

Policy Name	Safeguarding Children
Date of issue	January 2024
Policy author(s)	E. Scouller
Officer responsible / accountable	Chief Executive
Who policy applies to	All staff employed by Supportability, students on placement, volunteers and trustees
Relevant policies to be read in conjunction with	Code of Conduct, Confidentiality Policy, Data Protection Policy, Whistleblowing Policy
Date approved	January 2024
Date of review	January 2025
Availability of alternative formats	This policy is available in large print. Alternative formats may be available on request

It is a contractual requirement that employees familiarise themselves with all policies and procedures which are relevant to their employment with Supportability. Please note, this policy and procedure is not contractual.

SAFEGUARDING CHILDREN POLICY

1. General Policy Statement

- 1.1 Supportability is committed to safeguarding children's welfare. We acknowledge that safeguarding is everyone's responsibility and extends beyond specific incidents of harm or abuse. As such all staff, trustee, students and volunteers¹ working with or on behalf of Supportability have a duty to protect from harm and promote the welfare of all children and specifically those to whom the charity provides services.
- 1.2 Supportability is committed to ensuring that all children (up to the age of their 18th birthday) that it supports are protected from abuse and that Supportability works proactively to prevent abuse from occurring. In dealing with any case of potential abuse the welfare of the child is paramount.
- 1.3 Effective safeguarding systems are child-centred and recognise that the child's needs are paramount. Failings in safeguarding are too often the result of losing sight of the needs and views of the child, or placing the needs of adults ahead of the needs of the child.
- 1.4 Supportability will ensure that its recruitment practices are rigorous and that enhanced Disclosure Barring Service checks are undertaken on all staff prior to commencement of employment and every three years subsequently.
- 1.5 Supportability works with a number of local authorities. Each have their own arrangements for the prevention and protection of children from abuse, but all must comply with the Department for Education's Working Together Guidance (2018). Within Greater Manchester a Safeguarding Partnership has been set up, and individual local authority safeguarding children's boards have joined the partnership. The Greater Manchester Safeguarding Partnership has produced a regional procedures manual for Greater Manchester which sets out a range of policies and procedures in relation to safeguarding children. Supportability is committed to working in accordance with those policies and those of local authorities that fall outside of Greater Manchester such as East Cheshire and Derbyshire. Further information on the Greater Manchester Safeguarding procedures manual can be found here [Contents \(proceduresonline.com\)](https://www.proceduresonline.com)

¹ For brevity where the term staff is used in this policy this should be read to include students, volunteers and trustees unless indicated otherwise

- 1.6 Supportability aims to work in partnership with parents/carers and individual service users to provide high quality support. This means taking an holistic approach wherever possible to care and support. Within the context of safeguarding having a holistic approach means having an understanding of a child within the context of their family and of the educational setting, community and culture in which they have been brought up. The aim is to understand the child's developmental needs, and the family/carer needs, and to provide an appropriate service to the child and to the family.
- 1.7 While working with families/carers and individual children it is important for Supportability staff and volunteers to listen to the family/carers and the individual child and communicate effectively using the preferred method of communication. Developing a cooperative working relationship is important so that parents, carers and the individual child feel respected and informed and helps ensure that vital information is provided about the child.
- 1.8 Supportability will ensure that staff and volunteers have training to ensure sufficient knowledge and understanding about their responsibilities to ensure that children are effectively safeguarded and protected irrespective of their gender, sexual orientation, race, ethnic origin, religion or belief culture, disability or age.
- 1.9 In relation to work with black and minority ethnic children and their families / carers Supportability will ensure that staff and volunteers work in a culturally appropriate manner, whilst reinforcing that all children have the same rights to protection from harm as defined under the UK legal system. This means that staff and volunteers should be provided with training and support to provide them with knowledge about cultural differences and their impact on attitude and behaviours. In addition, staff and volunteers should work in a sensitive, understanding and non-judgmental way and should be respectful in dealing with individuals whose culture is different to their own.
- 1.10 Supportability has a responsibility under counter terrorism legislation to ensure that staff are informed about service users being radicalised and that staff are aware, when they are working with individuals, about the types of behaviours or comments that could raise concern in relation to radicalisation or extremism and what to do in those circumstances. The government has a strategy in relation to this called the PREVENT programme which is a national programme that places a duty on certain bodies to have "due regard to the need to prevent people from being drawn into terrorism. The PREVENT strategy includes recognising when vulnerable individuals may be being exploited or radicalised for terrorism related activities. Appendix 1 has more information about radicalisation and extremism and the organisational processes in place to support staff.
- 1.11 Everyone involved in working and having contact with children, whatever their role, should:

- undertake Supportability or relevant local authority safeguarding training;
- develop an understanding of the issues which can constitute abuse;
- take matters of potential abuse seriously and always discuss concerns with their line manager;
- actively listen to and record concerns without asking leading questions;
- be timely, sensitive and maintain confidentiality as appropriate to each situation;
- work in a co-ordinated way within and between organisations;
- support the rights of children by respecting self-determination and informed choice wherever possible;
- acknowledge risk as an integral part of choice and decision-making;
- take action to safeguard any child in a way which is proportionate to the perceived level of risk and seriousness;
- help to ensure that risk assessments are completed and that they are recorded and reviewed in order for risk to be minimised;
- be sensitive to every individual's identity including culture, beliefs and ethnic background, gender, disability, age and sexuality;
- ensure that they maintain confidentiality (as set out in Supportability's Confidentiality Policy), and follow the principles set out in Supportability's Data Protection Policy in relation to the sharing and security of confidential information.

2. Scope

The policy and procedures apply to all staff employed by Supportability, students on placement, volunteers and trustees.

3. Aim

The aim of the policy is to support Supportability to work in conjunction with local authorities, other providers and local authority safeguarding boards so that children are supported safely. The objectives of the policy are to:

- identify what is meant by abuse and provide information on the different types of abuse and its signs and symptoms;
- set out the procedures for reporting any incidents or suspected incidents of abuse;
- provide guidance to staff on what they should do if they have a suspicion that abuse has occurred or where a child or another person discloses an allegation of abuse against a child;
- provide guidance to staff on a range of practices that can put the staff member at risk of allegations of abuse, for example, touching and being alone with a child, or put the child at risk by not dealing with bullying or not having awareness of e-safety.

4. Accountabilities and Responsibilities

- 4.1 Accountability and responsibility have different meanings. Accountability means that the person identified is answerable for the satisfactory implementation of the policy or aspects/tasks within the policy (though they may not be actually completing some or all of the tasks within the policy). Responsibility can be more collective (ie. involve more than one person) and means that the person or persons identified are responsible for completing the identified task and reporting to the person who is accountable.
- 4.2 It is a requirement of their employment that staff fulfil their identified accountabilities and responsibilities as set out in relevant Supportability Policies and their Job Description.
- 4.3 The Executive Committee is responsible for approving this policy. The Chief Executive is accountable for the implementation of the policy supported by all managers. Individual managers may have specific accountabilities and responsibilities
- 4.4 Supportability's Safeguarding Panel has a monitoring and developmental focus, addressing current practice and recommending future improvements. It meets quarterly and is accountable for devising and reviewing a Safeguarding Action Plan. The terms of reference of the Safeguarding Panel are contained in Appendix 2.
- 4.5 The Learning and Development Manager is responsible for identifying and providing or facilitating relevant training, guidance and support to staff about safeguarding and on specific issues such as:
- how to gather information from service users;
 - the roles / responsibilities of staff who suspect abuse or have alleged abuse disclosed to them;
 - the roles / responsibilities of supervisors and managers who may have responsibility for reporting allegations to the relevant local authority.
- 4.6 Individual staff and volunteers who have contact with adults at risk and hear disclosures or allegations, or have concerns about potential abuse have a responsibility and duty to pass on these concerns to the relevant person, who in most cases is their line manager.
- 4.7 In addition, Supportability has appointed two senior staff as Designated Safeguarding Lead and Deputy Safeguarding Lead. These staff have a responsibility to make decisions about how individual disclosures should be dealt with and whether (and how) they should be reported to external authorities such as the police and the relevant local authority Children's Safeguarding Partnership Board. Information on the Designated Lead, and Deputy Lead are contained in Appendix 3.

5. Legal context and definitions

5.1 The legal context of this policy is the Children Act 1989 and 2004 which provides the statutory framework for safeguarding and promoting the welfare of children in need. In addition, account is taken of the Department for Education guidance Working Together to Safeguard Children (2018) which covers the legislative requirements and expectations on individual services to safeguard and protect the welfare of children, and sets out a framework for Local Safeguarding Childrens Partnerships to monitor the effectiveness of local services.

5.2 A child is defined as anyone who has not yet reached their 18th birthday.

5.3 Safeguarding is defined for the purpose of this policy as:

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

and undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.

5.4 Abuse is an act or omission by another person that causes significant harm to the physical, emotional or social wellbeing of a child. The broad categories of abuse are:

- physical abuse;
- emotional abuse;
- sexual abuse;
- financial abuse;
- neglect;
- institutional abuse.

These categories overlap and an abused child does frequently suffer more than one type of abuse.

5.5 **Physical abuse** - may involve female genital mutilation, 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.

5.6 **Emotional Abuse** can involve 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 cyber-bullying) causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Emotional abuse can include forced marriage or radicalisation. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

- 5.7 **Sexual Abuse** can involve 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 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.
- 5.8 **Financial abuse** is the exploitation, inappropriate use or misappropriation of a person's financial resources, property, pension, allowances or insurance. This includes the withholding of money or possessions, intentional mismanagement of a service user's finances or property, theft, fraud, embezzlement, stealing service user's money and pressure (by threat or persuasion) to influence financial transactions.
- 5.9 **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 and development.

Neglect may involve a parent or carer failing to:

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

- it may also include neglect of, or unresponsiveness to, a child's basic emotional needs.
- 5.10 Staff and volunteers should be aware that children from all cultures are subject to abuse and neglect. Culture can explain the context in which an abusive incident took place but not the behaviour or action of an individual parent. For example, a parent who injures a child with a belt might say that this is "cultural". The cultural context might explain the parent's anger over the expectation he/she has of the child but not the parent's action, which is abusive. Cultural factors neither explain nor condone acts of omission or commission, which place the child at risk of significant harm.
- 5.11 **Institutional abuse** is the mistreatment of child service users which is brought about by systematic poor or inadequate care or support that affects the whole, or a significant part, of a care setting. It can include a lack of individualised care and support, lack of choice in everyday activities, inappropriate confinement or restrictions, inappropriate use of restraint, sensory deprivation, inappropriate use of rules, a lack of flexibility in relation to bedtimes or waking times, dirty clothing or bed linen, a lack of personal possessions or clothing, deprived environment or lack of stimulation and the misuse of medical procedures.
- 5.12 It should also be recognised that abuse can take the form of child on child abuse such as sexual violence and sexual harassment, and staff should be aware that it is more likely that girls will be the victims of sexual violence and sexual harassment and it is more likely that this will be perpetrated by boys.
- 6. Reporting and recording allegations and disclosures – information for front line staff/support workers**
- 6.1 Everyone who has contact with children and hears disclosures or allegations, or has concerns about potential abuse or neglect has a duty to pass them on appropriately, even if the child asks them not to. The person disclosing or passing on the allegation may be a volunteer or worker but could also be the service user or a member of the public.
- 6.2 Raising a concern about abuse or bad practice means:
- recognising signs of abuse or ongoing bad practice or responding to a disclosure;
 - reporting a concern, allegation or disclosure;
 - recording initial information;
 - maintaining confidentiality after reporting.
- 6.3 Staff must report any concerns, allegations or disclosures of alleged abuse. A failure to do so may result in formal action being taken against staff by Supportability. If a member of staff raises a concern about an organisation or

individual and they are acting in good faith then they will be supported whatever the outcome of the investigation.

- 6.4 If a child makes a disclosure to a member of staff and asks that they keep it confidential, the member of staff should inform the child (taking into account age and understanding) that although they will respect their right to confidentiality they are not able to keep the matter secret and have a duty to report any allegations, if they believe that harm has or is likely to come to the child or another person.
- 6.5 If a member of staff suspects abuse or if abuse is disclosed by a child then the safety of the person who may be subject to abuse is the first priority. Where this is required the emergency services should be contacted immediately e.g. where there are suspicions that a crime has taken place, or where someone is injured.
- 6.6 A member of staff should report their concerns or the information they have received immediately to their line manager, or if they are a volunteer to the person who is running the support session they are involved in. Alternatively, if the staff member is working out of hours on their own they can report their concern through Supportability's Out of Hours On Call system. If the member of staff suspects that the person they would report to is involved in, or being accused of abuse then they must report to another senior person (such as a Designated Person within Supportability). The allegation or disclosure must be reported and recorded immediately (whilst keeping the service user safe) and the record must be submitted to a manager within 24 hours at the very latest.
- 6.7 It is important that a written record of the incident / disclosure is completed. This record should be written as soon as possible (using the form at Appendix 3) and should cover:
 - what happened and when;
 - what the child said / communicated to the member of staff – using the words they used;
 - what the member of staff saw in terms of what the scene / environment looked like;
 - what actions were taken by the member of staff.

This record should be signed and dated.

- 6.8 If the member of staff has made notes of what was said to them during the disclosure / incident then they must keep these notes and not destroy them, as they may be needed if any criminal or disciplinary procedures are taken forward.
- 6.9 It is not the role of the member of staff to take a 'statement' from the child or investigate the alleged abuse. Their role is to make sure that the service user is safe and to report information shared with them to their line manager or another

senior manager/Designated Lead. As a result members of staff should not ask leading questions or 'interview' the service user or any witnesses.

6.10 If a member of staff is present during or after an alleged incident of physical or sexual assault then it is important to ensure that any evidence is preserved. As a result staff should:

- not disturb the 'scene' e.g. seal off areas if possible, discourage washing/bathing, do not remove the vulnerable child's clothing/bedding;
- not handle any items which may hold DNA evidence.

6.11 Once the member of staff has reported the disclosure / incident and made a written record they must keep that information confidential and must not share information about the disclosure / incident without agreeing this with the person to whom they have reported the incident.

7. Referral and gathering information – information for managers referring allegations / disclosures to the local authority

7.1 When a concern is raised with a manager that could result in a safeguarding referral, the manager should seek advice from one of the Designated Leads about the need to:

- obtain further information from Supportability staff or volunteers or others involved in raising the concern;
- discuss the issue with a relevant person such as an allocated social worker or local authority designated officer;
- discuss the potential referral with the family/carers/guardian, where safe to do so.

7.2 Managers should seek, in general, to discuss concerns with the family and, where possible seek the family's agreement to making a referral. The only exception to this is where the allegation raised is against or involve the parents/carers, for example, if there is a disclosure of honour based abuse or forced marriage or parental sexual abuse. In such cases, in which case advice should be sought from the relevant local safeguarding authority about the action to be taken. Consent to refer concerns should have been previously obtained from parents/carers during Supportability's 'pathway assessment' process.

7.3 Where a parent has agreed to a referral, this must be recorded and confirmed on the relevant referral form.

7.4 Where a parent has not agreed to a referral but it is considered that a referral should be made then:

- the reason for proceeding without parent agreement must be recorded;

- the Children's Social Care Team should be told that the parent has withheld her/his permission.

Service users who are aged 16 or 17

7.5 Service users who are aged 16 or 17 are covered by the Mental Capacity Act and referrers must therefore act with 16 or 17 year olds as they would with those aged 18 or over. This means that where the service user has capacity, managers must gain the consent of the service user before making a referral to the relevant safeguarding authority. Consent will also be required for each of the following:

- the recommendations of an individual protection plan being put in place;
- a medical examination;
- an interview;
- sharing of information with others who are not the relevant safeguarding authority ie. Police.

7.6 The manager should also, where possible, obtain the view of the service user in relation to the action the service user would like taken and the service user's desired outcomes.

Service user aged 16 or 17 with capacity who does not consent to the referral

7.7 Where the service user has capacity but will not consent to the referral and there are no safeguarding implications for other adults at risk, no public interest issues or criminal activity considerations, then this decision must be respected and clearly documented. In order to ensure that the service user fully understands the consequence of a referral not being made they must be given the relevant information in the right format and have the opportunity to consider all the risks and fully understand the likely consequences of that decision over the short and long term.

7.8 In any situation of refusal of consent then the manager/Team Leader dealing with the allegation must refer this matter to a Supportability Designated Safeguarding Lead as soon as possible for consideration. In dealing with the issue of consent it is essential to consider whether the adult at risk is capable of giving informed consent.

7.9 There are times when it will be appropriate to override a service user who has refused consent to a referral. For example:

- where they have refused consent because they have consented to the alleged abusive activity and there is a reason to believe that the consent to the alleged abuse was given under duress
- where their allegations involve or implicate other people (adults or children);

- if the person is exposed to life threatening risk and they are unreasonably withholding their consent;
- if there is an overriding public interest;
- if the person no longer has capacity in relation to consenting to the referral.

Doubts about the capacity of the service user in relation to consent

- 7.10 Where there is doubt about the capacity of the service user in relation to giving consent to a safeguarding referral being made then a mental capacity assessment must be carried out and where required, a best interest decision made.

Making a referral

- 7.11 Referrals to the relevant local authority will be made by members of the management team in each locality. Referrals to the relevant local authority must be made within 24 hours as quickly as possible following the appropriate recording procedure. Forms for completion are contained in the appendices of this policy as follows:

- Appendix 4: Safeguarding Reporting Form and guidance for support workers and managers on completion;
- Appendix 5: Guidance for reporting safeguarding concerns in Stockport;
- Appendix 6: Local Authority contact details for logging incidents:

- 7.12 An internal record of the Safeguarding incident must be maintained on the Supportability Safeguarding Logging Form and after completion of this managers should inform the Head of Operations who has final sign off. In addition managers must complete the management sections of the Safeguarding Reporting Form.

- 7.13 Staff who are responsible for making alerts to the relevant local authority should also do the following:

- take immediate action not already completed e.g. checking that immediate safety has been considered such as medical attention, emergency police contact;
- should members of staff be cited as the alleged perpetrator consider the need to immediately suspend the member of staff concerned to enable a full and open investigation to be able to take place under the relevant local authority safeguarding procedures – any decision to suspend the member of staff should be taken in conjunction with Supportability's HR department and a member of Supportability's senior management team;
- seek further advice and support from the local authority and Designated Officer for the Local Authority (previously known as the LADO) to whom they have reported about how to proceed, especially where further actions could alert an alleged perpetrator;

- where required inform the appropriate inspection body eg. Care Quality Commission, Ofsted.

7.14 Where contact is made with the police you should make clear that you are reporting a potential crime that involves a vulnerable child. You should clearly detail the nature of the allegation and in all cases obtain an incident number for future reference.

7.15 The Safeguarding local authority team will have a Designated Officer for the Local Authority who should be involved in the management and oversight of individual cases that involve any suspicion that the abuser is a Supportability member of staff or volunteer or a staff or volunteer from another support organisation. The Designated Officer should provide advice and guidance to Supportability in relation to liaising with the police and other agencies and monitoring the progress of cases to ensure that they are dealt with as quickly as possible, consistent with a thorough and fair process.

7.16 The local authority Safeguarding team may request that a representative from Supportability attend meetings with the local authority and / or obtain further information. This may include gathering information such as staff rotas and incident reports, information about past incidents, or concerns from internal records, interviews with witnesses.

7.17 It is vital that, when making a referral, as much information as possible is provided to assist the decision making process regarding further action needed. As with all recording around safeguarding, managers should take special care when recording details as they could be used as evidence in criminal investigations or proceedings.

8. Guidance to staff about working with children

8.1 Supportability has a number of related policies about how staff should behave towards service users. These include policies covering:

- confidentiality;
- providing personal and intimate care;
- dealing with challenging behaviour / positive behaviour support;
- lone working.

8.2 This policy also contains guidance for staff in the appendices on the following issues:

- children and young people in distress – appendix 7;
- infatuations – appendix 8;
- physical contact – appendix 9;
- other activities that require physical contact – appendix 10;
- sexual contact – appendix 11;

- social contact – appendix 12;
- supporting outside the home and on short breaks – appendix 13;
- bullying – appendix 14;
- e-safety – appendix 15;
- child sexual exploitation – appendix 16.

9. Whistleblowing and support for staff

- 9.1 Supportability is committed to ensuring that staff who provide information on actual or suspected abuse are treated fairly. In most circumstances, staff should feel able to report safeguarding concerns to their manager. However, in certain circumstances, staff may feel unable to do this, for example if the situation involves their manager. The employee can, in this situation, contact one of the Designated Leads. Alternatively, Supportability has a Whistleblowing Policy which provides staff with an independent and alternative mechanism for raising concerns. The Whistleblowing Policy is available on the Intranet.
- 9.2 Supportability undertakes to provide support and, if necessary, protection for staff and volunteers who honestly and reasonably raise allegations of abuse or bad practice. As far as possible Supportability will endeavour to maintain the confidentiality of staff and volunteers.

10. Other issues

- 10.1 If Supportability permanently removes an individual (either a paid worker or unpaid volunteer) from work such as supporting children (or would have, had the person not left first) because the person poses a risk of harm to children, Supportability must make a referral to the Disclosure and Barring Service and to the relevant local authority and Designated Officer for the Local Authority.

Appendix 1

Radicalisation and Extremism

- 1.1 Radicalisation is when someone starts to believe or support extreme views, and in some cases, then participates in terrorist groups or acts. It can be motivated by a range of factors, including ideologies, religious beliefs, political beliefs and prejudices against particular groups of people. People may be radicalised in many different ways, and over different time frames from as little as a few days or hours, or it may take several years.
- 1.2 Supportability recognises that service users may be vulnerable to the risk of radicalisation or extremism, and therefore the organisation has a duty, as part of its safeguarding responsibilities to, protect service users from this risk, including reporting concerns.
- 1.3 Radicalisation is not a one-off event that happens to individuals. It is a series of contacts and episodes that can result in potential terrorist acts. Therefore it is important that staff working with individuals who display behaviours or comment upon potential incidents of concern, understand their responsibilities in relation to the government's Prevent strategy and how that works within a safeguarding context.
- 1.4 Safeguarding against extremism or radicalisation is no different to safeguarding against any other vulnerability in today's society.
- 1.5 Factors triggering radicalisation

Evidence suggests that there is no obvious profile for a person who may be likely to become involved in terrorist related activity, nor a single indicator for when a person might move to support extremism. However an increasing body of information indicates that factors thought to relate to personal experiences of vulnerable individuals affect the way in which they relate to their personal environment and may make them susceptible to exploitation or supporting terrorist activities. Factors that may trigger radicalisation can include:

- Peer pressure;
- Influence from other people or the internet;
- Bullying;
- Crime and anti-social behaviour;
- Family tensions;
- Race/hate crime;
- Lack of self-esteem or identity;
- Personal or political grievances.

1.6 Indicators of concern

Indicators that staff may observe or identify regarding individuals' behaviour or actions may include the following:

- Spending increasing time in the company of other suspected extremists;
- Changing their style of dress or personal appearance to accord with the group;
- Day-to-day behaviour becoming increasingly centred on an extremist ideology, group or cause;
- Loss of interest in other friends and activities not associated with the extremist ideology, group or cause;
- Possession of materials or symbols associated with an extremist cause;
- Attempts to recruit others to the group/cause;
- Communication with others that suggest identification with a group, cause or ideology;
- Using insulting or derogatory names for another group;
- Increase in prejudice related incidents committed by that person which may include:
 - Physical or verbal assault;
 - Provocative behaviour;
 - Damage to property;
 - Derogatory name calling;
 - Possession of prejudice related materials;
 - Inappropriate forms of address;
 - Refusal to cooperate;
 - Attempts to recruit to prejudice related organisations;
 - Condoning or supporting violence towards others.

1.7 Consent

People who are vulnerable to violent extremism or radicalisation are more likely to be reached by supportive services if issues of consent are handled with sensitivity and there is an informed understanding of the issues.

Before making a referral, staff must respond to all concerns, by clarifying the information. For children, this will usually involve talking to the child/young person and their family (unless the family is implicated in potential extremism), and to other professionals working with the child/young person.

Any referral will be made with the young person's/family's knowledge and consent, unless to do so would place the child/young person at risk of harm. Where there are grounds to doubt the capacity of the person of those aged 16 or over but under the age of 18, steps need to be taken to provide support to enable them to give informed consent to be referred.

1.8 Raising a concern

Where any member of staff has any concerns in relation to extremism or radicalisation of a service user they must report those concerns following the safeguarding procedure set out in Section 6 of this policy. The manager receiving the concern should consult with their manager and/or the Designated Safeguarding Lead (or their deputy) to seek advice about the appropriate course of action to take and whether a referral to the Channel Panel is required

1.9 Making a referral

Where a concern about an individual has been identified, partner agencies can discuss a concern or make a referral to the Channel Panel by completing the referral form at this link [Prevent referral documents - Stockport Council](#)

Once the form is completed it must be emailed to all 3 email addresses below:

- Stockport's Multi-Agency Safeguarding Hub for Children: cyp@stockport.gov.uk
- GMP channel: channel.project@gmp.police.uk
- Greater Manchester Channel Team: gmchannel@manchester.gov.uk

If the issue is urgent, call **999** and alert the police.

Appendix 2

Safeguarding Panel

Terms of Reference

The internal Safeguarding Panel exists as part of our ongoing commitment to ensure that the people we support, their family members, carers and our staff are safe in all that they do.

- The panel has as its primary members the Deputy Chief Executive, the operational Heads of Service (Head of Community Services, the Head of Day Services and the Head of Residential Services), Learning and Development Manager, the PA to the Senior Leadership Team will be present to take minutes;
- The panel will be chaired by the Deputy Chief Executive
- The panel may call upon other Supportability colleagues as the agenda dictates e.g. Human Resources Advisor
- The panel will meet quarterly to coincide with and in advance of the SMBC Harm Levels Survey returns for Day, Residential and Domiciliary service areas. The Stockport Harm Levels will be applied to safeguarding cases from other LAs
- The panel will biannually consider the Safeguarding Action Plan as the main focus
- The panel will consider a set agenda as follows:
 - Safeguarding Action Plan – feeding into trustees and risk register
 - SMBC Quarterly Harm Level survey
 - Safeguarding Activity
 - Harm Level 1/2/3/4/5 reporting
 - Emerging Themes
 - incident reporting
 - Update on MCA/DOLS/Liberty Protection Standards
 - Training
 - Update on Safeguarding Children and Adults attendance
 - Link between training and safeguarding activity
 - Risk
 - Communication
- The panel will have both a monitoring and developmental focus, addressing current practice and recommending service improvement(s) and ensuring information is cascaded to staff and managers via team meetings and training
- The panel will invite the Designated Officer for the Local Authority and the Safeguarding Board – Development Manager in addition to the LD Team Leader to meet with us annually.

Appendix 3

Designated Safeguarding Lead and Deputy Designated Safeguarding Lead

The Designated Safeguarding Lead (DSL) for Supportability is the Deputy Chief Executive, Mary Stanley.

The Deputy Designated Safeguarding Lead (DDSL) is the Residential Manager at Cheddle Lodge, Candice Scambler

The Designated Lead can be contacted on 0161 432 1248 (between 9 – 5) or via the Supportability on-call number 07976 704535 out of hours. The Deputy Designated Lead can be contacted at Cheddle Lodge (0161 428 5189).

Supportability also has a Trustee who takes the Lead, at a strategic level, for Safeguarding issues. The Trustee Safeguarding Lead is Helen Roberts. The Trustee Safeguarding Lead will have overall responsibility at Trustee level for leading on safeguarding issues and will have input into Supportability's Annual Safeguarding Report.

Role of Designated Safeguarding Lead

This role descriptor sets out the responsibilities of Supportability's DSL, taking into account legislation, guidance and best practice at the local and national level, to ensure Supportability's processes are at all times safe, legal and compliant.

This role descriptor should be read in conjunction with Supportability's Safeguarding Panel 'Terms of Reference' in order to effectively and appropriately acknowledge and engage supportability staff in safeguarding practice.

Responsibilities

- To work closely with the Safeguarding Lead (DCEO) for Supportability.
- To take lead responsibility for all child and adult protection and safeguarding concerns that arise.
- To take the lead or oversee managers in undertaking any internal investigative process.
- To take responsibility for swift action in the context of safeguarding concerns, informing, and advising, colleagues, parents and relevant outside agencies of concerns and recording details of each incident in line with Supportability and local authority policy and procedures.
- To ensure that relevant external bodies have been informed as appropriate eg. CQC or HSE in relation to RIDDOR reports.
- To ensure that a referral has been made (and where required followed up) where an independent advocate is needed to support the adult at risk
- To advise the Safeguarding Lead (DCEO) and the internal Safeguarding Panel regarding any local or national developments in relation to Safeguarding, Child/Adult Protection and / or improvements in strategies,

structures and practice to increase the effectiveness of information, advice, guidance and support to those that both deliver our services and those that access the charities range of offers.

- To develop and promote effective multi-agency working relationships with other agencies and sectors engaged in the protection, safeguarding and wellbeing of adults, children and young people.
- To be proactive in contributing to Supportability's Safeguarding Panel and action plan by review of policies and procedures in order to maintain a safe, legal and compliant position in reference to the effectiveness of Supportability's approach to safeguarding.
- To liaise and direct Supportability's Learning and Development Manager to ensure training on safeguarding processes, policy and national updates as relevant to colleagues and their roles and volunteers to ensure procedures are implemented, embedded and understood by all.
- To listen to and act upon staff safeguarding concerns.
- To ensure that safeguarding and child/adult protection record keeping is comprehensive, understandable, appropriately completed by managers and up to date at all times.
- Undertake reports for the local council with regard to regular information sharing on safeguarding concerns, lessons learnt and actions taken.
- To liaise with HR to ensure compliance with safer recruitment of staff is in place and effective.
- In conjunction with the Learning and Development Manager to audit and quality assure safeguarding procedures to ensure compliance, quality and a values based working culture so that statutory and Supportability requirements are met at all times.
- Ensure lessons learnt through safeguarding panel exercises and general updates on safeguarding are cascaded to all Supportability staff in order to improve practice and inform.
- Act as a point of contact to support and advise Supportability managers on safeguarding reporting and adhering to process.
- To manage and supervise the Deputy Designated Safeguarding Lead. (The DSL will remain as the accountable authority at all times).
- To provide advice on the need for capacity assessments where required.
- To represent Supportability at any relevant strategy, case conference and review meetings and to provide formal reports where required.
- To ensure that, where required, any referrals of employees to the Disclosure and Barring Service are made in conjunction with HR.

Training

- The DSL will receive appropriate safeguarding and adult/child protection training at least every two years, as well as attending other relevant conferences, courses and seminars to ensure they remain up to date and informed to ensure safeguarding remains a priority focus for the charity.
- The DSL will attend the local councils MCA & Safeguarding Champions Forum meetings representing Supportability and providing a 2-way source of

information sharing between the forum and Supportability's Safeguarding Panel.

Deputy Designated Safeguarding Lead

- The role of the Deputy DSL is to deputise in the absence of the DSL. The DSL remains the accountable authority at all times and all decisions relating to child/adult protection concerns will be taken by the DSL.
- The Deputy DSL will also undertake the necessary training to reflect the requirements of the role

Section 3: Was the service user injured? (tick relevant box)

Yes	
No	

If yes, provide details including parts of the body injured – please also complete a body map

--

Section 4: What action did you take, who did you report it to and when?

--

Name of person completing the form	
Signature	
Date:	

THIS SECTION IS TO BE COMPLETED BY MANAGERS ONLY

5. Is this a safeguarding issue?

(tick relevant box)

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

If no, ask the support worker to complete an Incident and Accident Reporting Form.

6. Has the service user given consent (if 16 or over) for the issue to be reported externally?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
If no, is a capacity assessment required or are there circumstances in which the service user's refusal be overridden?	<input type="checkbox"/>
Not applicable (child under 16)	<input type="checkbox"/>

7. Manager Reporting

What date/time did you report it?	<input type="text"/>										
Who did you report it to? (Tick the relevant box or boxes)	<table border="0"> <tr> <td>Local authority/social worker</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Police</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Care Quality Commission</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Family</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Head of Service/Head of Ops</td> <td><input type="checkbox"/></td> </tr> </table>	Local authority/social worker	<input type="checkbox"/>	Police	<input type="checkbox"/>	Care Quality Commission	<input type="checkbox"/>	Family	<input type="checkbox"/>	Head of Service/Head of Ops	<input type="checkbox"/>
Local authority/social worker	<input type="checkbox"/>										
Police	<input type="checkbox"/>										
Care Quality Commission	<input type="checkbox"/>										
Family	<input type="checkbox"/>										
Head of Service/Head of Ops	<input type="checkbox"/>										
What action was taken?	<input type="text"/>										
Have you completed the Supportability Safeguarding Logging Form	Yes <input type="checkbox"/> No <input type="checkbox"/>										
If yes, when	<input type="text"/>										

8. Other manager action taken

Did you have a debrief with the staff involved? Yes No
 If no, why not

Further action required in relation to service user (tick relevant boxes and identify date for this to be done)

Update assessment	
Update/draft support plan	
Update/draft risk assessment	
Update/draft Positive BSP	
Update/draft other documentation (please specify)	

Further action required in relation to staff (tick relevant boxes and dates for this to be done)

Inform other managers	
Raise in supervision	
Provide training/guidance/support	
Need for formal action (eg. disciplinary)	
Review of working practices required	
Inform other staff working with the service user about any changes made	

Name of manager	Date
Signature of manager	

9. Senior manager review

No further action required (tick box)	Yes		No	
If yes what further action is required? (tick relevant box)				
Serious incident review	Yes		No	
Report to HOO and/or Safeguarding Panel	Yes		No	
Does this need reporting externally? externally? (eg. to CQC or to the Charity Commission) If yes, who to and when? (Please look at the guidance to see examples of when the issue may need reporting externally)	Yes		No	
Name of senior manager	Date			
Signature of senior manager				

Guidance on reporting and recording health and safety and safeguarding issues: Which form do I complete?

We now have two reporting forms for the formal reporting of health and safety and safeguarding concerns. They are a Safeguarding Form for all safeguarding issues and an Incident and Accident Reporting Form for all health and safety issues. The key issue is to understand which form to complete and Page 1 of this guidance aims to clarify this for support workers and managers. Page 2 onwards provides guidance on completion of the two forms.

1. Is it a safeguarding issue? eg. something that causes harm or potential harm to a service user such as a serious medication error, allegation or disclosure of potential abuse by staff, parent/carer, other service user, member of the public)

Yes – complete Safeguarding Form

No – go to section 2

2. Was it an incident, accident, discovery, error or near miss but not a safeguarding issue. For example was it:
 - An example of behaviour that was challenging by the service user but did not cause any injury to anyone;
 - An example of behaviour that was challenging by the service user that did result in injury to staff or member of the public;
 - An accident eg. a slip, trip or fall;
 - A discovery such as spotting a mark or a scratch on a service user's body but it did not occur at the time you were supporting them?. But think this through as it could be a safeguarding issue;
 - A near miss (eg. an accident was narrowly avoided);
 - An error – a mistake was made: again think this through as it could be a

Yes – complete accident and incident form

No/not sure – go to section 3

3. If you answered no or not sure to Section 2 then you need to get some advice about what to do and which form you need to complete. Speak to a manager or Team Leader to discuss the issue and identify what action needs to be taken.

Guidance for support workers and managers on completion of Safeguarding Reporting Form

Sections 1 – 4 are to be filled in by the person reporting the incident

1. Basic details

Put the name of the service user in the relevant box. Complete the date and time and where the issue was disclosed/ or where you witnessed the alleged abuse.

2. Description of what happened

This is a factual description of what was disclosed to you. The information you should provide is a description of what happened using the words of the service user / person who disclosed the information.

Other information that is important includes:

- date(s) of alleged abuse;
- identity of alleged abuser(s);
- location of abuse;
- whether the person was injured.

Use the words of the person who discloses the alleged abuse rather than your own. Remember you are reporting on what was said to you so just write down the facts of what was said to you. You can include your observation of how the person who disclosed behaved (eg. seemed nervous, frightened, worried etc), but be careful not to make assumptions. If the form does not give you enough room then please use another sheet of paper but remember to sign and date that as well.

3. Injuries

If you observed any injuries use this part of the form to describe those injuries and complete a body map as well. Injuries may be bruises, marks, cuts or scratches.

4. Action Taken

Use this section to state what you did after the disclosure or after you had observed alleged abuse. For example, did you reassure the service user, how and who did you report the issue to. Don't forget to print your name, sign and date the form.

Sections 5 – 8 are to be completed by first line managers/team leaders

5. Is this a safeguarding issue?

This is just a check to make sure that the correct form has been completed. If you are not sure please check with another manager/team leader or a more senior manager

6. Has the service user given consent (if 16 or over) for the issue to be reported externally?

Supportability's Safeguarding Adults Policy requires that we ask service users who are 16 or over for permission to report the safeguarding issue. See Section 7 of the Safeguarding Adults Policy for more information. This can be quite a complicated issue and you may need to seek advice about any issues that are raised in relation to mental capacity.

7.& 8. Manager Reporting/manager action taken

These sections are there for first line managers/team leaders to identify what they did, for example:

- provide basic information on the date/time you reported the concern to the relevant local authority and/or other body;
- who you reported it to (a tick list – you can tick more than one box);
- the action taken as a consequence of the report;
- whether you have completed the Safeguarding Logging Form;
- other action you have or will take in relation to keeping the service users safe such as updating documentation like risk assessments, care plans etc

REMEMBER SAFEGUARDING ISSUES MUST BE REPORTED TO THE RELEVANT BODY WITHIN 24 HOURS OF THE INCIDENT

9. Senior manager reporting

This section is for a senior manager (usually a Head of Service) to identify whether the form has been completed properly, the appropriate actions taken and whether any other action (eg. a more detailed or widespread investigation because of its severity or where wider lessons can be learned). A senior manager should review the information on the form and only sign it off when they are satisfied that it is accurate and sufficiently detailed, and that any identified actions are either in place or are being undertaken properly.

The senior manager should check whether the safeguarding issue needs to be reported to the CQC or to the Charity Commission. In the case of the Charity Commission, the guidance is that serious incidents should be reported to the Charity Commission and in relation to safeguarding, the Charity Commission give guidance on the type of issues that should be reported. These are:

- A beneficiary or other individual connected with the charity's activities has/alleges to have suffered serious harm
- An allegation that a staff member has physically or sexually assaulted or neglected a beneficiary whilst under the charity's care
- A beneficiary or individual connected with the charity's activities has died or been seriously harmed; a significant contributory factor is the charity's failure to implement a relevant policy
- The charity failed to carry out DBS checks which would have identified that a member of staff or trustee was disqualified in law (under safeguarding legislation) from holding that position

10. Timescales for completion

Parts 1 – 4 of the form must be completed as soon as possible, and at the very latest must be completed and forwarded to the staff member's line manager/team leader within 24 hours.

The line manager must report the issue to the relevant Safeguarding Team within 24 hours and then complete sections 5 – 8, and forward to the Head of Service within 5 working days. If this is a serious case the line manager must notify the Head of Service, or if unavailable the Head of Operations immediately and complete the form within 24 hours.

Section 9 must be completed within and then passed to the Administration for logging within 5 working days.

Appendix 5: Reporting cases to Stockport MBC: role of the referrer

The procedure for internal recording of safeguarding concerns is the same as for Safeguarding Adults, except for the issue of requesting consent from the service user concerned and assessing mental capacity.

The procedure for reporting safeguarding issues to Stockport MBC is as set out below.

1. **Contacting the Multi-Agency Safeguarding and Support Hub (MASSH)** - The Multi-Agency Safeguarding and Support Hub (MASSH) is the single point of contact for professionals to report concerns, request advice and share information about a child and or family.
2. Before you make a referral, you should have the consent of the family unless this will put the child at risk of harm.
3. If the child is at immediate risk of harm call the Police on 999 and, if it is your judgement that the MASSH require this information immediately as the child has suffered significant harm or is at risk of immediate of harm you should call the MASSH team on 0161 217 6028 and select Option 1. For out of hours emergencies call the team on 0161 718 2118.
4. In all other cases which require reporting please contact the MASSH team using their online form here:

<https://www.stockport.gov.uk/contacting-the-massh#:~:text=Members%20of%20the%20public,child%2C%20call%200161%20217%206028>
5. If required, you can also report the matter on 0161 217 6028.
6. Before using the online reporting form make sure that you have the following information:
 - your contact details
 - contact details of your manager
 - date of birth, address and employment details of the employee, volunteer or professional whom the allegation is about
 - details of the child or young person you're concerned about, including their date of birth and address
 - details of the allegation, including dates, times, evidence and steps taken so far
 - any evidence you may have.
7. Once your form has been submitted, the MASSH team aims to contact you within 2 working days. If you've not heard from the MASSH team within that period, call **0161 474 5657**.

8. **Contacting the Designated Officer**

The Designated Officer for the Local Authority, previously known as LADO, is the single point of contact for all professionals to report concerns, request advice and share information regarding a concern or allegation against an employee, volunteer or professional working with or providing services to children in Stockport. If you want to contact the Designated Officer you can use the online form or if you wish to contact the Designated Officer by phone you can call 0161 474 5657.

Appendix 6 – Support for staff

Supportability will provide support for staff who:

- witness abuse or support a service user who is the alleged victim of abuse;
- are alleged perpetrators;
- are colleagues of staff who are alleged perpetrators of abuse;
- support service users who make persistent allegations which prove unfounded;
- are involved in investigating concerns or allegations;

Support may include, as appropriate:

- additional training;
- provision to manage the workload of staff involved in dealing with a concern / allegation;
- debriefing sessions following incidents;
- reinforcing that staff members who raise concerns have done the right thing and that they are not responsible for any subsequent consequences faced by the alleged perpetrator;
- offering a counselling service and/or contact with advice and support groups, including trade unions (the latter particularly for the alleged perpetrator);
- increased frequency of supervision sessions, and through supervision looking at any pressures arising from reporting the alleged abuse and identifying practical steps to reduce those pressures;
- in addition, if an alleged perpetrator is suspended, regular contact with the staff member should be maintained - this should focus on ensuring that the staff member understands the procedures and is kept up to date with any other pertinent organisational information, rather than the details of the allegations. This support will be provided by a allocated named member of Supportability staff not directly involved in the investigation.
- other members of staff should not discuss the incident with the alleged perpetrator.

Appendix 7- Children and Young People in Distress

In certain settings, staff and volunteers may be involved in managing significant or regular occurrences of distress and emotional upset in children. In such circumstances professional guidance should be followed and staff and volunteers should be familiar with what is and is not acceptable when comforting a child or diffusing a situation. This is particularly important when working on a one-to-one basis with a child. Appropriate support and supervision should be available.

There may be occasions when a distressed child needs comfort and reassurance, which may involve physical contact. Young children, in particular, may need immediate physical comfort, for example after a fall, separation from a parent etc. Staff and volunteers should use their professional judgement to comfort or reassure a child in an age-appropriate way. Any contact made should not be threatening or intrusive.

Where a member of staff or volunteer has a particular concern about the need to provide this type of care and reassurance, or is concerned that an action may be misinterpreted, advice should be sought from their manager or supervisor.

Appendix 8 - Infatuations

Staff and volunteers need to be aware that it is not uncommon for children and young people to be attracted to a member of staff and / or develop a heterosexual or homosexual infatuation. All situations should be responded to sensitively to maintain the dignity of all concerned.

Staff and volunteers should also be aware that such circumstances can carry a high risk of words or actions being misinterpreted and as a result, for allegations to be made against them.

A member of staff or volunteer who becomes aware that a child or young person may be infatuated with themselves or a colleague, should discuss this at the earliest opportunity with a supervisor or line manager so that appropriate action can be taken. In this way, steps can be taken to avoid hurt and distress for all concerned. Any such incident should be recorded in writing.

Appendix 9 - Physical Contact

When physical contact is made with a child or young person this should be in response to their needs, be of limited duration and appropriate to their age, stage of development, gender, ethnicity and background (eg. any previous history of being abused if this is known). Adults should use their professional judgement at all times and should maintain self-awareness of the dynamics of the relationship between themselves and the children and young people with whom they are working.

It is important to avoid making assumptions about whether a child wants any form of physical contact or not. Where feasible, adults should seek the child's permissions or explain to the child what they are going to do before initiating contact. Adults should listen, observe and take note of the child's reaction or feelings and – so far as is possible – use a level of contact and/or form of communication which is acceptable to the child for the minimum time necessary.

Physical contact which occurs regularly with an individual child or young person should be part of a formally agreed support plan, within the parameters of protocols on physical contact, for example regarding medical procedures. Any such

arrangements should be understood and agreed by all concerned, (including the child or young person wherever possible, and the parents/carers); justified in terms of the child's needs; consistently applied; and open to scrutiny.

Where a child seeks out or initiates physical contact with a worker or volunteer, the situation should be handled sensitively, but care always taken to ensure that such contact is not exploited in any way. Appropriate advice and support needs to be given to the member of staff, and consideration given to the needs of the child.

It is recognised that many children having experienced abuse may seek out inappropriate physical contact. In such circumstances adults should deter the child sensitively by helping them to understand the importance of personal boundaries.

Accordingly staff and volunteers must:

- be aware that even well intentioned physical contact may be misconstrued by the child, an observer, or by anyone to whom this action is described;
- always be prepared to report and explain actions and accept that all physical contact is open to scrutiny;
- never indulge in horseplay, unless this is deemed acceptable as set out in care or behaviour support plans;
- always encourage children, where possible, to undertake self-care tasks independently;
- work within health and safety regulations (see Supportability's Health and Safety Policy and Procedures);
- be aware of cultural or religious views about touching;
- be sensitive to issues of gender.

Appendix 10 - Other Activities that Require Physical Contact

Staff and volunteers, will, on occasions, have to initiate physical contact with children, (eg. to demonstrate techniques in the use of a particular piece of equipment, adjust posture, or perhaps to support a child so they can perform an activity safely or prevent injury). Such activities should be carried out in safe and positive environment and any rules, regulations and best practice that apply should be followed.

Physical contact should take place only when it is absolutely necessary in relation to the particular activity, for the minimum time necessary to complete the activity and take place in an open environment (ie. easily observed by others). Excessive physical contact must be avoided. All contact should be undertaken with the child/young person's understanding and agreement and adults should remain sensitive to any discomfort expressed verbally or non-verbally by the child.

Any incidents of physical contact that cause concern or fall outside of existing Supportability guidance should be reported to the appropriate line manager.

It can be helpful if expectations of behaviour in relation to the activity being provided are made clear to the child or children prior to commencement of the activity session. Similarly, keeping parents / carers informed of these expectations and of the nature of any physical contact that is likely to be necessary may also prevent allegations of misconduct or abuse arising.

This means that staff and volunteers should:

- treat children with dignity and respect and avoid contact with intimate parts of the body (please refer to Supportability's Intimate Personal Care Policy);
- always explain to a child the reason why contact is necessary and what form that contact will take;
- consider alternatives, where it is anticipated that a child might misinterpret any such contact, be familiar with and follow recommended guidance and protocols;
- conduct activities where they can be seen by others;
- be aware of gender, cultural or religious issues that may need to be considered prior to initiating physical contact.

Appendix 11 - Sexual Contact

Staff and volunteers working with children and young people are in positions of trust in relation to the young people, by virtue of their knowledge, position, and / or the authority invested in their role. A relationship between an adult and a child or young person cannot be a relationship between equals. Staff and volunteers have a responsibility to ensure that an unequal balance of power is not used for personal advantage or gratification.

Where a person aged 18 or over is in a position of trust with a child under 18 any sexual behaviour by an adult towards a child or young person is both inappropriate and illegal (Sexual Offences Act 2003). The sexual activity referred to does not just involve physical contact. It may also include non-contact activities, such as causing children to engage in or watch sexual activity or the production of pornographic material.

Adults should be aware that consistently conferring special attention and favour upon a child might be construed as being part of a 'grooming' process, which is also an offence.

Accordingly, staff and volunteers must not:

- pursue sexual relationships with children and young people either in or out of their workplace;
- communicate with a child or young person in any way which could be interpreted as sexually suggestive or provocative i.e. verbal comments, letters, notes, electronic mail, phone calls, texts, physical contact;
- make sexual remarks to, or about, a child/young person

- discuss their own sexual relationships with or in the presence of children or young people.

Appendix 12 - Social Contact

When working with children and young people staff and volunteers should not try to establish social contact (ie. contact outside of the times when they are providing care and support as part of their paid or voluntary role) with children and young people or their parents/carers or close relatives for the purpose of securing a friendship or relationship. Whenever a child or parent seeks to establish social contact professional judgement will need to be exercised in making a response.

Some workers or volunteers may support a parent/carer who may be in particular difficulty. The parent/carer may come to depend upon the worker for support outside their professional role. This situation should be discussed with line managers, and where necessary referrals made to the appropriate support agency.

Appendix 13 – Supporting outside the home, and on short residential breaks

Staff and volunteers should take particular care when supervising children and young people in less formal settings such as residential breaks. Staff and volunteers are in a position of trust and need to ensure that their behaviour cannot be interpreted as seeking to establish an inappropriate relationship or friendship.

Where these activities include overnight stays, careful consideration needs to be given to sleeping arrangements. Children, young people and parents/carers should be informed of these prior to the start of the trip.

Health and safety arrangements require members of staff to keep colleagues/employers aware of their whereabouts, especially when involved in activities outside the usual workplace.

This means that staff and volunteers should:

- undertake risk assessments in line with organisation's policy;
- have parental consent to the activity;
- ensure that their behaviour remains professional at all times;
- never share beds or bedrooms with a single child or young person;
- inform Supportability's out of hours on call service of the break date, location, travel arrangements and details of children and young people, volunteers and staff attending.

Appendix 14 – Bullying (including cyberbullying)

Bullying can be described as the wilful, conscious desire to hurt, threaten or frighten somebody either physically, verbally and mentally.

Cyberbullying is when a person is tormented, threatened, harassed, humiliated, embarrassed or otherwise targeted by another person by way of the internet, interactive and digital technologies, mobile phones or email.

The following can constitute bullying:

- physical assault – kicking, punching or hitting;
- name calling;
- threatening anyone;
- picking on people;
- teasing;
- forcing people to do something against their will;
- being unkind to people.

It is also important to note that children's relationships to others can vary tremendously. Children can be the best of friends one day and at loggerheads the next. Parents and staff, therefore, need to be aware that temporary breakdowns in relationships do not necessarily constitute bullying and are especially likely to occur in smaller familiar settings.

Supportability aims to prevent any incidents of bullying occurring at any time and aims to:

- provide an environment in which children feel safe and able to express themselves without fear or intimidation.
- maintain a co-operative ethos in which the service, the children and the parents work together to prevent bullying.
- help children to gain the personal qualities and self esteem needed to minimise the risk of bullying.
- identify children at risk and respond positively to their needs.
- respond firmly to incidents of bullying.

Staff should be watchful and observe relationships and ensure that there is appropriate supervision of children during unstructured time. In addition, children should be made aware and periodically reminded that they should report incidents.

Action to take if a child has been bullied

A swift response is essential in order to act responsibly. After stopping the bullying occurring the following actions should be taken:

- confirm that the child is not physically injured. If the child is physically injured, this should be dealt with immediately;
- show concern and support for the child who has been bullied (in presence of the other children involved if appropriate);
- try to reassure the child who has been bullied;

- wait for the situation to calm before trying to find out what happened and then take time to listen carefully and establish the facts and factors involved. Bystanders may provide important background information;
- tell both parties that the matter will be dealt with and that the parents of those involved will be informed;
- talk over the incident, the problems behind it, and possible solutions with all concerned as soon as possible;
- ensure written reports are in service users' files etc.

Guidelines for informing parents

All parents should be consulted if there are any concerns about their children. They may be able to help solve problems or provide information which could prevent serious incidents occurring.

The parents of the victim and the bully should be informed if:

- a physical injury has occurred;
- the incident involved a number of children bullying the same child;
- an older child is bullying a much younger one or vice versa;
- the victim is very distressed and frightened;
- the bullying is repeated.

Appendix 15 – E-safety

The Sexual Offences Act 2003 sets out a legal framework to protect children from sexual abuse. Children under the age of 13 years can never legally give their consent to sexual activity. Accessing indecent (inc. making or storing) images of children on the internet is illegal. This will lead to criminal investigation and if proven, the individual barred from working with children and young people.

There are a range of issues in relation to e-safety. The main issues relate to:

- communication using electronic technology eg. email, texting, messaging, blogging;
- use of electronic equipment including consent for Supportability to take and use images of children for its work eg. marketing and publicity;
- accessing pornography or inappropriate images;
- use of mobile phones;
- use of the internet including social media.

Communication using electronic technology

Communication between children and staff/ volunteers should take place within professional boundaries avoiding inappropriate adult personal subject matter. In relation to the use of electronic technology staff and volunteers should be careful to maintain professional boundaries. This applies to all forms of communication

technology, including mobile phones, text messaging, emails, videos, web-cams, websites and blogs.

Personal contact details (including email, home or mobile telephone numbers) should not be given to children and young people, unless the need to do so is agreed with line managers.

Staff should only use their work email account to communicate with service users, and should not use their personal email account to communicate with services users and parents/carers or other members of their families without a manager's knowledge or permission.

Use of electronic equipment

Whenever staff / volunteers engage children and young people in activities requiring IT equipment, and/or cameras, this equipment must have been provided by or on behalf of Supportability. On no account must personal equipment be used. It is essential that parents/carers are aware and consent to such activities and to the use of videos, photographs and other images of their children/ those they care for. Once images have been downloaded they should be deleted from the device they were originally taken on. Images should not be downloaded to your own personal electronic equipment, and you should not retain any images for your personal use, or distribute any images. Whenever an image is to be used for any purpose, but especially for any publicity purposes written agreement must be sought from parent/carer.

Accessing pornography and/or indecent images

Under no circumstances should any adult use Supportability equipment to access pornographic or indecent images. Personal equipment containing these images or links to them should never be in the possession of Supportability staff or volunteers.

Supportability staff and volunteers should ensure that children and young people are not exposed, through their work, in any medium, to pornographic, inappropriate or indecent images.

Where indecent images of children or other unsuitable material are found staff or volunteers should report this matter as a safeguarding issue. Supportability staff and volunteers should not attempt to investigate the matter or evaluate the material themselves, as this may lead to evidence being interfered with, which in extreme circumstances can lead to a criminal prosecution.

If staff or volunteers receive any indecent image either via email or any other electronic device, whilst at work they need to report this to their line manager. It is important that the material is not downloaded, printed or sent by email or other electronic device.

Use of mobile phones

Staff and volunteers should not use mobile phones for personal use while at work, and not share their mobile phone number with vulnerable children.

Use of cameras on personal mobile phones whilst working is also prohibited. Staff should not download material onto their phones during working hours.

The use of mobile phones is prohibited by law whilst driving to, during and from work unless the member of staff is using an approved hands-free set. The use of a mobile phone is prohibited if a service user is travelling in the vehicle.

Use of the internet and social media

Access to the internet is for business purposes and downloading or accessing pornography or indecent images is not allowed, and may result in disciplinary action, and potentially, criminal proceedings. If any indecent or inappropriate content is accessed by mistake then this should be reported to line management. Accessing or downloading indecent or illegal material may result in criminal proceedings

Staff and volunteers should not use social networking sites whilst at work and should also ensure that their use of social networking sites or other IT facilities outside of work does not bring the Society into disrepute. Staff and volunteers must not include details of individual service users or upload images of service users on social networking sites. Staff and volunteers should also not communicate with service users or parents/carers through networking sites or have them as “friends” on their site.

Supportability advises that staff and volunteers should not accept people that you do not know as friends and be aware that belonging to a “group” can allow access to your profile.

Supportability advises that staff and volunteers do not have an open access profile that includes inappropriate personal information and images, photos or videos.

Supportability advises that staff and volunteers who have personal social media accounts ensure that their security and privacy settings are not open access, and should ask family and friends not to post tagged images of themselves on open access profiles.

Appendix 16 – child sexual exploitation

Child sexual exploitation can be described as involving exploitation situations, contexts and relationships where young people (or a third person or persons) receive “something” (e.g. food, accommodations, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child’s immediate recognition; for example, being

persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationship being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

All staff and volunteers working with children and young people should be alert to signs of potential child sexual exploitation which is a form of child sexual abuse. It is easy to misinterpret behaviours in teenagers in particular as being attributed to factors other than child sexual exploitation. All staff and volunteers must be alert to the possibility that exploitation from individuals or groups of adults is a possible reason for poor behaviour. When a child or young person is at risk of, or is suffering sexual exploitation, action must be taken to ensure that the child or young person is safeguarded.

This responsibility includes the following:

- being alert to signs of sexual exploitation;
- consulting managers about any concerns identified in order to agree appropriate action and referring to social care in accordance with agreed criteria;
- sharing information at the earliest possible stage to enable professionals to consider jointly how to proceed in the best interests of the child or young person;
- contributing as appropriate to agreed action to safeguard a child or young person;
- supporting and assisting action taken against those who exploit children and young people as necessary in order to minimise further risk of harm.