The government's own definition of extremism as contained within the Prevent strategy is "Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas".

Radicalisation - radicalism is defined as "the process by which people come to support terrorism and extremism, and then, in some cases to participate in terrorist activity".

B Safeguarding against radicalisation and extremism

YMCA Robin Hood Group takes its responsibilities for safeguarding very seriously. In accordance with section 36 to 41 of the Counter Terrorism and Security Act 2015 our organisation has a responsibility to prevent children and adults from being drawn into terrorism. Prevent is a strand of the Government Counter Terrorism Strategy (CONTEST) and aims to Respond to the ideological challenge of terrorism and aspects of extremism, and the threat faced from those who promote these views.

Provide practical help to stop people from being drawn into terrorism and ensure they are given appropriate advice and support.

Work with a wide range of sectors where there are risks of radicalisation including education, criminal justice, faith, charities, the internet, social media and health.

The Group is a registered charity supporting children and adults from ethnically, socially and economically diverse areas. The age and profile of our clients make it crucial to be actively involved in the Prevent strategy. The organisation has a part to play in fostering shared values and promoting cohesion. Extremist ideology runs counter to the Group's and British values which make our community successful such as respect and tolerance for others, the rights of all to live free from persecution of any kind, freedom of speech, democracy, the rule of law and equality of opportunity and treatment. Extremism promotes fear and division and actively seeks to cause destructive relationships between different communities.

Our Responsibilities;

- 1. To promote and reinforce our Core Values and British values; by listening, supporting and enabling those we work with to develop their self-knowledge, self-esteem and self-confidence.
- 2. To promote social cohesion by supporting inter-faith and intercultural dialogue and understanding, and to encourage full and active roles in wider engagement in society.
- 3. To support those we work with by ensuring the Group has strong policies to enable it to be free from bullying, harassment and discrimination.
- 4. To identify and provide support to those we work with who may be at risk of radicalisation through appropriate sources of advice and guidance.
- 5. To ensure that staff and volunteers are aware of their roles and responsibilities in preventing terrorism and radicalisation.

To achieve these responsibilities we will concentrate on the following areas:

Leadership and Values; To provide an ethos which promotes respect, equality and diversity and understanding. This will be achieved through:

- Promoting the core values of, Caring, Honesty, Respect and Responsibility
- Building understanding of the issues and the confidence to deal with / report them
- Deepening engagement with local communities
- Appointing a Designated Officer to lead on this work in partnership with the Designated Lead Officer for Safeguarding

Staff Support; To ensure that staff and volunteers know the indicators of radicalisation or extremism and are confident to take preventative and responsive steps working with partner professionals, families and communities. This will be achieved through:

- Role appropriate training for all staff and volunteers
- Being aware of to what is happening in the organisation and the community and taking action as necessary
- Implementing anti-bullying strategies and challenging any discriminatory behaviour
- Helping clients and staff know how to access support within the Group or through community partners
- Managing risks and responding appropriately to events and issues

To ensure that the Group monitors risks and is ready to deal appropriately with issues which arise. It will need to:

- Understand the nature of the threat from violent extremism and how this may impact directly or indirectly on different teams within the Group
- Understand and manage potential departmental and organisational risks within the Group and from external influences
- Respond appropriately to events in local, national or international news that may impact on those we work with and the communities we work in
- Ensure measures are in place departmentally and across the organisation to minimise the potential for acts of violent extremist within RHG
- Ensure plans are in place to respond appropriately to a threat or incident within the Group
- Continue the development of effective e-safety and responsible user policies

C Staff training

The statutory guidance refers to the importance of Prevent awareness training to equip staff to identify vulnerable people and children at risk of being drawn into terrorism and to challenge extremist ideas.

All designated safeguarding officers and all staff and volunteers working directly with children, young people and adults at risk will be required to undertake training.

The key way that we will deliver this will be via the Channel (another strand of the Government's counter terrorism strategy focussing on supporting those at risk of being drawn into terrorism) e-learning package aimed at those working in client focussed roles.

This training can be accessed via http://www.elearning.prevent.homeoffice.gov.uk

Managers will ensure all relevant staff and volunteers undertake this training and that this is appropriately certified and documented.

D What to do if you have a concern

If you identify a person who you think is vulnerable to being drawn into terrorism or is displaying signs of extremism, you need to act.

 If you have any concerns <u>at all</u> we would strongly recommend discussing this with our organisational Lead on the Prevent Duty, Mark Owens - <u>mark.owens@nottsymca.org</u>, Tel 07587552294 / 0115 9489863 and / or with

Senior Designated Officer for Safeguarding Jo.bradley@ymcarhg. Tel 07734952168

In their absence, please discuss your concerns with one of the other designated officers or your line manager Pages 21-22

- You can also contact the Nottingham Police via Email <u>prevent@Nottinghmshire.pnn.police.uk</u> or dial 101 to make a report or to ask for advice
- For those working in schools / camps contact can be made via the helpline for schools and childcare counter.extremism@education.gsi.gov.uk or telephone: 020 7340 7264
- Any referrals made MUST be reported to the organisational Lead on the Prevent Duty, Mark Owens and / our Senior Designated Officer for Safeguarding immediately via email or by telephone

E IT

The statutory guidance makes clear the need for organisations to ensure that vulnerable people and children are safe from terrorist and extremist material when accessing the internet. We need to continually ensure that suitable filtering is in place within all our computer systems. More generally, we have an important role to play in equipping vulnerable people, young people and children to stay safe online, both in our care and outside. As with other online risks of harm, staff will need to be aware of the risks posed by the online activity of extremist and terrorist groups.

The Group's IT Policy should also be read in conjunction with this policy.

4. Definitions glossary

Child- Anyone who has not yet reached their 18th birthday. 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, does not change their status or entitlements to services or protection. Young people with SEN are supported until the age of 25, our practice and policy this is covered within our Vulnerable Adults policy.

Safeguarding and promoting the welfare of children - defined for the purposes of this guidance as:

- a. protecting children from maltreatment.
- b. preventing impairment of children's health or development.
- c. ensuring that children are growing up in circumstances consistent with the provision of safe and effective care

d. taking action to enable all children to have the best outcomes.

Child protection - Part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Contextual safeguarding – is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers can have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships. It expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.

Abuse - A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children.

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

Emotional Abuse - The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meets the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may 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 Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Child Sexual Exploitation (CSE) - 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.

Neglect - 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: a. provide adequate food, clothing and shelter (including exclusion from home or abandonment) b. protect a child from physical and emotional harm or danger c. ensure adequate supervision (including the use of inadequate caregivers) d. ensure access to appropriate medical care or treatment It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Extremism - 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. Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist.

Young carer - A young carer is a person under 18 who provides or intends to provide care for another person (of any age, except generally where that care is provided for payment, pursuant to a contract or as voluntary work).

Parent Carer - A person aged 18 or over who provides or intends to provide care for a disabled child for whom the person has parental responsibility.

Education, Health and Care Plan - A single plan, which covers the education, health and social care needs of a child or young person with special educational needs and/or a disability (SEND).

Local Authority Designated Officer (LADO) - County level and unitary local authorities have a officer/team (see external contacts list Appendix 2) who will be contact for all Concerns identified and agreed by the Lead DSO and or Departmental Senior Designated Officer. The LADO will take any action necessary to address corresponding welfare concerns in relation to the child or children and will coordinate with other involved Local Authorities, Police and other agencies They are to be involved in the management and oversight of allegations against people who work with children.

Safeguarding partners - A safeguarding partner in relation to a local authority area in England is defined under the Children Act 2004 as: (a) the local authority, (b) a clinical commissioning group for an area any part of which falls within the local authority area, and (c) the chief officer of police for an area any part of which falls within the local authority area. The three safeguarding partners should agree on ways to co-ordinate their safeguarding services; act as a strategic leadership group in supporting and engaging others; and implement local and national learning including from serious child safeguarding incidents.

Rapid review partners - A child death review partner in relation to a local authority area in England is defined under the Children Act 2004 as (a) the local authority, and (b) any clinical commissioning group for an area any part of which falls within the local authority area. The two partners must make arrangements for the review of each death of a child normally resident in the area and may also, if they consider it appropriate, make arrangements for the review of a death in their area of a child not normally resident there. The purposes of a review or analysis are (a) to identify any matters relating to the death or deaths that are relevant to the welfare of children in the area or to public health and safety, and (b) to consider whether it would be appropriate for anyone to act in relation to any matters identified.

County Lines - As set out in the Serious Violence Strategy, published by the Home Office, a term used to describe gangs and organised criminal

networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of 'deal line'. They are likely to exploit children and vulnerable adults to move and store the drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons cuckooing.

Child criminal exploitation - As set out in the Serious Violence Strategy where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur using technology.

5. Behaviour Management Guidelines

YMCA Robin Hood Group recognises the importance of positive and effective behaviour management strategies in promoting young people's welfare, learning and enjoyment.

Managers and the staff team will manage behaviour according to clear, consistent and positive strategies. Parents/carers are encouraged to contribute to these strategies, raising any concerns or suggestions. In the following guidelines "staff" includes volunteers and anyone else working with children and young people.

Staff working in children's residential care will have specific guidelines and working practices relating to behaviour management that they must adhere to.

Positive behaviour will be reinforced with praise and encouragement.

Negative behaviour will be challenged in a calm but assertive manner. In the first instance, staff will try to re-direct children's energies by offering them alternative and positive options. Staff will be open in stating and explaining non-negotiable issues.

When dealing with negative behaviour, staff will always communicate in a clear, calm and positive manner.

Staff will make every effort to set a positive example to children by behaving in a friendly and tolerant manner themselves, promoting an atmosphere where children and adults respect and value one another.

Staff will work as a team by discussing incidents and resolving to act collectively and consistently.

Staff will try to discuss concerns with parents/carers at the earliest possible opportunity in an attempt to help identify the causes of negative behaviour and share strategies for dealing with it.

Staff will encourage and facilitate mediation between children to try to resolve conflicts by discussion and negotiation.

Activities will be varied, well planned and structured, so that children are not easily bored or distracted.

Staff will work on each child's positives: and will not compare them with each other but encourage them individually.

Staff will ensure that quieter and well-behaved children get attention too.

Staff will aim to be consistent in what they say and ensure that other team members know what has been said – this avoids manipulation.

Staff will NEVER smack or hit a child and will try not to shout but will change their voice tone where necessary. Breaches of this are likely to result in disciplinary action.

Staff will consider individual motivation and needs when deciding why a child is behaving in a certain way.

Staff will take a child aside to talk to them about their behaviour, encourage them to change and encourage them on their strengths.

Staff will help children to develop a range of social skills and help them learn what constitutes acceptable behaviour.

Staff must be trained in Physical Intervention before they are able to physically intervene to hold a child if they are placing themselves or others at risk of harm.

Staff must consider their own safety and the rest of the young people present and must if possible remove themselves and others to safety.

Dealing with Negative Behaviour

When confronted with negative behaviour, staff will be clear to distinguish between 'disengaged', 'disruptive' and 'unacceptable' behaviour.

- 'Disengaged' behaviour may indicate that a child is bored, unsettled or unhappy. With sensitive interventions, staff will often be able to re-engage a child in purposeful activity
- 'Disruptive' behaviour describes a child whose behaviour prevents other children from enjoying themselves. Staff will collectively discuss incidents and agree on the best way to deal with them
- 'Unacceptable' behaviour refers to non-negotiable actions and may include discriminatory remarks, violence, bullying or destruction of equipment. Staff will be clear that consequences will follow from such behaviour, e.g. temporarily removing a child from the activity if appropriate

When an incidence of negative behaviour occurs, staff will listen to the child or children concerned and hear their reasons for their actions. Staff will then explain to the child or children what was negative about their behaviour and that such actions have consequences for both themselves and for other people.

Staff will make every attempt to ensure that children understand what is being said to them. Children will always be given the opportunity to make amends for their behaviour and, unless it is judged inappropriate, be able to re-join the activity.

If unacceptable behaviour persists, more serious actions may have to be taken including suspension or exclusion. At all times, children will have explained to them the potential consequences of their actions.

The Use of Physical Interventions

(Only applicable to children residential services – YMCA has a Positive behaviour policy for supported housing that does not permit physical intervention to be used for children aged 16 and 17 living with us)

Staff will use physical restraint interventions only as a very last resort and only then if they have reasonable grounds for believing that immediate action is necessary to prevent a child from significantly injuring themselves or others or to prevent serious damage to property.

Before reaching this stage, staff must have used all possible non-physical actions, such as dialogue, de-escalation and diversion, to deal with the behaviour. The child or children concerned will be warned verbally that physical intervention will have to be used if they do not stop.

A dialogue will always be maintained with the child or children, so that the member of staff can explain what they are doing and why they are doing it. Staff will make every effort to avoid the use of physical interventions.

Only the minimum force necessary to prevent injury or damage should be applied. For example, by diverting a child or children by leading them away by a hand or by an arm around their shoulders.

Staff will use physical intervention as an act of care and control and never punishment. Physical interventions will not be used purely to force a child to do what they have been told and when there is no immediate risk to people or property.

As soon as it is safe, the physical intervention should be gradually relaxed to allow the child or children to regain self-control. The use of the physical intervention will always be appropriate to the age, size and strength of the child or children involved and in accordance with the training received.

If staff are not confident about their ability to contain a particular situation or type of behaviour, they should call for the help of a colleague or manager immediately or, in extreme cases, the police.

Where a member of staff has had to intervene physically to restrain a child/young person, the manager must be notified, the incident recorded via the Incident Report form and the senior designated officer informed. In children's residential care, staff should complete the Physical Intervention Log and inform the Responsible Individual as well. In the case of children's services / youth services, the incident will be discussed with the parent/carer at the earliest possible opportunity and the parent / carer will sign to acknowledge the incident and that they have been informed.

If a staff member commits any act of violence, inappropriate restraint or abuse towards a child, serious disciplinary action will be implemented, according to the provisions of the Disciplinary Procedure following consultation with the LADO by the Designated Safeguarding Officer, Operations Head of Service – Therapeutic Children's Residential, Chief Executive Officer, Director of People and Culture.

6. Indicators of Abuse

Physical Abuse

Physical abuse is the deliberate infliction of pain, physical harm or injury and includes withholding or misuse of medication.

Indicators include:

- Any injuries not consistent with the explanation given for them
- Injuries which occur to the body in places which are not normally exposed to falls, bumps, etc
- Injuries which have not received medical attention
- Reluctance to change for, or participate in, games or swimming
- Finger marks or multiple bruising
- Bruises, bites, cuts, scratches, burns, fractures, etc. which do not have an accidental explanation
- Flinching or evidence of pain/discomfort during normal activity

Emotional Abuse

Emotional abuse is the emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. Some forms of cyber bullying may fall into this category. It may involve conveying to children that they are worthless, unloved or inadequate or causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. It may feature age or developmentally inappropriate expectations Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone.

Indicators include:

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging
- Nervousness, frozen watchfulness

	Obsessions or phobias
	Sudden under-achievement or lack of concentration
	 Inappropriate relationships with peers and/or adults
	Attention seeking behaviour
	Running away/stealing/lying
Sexual Abuse	Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not they are aware what is happening. This may involve physical contact, including penetrative (e.g. rape, buggery) or non-penetrative acts or non-contact activities, such as involving children in looking at, or the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways. Sexual violence and sexual harassment can also occur between two children of any age and sex or through a group of children sexually assaulting or sexually harassing a single child or group of children.
	 Indicators include: Any allegations made by the child concerning sexual abuse. Child with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour, or who regularly engages in age-inappropriate sexual play. Sexual activity through words, play or drawing. Child who is sexually provocative or seductive with adults Inappropriate bed sharing arrangements at home. Unexplained bruising around or bleeding from the genital area Stained or bloody underclothing Unexplained difficulties in walking

Neglect	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. It may involve
	a parent or carer failing to provide adequate food, shelter or clothing, failure to protect a child

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from physical harm or danger, or failure to ensure access to appropriate medical care or treatment.

Indicators include:

- Persistent hunger
- Weight loss
- Poor hygiene
- Dress inappropriate to weather or activities
- Physical problems and medical needs that are not attended

Organised Abuse

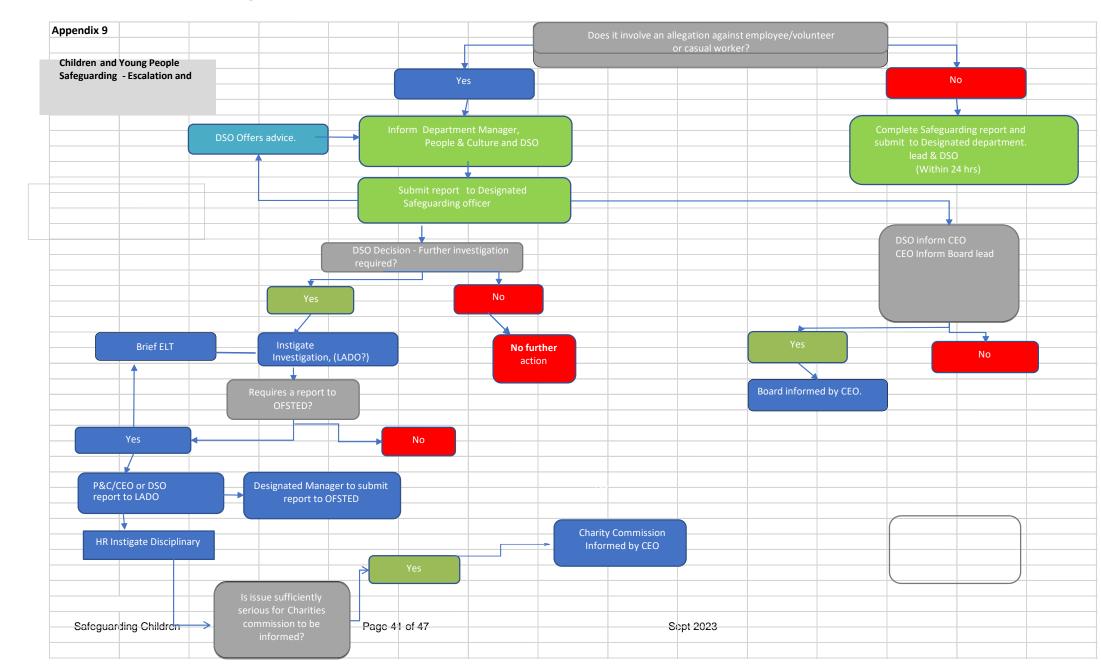
Organised or multiple abuse may be defined as abuse involving one or more abuser and a number of related or non-related abused children and young people. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse. Forms of social media may be used to orchestrate organised abuse by forming relationships and networks with children.

Indicators include:

- Series of complaints from different parents about the same staff/situations/issues
- Records regularly being mislaid/poor record keeping
- Controlling relationships
- Children/activities being visited regularly by "associates" of staff

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Escalation to Charity Commission flowchart



7. Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM) is a form of child abuse and is against the law. The summer months are known as the "cutting season." This is a time when women and young girls are at greater risk of undergoing FGM as the extended summer break allows more healing time thus reducing the risk of detection by professionals. FGM affects girls of all ages, however, in half of the countries where FGM is practiced the majority were cut under the age of 5.

FGM is defined as: -

'A procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways.'

Possible indicators that a girl may be at of risk of undergoing FGM include:

- A female child is born to a woman who has undergone FGM
- A female child has an older sibling or cousin who has undergone FGM
- Father comes from a community known to practice FGM
- A female family elder is very influential within the family and is/will be involved in the care of the girl
- Mother/family have limited contact with people outside of her family
- A girl or her family states she is going to have a 'special procedure' or to attend a 'special occasion' to become a woman
- A girl or her family talk about a long holiday to her country of origin or another country where the practice is prevalent
- Parents state they or a relative will take the child out of the country for a prolonged period
- A girl has attended a travel clinic or equivalent for vaccinations/ antimalarial.
- An elder woman has arrived to stay with the family or there is talk of going to a special party

This is by no means an exhaustive list and some indicators described above might in some instances be completely unrelated to FGM. It is important that practitioners use their professional judgement and handle concerns with sensitivity, but fear of offending should never override our duty to safeguard. Practitioners who are concerned about a child should refer to the FGM Multi-agency Practice Guidance to help decide what action to take. Where several indicators are present, practitioners should follow local safeguarding procedures, in addition to the above and always act on concerns. It is essential that practitioners act swiftly and seek advice in order that steps can be taken to protect the girl where necessary.

The law surrounding FGM was strengthened in 2015 and is fully embedded within the Serious Crime Act 2015. From October 2015, there is a <u>mandatory duty</u> to report any direct disclosure or confirmed case of FGM to the police on 101. This sits alongside the normal safeguarding procedures which require practitioners to report any concerns regarding young girls who have undergone or who are considered at risk of FGM. Local guidance can be found at

https://www.nottinghamcity.gov.uk/information-for-residents/childrenand-families/nottingham-city-safeguarding-children-board/resources-forprofessionals/general-resources

The number of girls and women world-wide who have undergone female genital mutilation is estimated at between 100 and 140 million, with 3 million young girls affected each year. It is found in 28 African countries, and also in South East Asia and the Middle East.

The highest prevalence rates, of 90% or more, are found in Djibouti, Egypt, Guinea, Sierra Leone, Somalia and Sudan. Eritrea and Mali both also have very high prevalence rates of around 80%.

In Britain, FGM is seen in some ethnic groups that have migrated to this country. The main groups living in the UK are from Egypt, Eritrea, Ethiopia, Gambia, Iraq, Kenya, Kurdistan, Liberia, Mali, Nigeria, Northern Sudan, Sierra Leone and Somalia. Dispersal of asylum seekers across the UK means that early years' colleagues are more likely to meet girls and women who have already been cut and a larger number of girls who might be at risk of being cut. Girls of dual heritage may also be at risk, if one of the parents is from a practicing community.

Colleagues should undertake e-learning to increase awareness and knowledge around FGM, such as http://www.e-lfh.org.uk/programmes/female-genital-mutilation the Home Office https://www.fgmelearning.co.uk during their first 6 months in post.

Any colleague who suspects that any child or young woman is at high risk of or has already undergone FGM are advised to contact: their departmental designated safeguarding officer and or the Designated Safeguarding Officer

Details of person making this report:

Referral Form for Suspicions or Allegations of abuse of a CYPVA

This form must be completed as soon as possible after receiving information that causes suspicion or an allegation of the abuse of a child, young person, or vulnerable adult. This must be discussed with a designated safeguarding officer as soon as possible. Do not delay by attempting to obtain information to complete the details.

Note: Confidentiality must be always maintained. Information must only be shared on a need-to-know basis i.e. only if it will protect the child, young person, or vulnerable adult. Do not discuss this incident with anyone other than those who need to know. Ensure that this form is kept securely and confidentially if in hard copy format or is password protected if stored electronically.

Continue on a separate sheet of paper if required and attach securely to this form.

Name:	
Position:	
Contact telephone number:	
Details of child/vulnerable adult:	
Name:	
Date of birth:	
Address:	
Contact telephone number:	
Names and address of parents/guardian/carers:	

Details of person about whom there is concern:

Name:
Position:
Date of Birth:
Address:
Relationship to child/vulnerable adult:
If you are reporting this alleged incident on behalf of someone else, please provide details of that person:
Name:
Position:
Address:
Contact telephone number:
Date this person advised you of alleged incident:
Record here the information you were given from this person about the alleged incident:

Details of alleged incident:

Date of alleged incident:
Time:
Place:
Name and addresses of witnesses:
Describe in detail what happened:
Describe in detail visible injuries / bruises and concerning behaviour of the child /vulnerable adult, if any (use diagrams if this helps you to describe):
Was the child / vulnerable adult asked what happened: YES / NO
If YES, record exactly what the child said in their own words and any questions asked if the situation needed clarification:
Details of action taken:
Detail what action, if any, has been taken following receipt of this information (for example, if you have contacted the police or other emergency services, please provide details):
Signature
Print name:
Date:
Date.

FOR COMPLETION BY THE DESIGNATED SAFEGUARDING OFFICER ONLY

Details of action taken:

Detail what action, if any	, has been taken following receipt of this information:		
ONLY AFTER SEEKING	ADVICE FROM THE POLICE / / LADO / LOCAL ADULT		
SOCIAL CARE OFFICE were the child / vulnerable adult's parents / carers contacted?			
office were the child /	valiferable addit's parents / carers contacted:		
Details of external agencies	s contacted:		
Police	Police Station contacted: Name and contact number: Advice received:		
LADO / Local Adult Socia Care	Local authority: Name and contact number: Advice received:		
Care	Name and contact number. Advice received.		
Other	Name of organisation: Name and contact number: Advice received:		
Other information			
Signature			
Print name:			
Date:			

Where a referral has been made to the Police / LADO / Local Adult Social Care office a copy of this form must be sent to them as soon as possible.