

Safeguarding Children Policy & Procedure

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Safeguarding Children Policy

Approved:

Reviewed: 9 June 2020

Review due:

1. Purpose of policy

YMCA East Surrey is fully committed to safeguarding the welfare of all children and young people. We recognise our responsibility to take all reasonable steps to promote safe practice and to protect children from harm, abuse and exploitation. YMCA East Surrey acknowledges its duty to act appropriately to any allegations, reports or suspicions of abuse. Members of staff will endeavour to work together to encourage the development of an ethos which embraces difference and diversity and respects the rights of children, young people and adults.

This policy applies to all staff, including senior managers and the Board of Trustees, paid staff, volunteers and sessional workers, agency staff, students or anyone working on behalf of YMCA East Surrey. Please note, all references to "members of staff" should be interpreted as meaning all staff, whether they are in a paid or unpaid capacity.

This policy is focussed on children up to 18 years old, however YMCA East Surrey also takes its responsibility for safeguarding vulnerable adults over 18 years old extremely seriously and where relevant and appropriate the guidance included in this policy covers our work with over 18's. YMCA East Surrey also has a separate [Safeguarding Adults policy](#) that specifically covers safeguarding of vulnerable adults.

2. COVID-19 (coronavirus) addendum

During the global pandemic of COVID-19 (coronavirus), although day-to-day working arrangements may be different, the key principles of YMCA East Surrey safeguarding policy remain the same:

- ▶ Children's welfare comes first
- ▶ If anyone has a concern about a child, staff should act immediately following the safeguarding and child protection procedures
- ▶ A nominated Designated Safeguarding Lead should always be available to deal with concerns, in their absence nominated DSL's are available to deputise
- ▶ Safe recruitment practices continue to be followed

This addendum is contained within Appendix 11B seeks to reinforce existing child protection procedures:

- ▶ highlighting any new ways of working during this period, especially on-line communication
- ▶ clarify any changes to the Code of Conduct for staff and volunteers in response to new ways of working

3. Responsibilities and monitoring

Monitor:	Head of Children and Young People
Approve:	Board of Management
Endorse:	Finance and Resources Committee
Propose:	Children and Young People's Advisory Group
Draft and review:	Training and Development Manager

YMCA East Surrey believes that:

- ▶ The welfare of the child is paramount;
- ▶ All children, whatever their age, culture, disability, gender, language, racial origin, religious beliefs and/or sexual identity have the right to protection from all types of harm and abuse;
- ▶ All suspicions and allegations of abuse should be taken seriously and responded to swiftly and appropriately;
- ▶ Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues;
- ▶ Working in partnership with children, young people, their parent/carers and other agencies is essential in promoting young people's welfare.

YMCA East Surrey will ensure that:

- ▶ All children will be treated equally and with respect and dignity;
- ▶ The welfare of each child will always be put first;
- ▶ A balanced relationship based on mutual trust will be built which empowers the children to share in the decision-making process;
- ▶ Enthusiastic and constructive feedback will be given rather than negative criticism
- ▶ Bullying will not be accepted or condoned;
- ▶ All staff and trustees provide a positive role model for dealing with other people;
- ▶ Action will be taken to stop any inappropriate verbal or physical behaviour;
- ▶ We will keep up-to-date with health & safety legislation;
- ▶ We will keep informed of changes in legislation and policies for the protection of children (CEO, Designated Safeguarding Leads and Trustee Safeguarding Lead to take responsibility for this);
- ▶ All staff and trustees should be clear on how to respond appropriately;
- ▶ Staff and trustees undertake relevant development and training;
- ▶ We will hold a register of every child involved with YMCA East Surrey and will retain a contact name and number close at hand in case of emergencies.

4. Legal procedural framework

YMCA East Surrey will ensure it recognises its duty of care and meets its legal responsibilities as outlined in the following legislation relating to safeguarding children and young people:

- ▶ Adoption and Children Act 2002
- ▶ Children and Families Act 2014
- ▶ Children and Social Work Act 2017
- ▶ Children and Young Persons Act 1963
- ▶ Children and Young Persons Act 2008
- ▶ Counter-Terrorism and Security Act 2015
- ▶ Education Act 2002
- ▶ Female Genital Mutilation Act 2003
- ▶ Protection of Freedoms Act 2012
- ▶ Safeguarding Vulnerable Groups Act 2006
- ▶ Serious Crime Act 2015
- ▶ Sexual Offences Act 2003
- ▶ The Children Act 1989 and 2004
- ▶ The Criminal Justice and Court Services Act 2000
- ▶ Working Together to Safeguard Children 2015

YMCA East Surrey will also work closely with, and adhere to the guidelines issued by, the relevant Local Safeguarding Children Partnerships in areas where YMCA East Surrey

delivers services (currently Surrey and West Sussex) details of which can be found here: <https://www.surreyscp.org.uk/> and <https://www.westsussexscp.org.uk/>

4.1. Department of Health: Special Educational Needs and Disability Code of Practice 2015: 0 to 25 years

YMCA East Surrey delivers a range of services and activities for children and young people with special educational needs and disabilities and recognises its responsibilities to deliver these services in accordance with the Department of Health's Special Educational Needs and Disability Code of Practice 2015: 0 to 25 years. As a voluntary sector provider of Early Years funded by the local authority we have a statutory duty to follow this code.

Details of the code can be found here:

<https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

5. Safeguarding accountability within YMCA East Surrey

Safeguarding is the responsibility of us all. When dealing with the concerns discussed in this policy, the lines of accountability for responding appropriately apply to all members of staff. Appendix 1A of this policy (page 5) provides an accountabilities framework for staff.

Members of staff are expected to consult their Line Manager when they have any concerns for the welfare of a child and to discuss any issue openly within supervision. These managers will consult, if needed, with their Heads of Services.

If a staff member has concerns about the attitudes and/or behaviours of a YMCA East Surrey colleague/volunteer, they have a duty to comply with [YMCA East Surrey's Whistle Blowing policy and Code of Conduct](#).

Should any member of staff have concerns about the behaviour of a member of staff or volunteer towards a child, including staff from other organisations, then please refer to section 9 (page 13) of the Safeguarding Children procedure and follow the guidelines for reporting internally and to the Local Authority Designated Officer (LADO).

6. Relevant YMCA East Surrey policies and procedures

All staff involved with safeguarding children work, need to bear in mind the other organisational policies which support their work and provide guidance:

- ▶ Behaviour management
- ▶ [Bullying and Harassment](#)
- ▶ [Code of conduct](#)
- ▶ [Complaints](#)
- ▶ [Confidentiality](#)
- ▶ [Equality and diversity](#)
- ▶ [Health and safety](#)
- ▶ [Inclusion](#)
- ▶ [Lost or missing child](#)
- ▶ [No smoking, drugs and alcohol](#)
- ▶ [Non-collection of a child](#)
- ▶ [Personal and intimate care](#)
- ▶ [Recruitment and selection](#)
- ▶ [Safeguarding Adults](#)
- ▶ [Tactile contact](#)
- ▶ [Use of mobile phones and wearable technology](#)
- ▶ [Visitors and non-vetted persons](#)

▶ [Whistleblowing](#)

Appendix 1A

Safeguarding accountability with YMCA East Surrey

Trustees

- ▶ Accountable for YMCA East Surrey and therefore all safeguarding within the organisation;
- ▶ Receive regular reports on safeguarding;
- ▶ Receive annual safeguarding training and updates.

Safeguarding Designated Trustee

- ▶ Accountable to the Board of Trustees for the development of safeguarding within the organisation;
- ▶ Meets quarterly with the Chief Executive (Head of Safeguarding);
- ▶ Provide reports to the Trustees and attends the Board of Trustees meeting as required;
- ▶ Act as the designated person for the organisation;
- ▶ Regularly receive and collate information in respect of safeguarding activity to inform a corporate assessment of risk;
- ▶ Reviews the Safeguarding Children's policy and procedure, with the support of Heads of Services;
- ▶ Receives safeguarding reports from various Advisory Boards.

Chief Executive – Head of Safeguarding

- ▶ Accountable to the Trustees for safeguarding within the organisation;
- ▶ Meets quarterly with the Safeguarding Designated Trustee;
- ▶ Ensures a clear framework for the management accountability for safeguarding.

Heads of Services – Senior DSLs

- ▶ Accountable to the Chief Executive for safeguarding in all projects and services within the various service lines;
- ▶ Line management responsibility for the safe delivery, quality and effectiveness of services;
- ▶ Commissions specific time limited work to address safeguarding issues;
- ▶ Together with HR ensure that safe recruitment practices are fully employed & that staff appointed have the necessary skills and experience in safeguarding appropriate to their role;
- ▶ Ensures that effective supervision supports safeguarding at all levels within the department;
- ▶ Ensures that a range of appropriate safeguarding training and budgets are available to meet the needs of the workforce;
- ▶ Commissions the auditing of specific areas of work;
- ▶ Receives internal reports as part of the Serious Case Review;
- ▶ Review the quality and content of YMCA East Surrey's Safeguarding training to meet the needs of the organisation and to ensure any new learning can be fully integrated into working practices.

Project Managers

- ▶ Accountable to the Heads of Services for safeguarding in projects and services within their region;
- ▶ Together with the HR Department ensure safe recruitment practices are fully employed in the recruitment of both staff and volunteers and that they have the necessary skills and experience in safeguarding, appropriate to the role;

- ▶ Line management responsibility for the safe delivery, quality and effectiveness of the services within their region;
- ▶ Ensure that safeguarding practice is regularly discussed in supervision to identify any training needs and is included within the staff appraisal process;
- ▶ Ensure all members of staff within their region receive the level of safeguarding training appropriate to their role and responsibilities;
- ▶ Ensure effective supervision supports safeguarding in their region;
- ▶ Reports on the practice and management of safeguarding in their region and responds to safeguarding audits, as required;
- ▶ Offer advice and support to staff on safeguarding issues;
- ▶ Ensure the development of a safeguarding culture within the context of their services;
- ▶ Undertake management reviews when there are concerns about quality and effectiveness in relation to safeguarding and take corrective action where necessary;
- ▶ Responsibility to establish and maintain effective relationships with other agencies locally in relation to safeguarding and to challenge when appropriate;
- ▶ Ensure that safeguarding is integral to all YMCA East Surrey processes for the assessment, analysis, planning and reviewing of outcomes, in our work with service users;
- ▶ Ensure that supervision sessions record reflective practice and any decisions made are transferred to the case file – all records are signed and dated;
- ▶ Make child protection referrals to Children’s Social Care, as necessary.

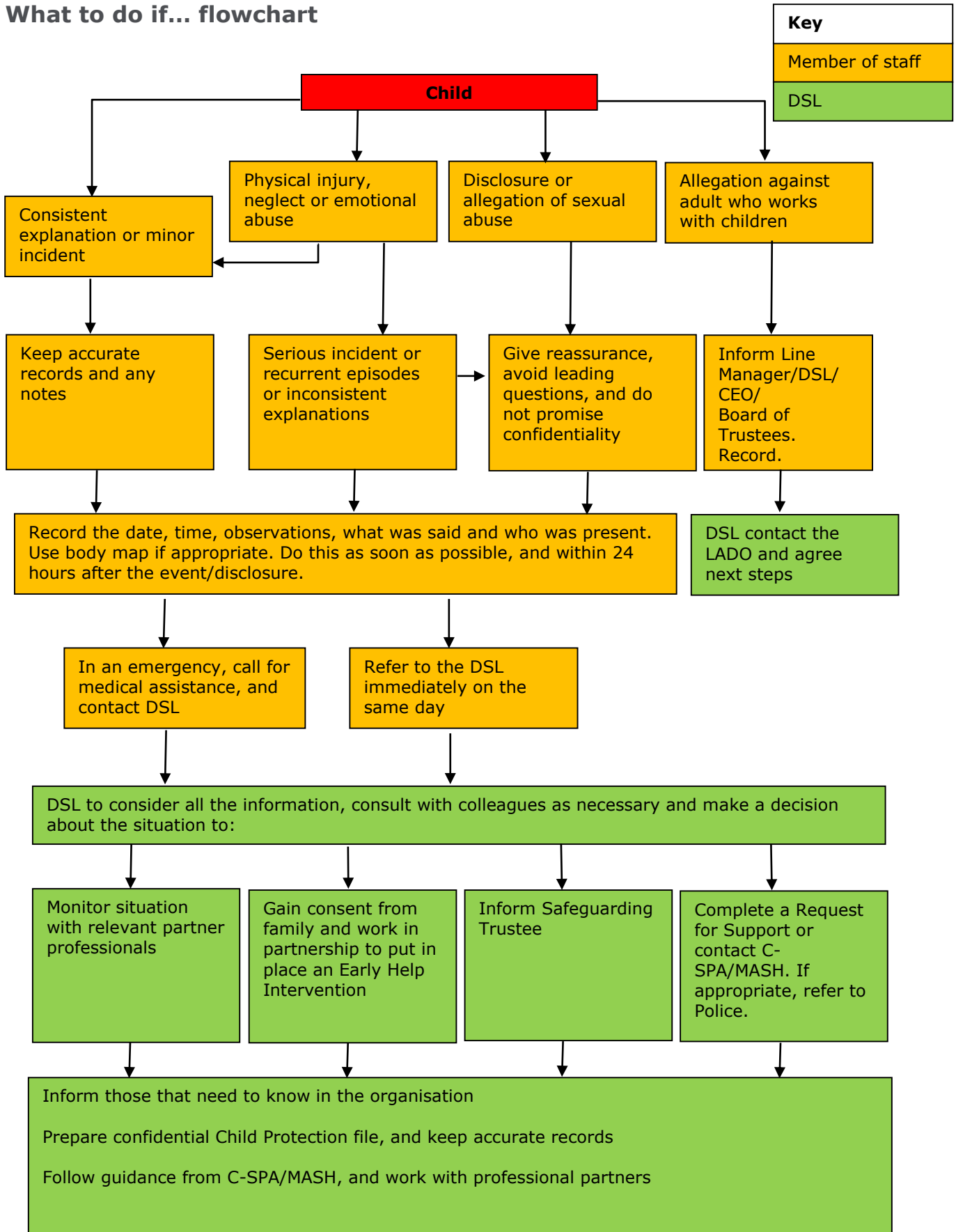
Designated Safeguarding Leads

- ▶ To offer consultation and advice locally, to staff together with appropriate managers, on safeguarding issues;
- ▶ See role profile within Appendix 3A (page 8) of this policy.

Front line members of staff

- ▶ Accountable to their project or service manager for safeguarding within their work;
- ▶ Responsibility for the safe delivery, quality and effectiveness of the services they provide;
- ▶ Are alert to safeguarding issues in all aspects of their work;
- ▶ Keep accurate and timely records which are signed and dated and comply with YMCA East Surrey’s procedures in relation to file format and management;
- ▶ Remember that the welfare of the child is paramount and draw to the attention of line management any concerns they may have for the welfare of a child;
- ▶ Use supervision and appraisal to reflect on practice in relation to safeguarding;
- ▶ Undertake safeguarding training as required.

Appendix 2A
What to do if... flowchart



Appendix 3A Designated Safeguarding Leads Profile

YMCA East Surrey will identify individuals with the requisite experience to act as the named Designated Safeguarding Lead (DSL).

The named person will be required to offer consultation and advice on safeguarding matters to other staff members.

The DSLs must have:

- ▶ Significant experience of working with child protection issues;
- ▶ A thorough and current knowledge of safeguarding guidance and legislation;
- ▶ Undertaken safeguarding training which has been appropriately updated;
- ▶ A sound understanding of their Local Safeguarding Children Partnership's Procedures;
- ▶ A comprehensive knowledge of local networks;
- ▶ The confidence and ability to use sound professional judgement.

It is for the DSL to work together with the project manager to make any decisions in respect of the case and to ensure that both the consultation and any decisions have been properly recorded.

The contact details of the Named DSLs can be found on section 8 (page 12) of the Safeguarding Children procedure.

Safeguarding Children Procedure

Approved:
 Reviewed:
 Review due:

1. Purpose of procedure

The purpose of this procedure is to ensure a speedy and effective response for dealing with concerns about the physical, sexual and emotional abuse of children or their neglect. Adherence to these procedures is mandatory for all YMCA East Surrey members of staff and volunteers. All staff new to YMCA East Surrey will be made aware of this policy and procedures through the induction process.

This procedure applies to all staff, including senior managers and the Board of Trustees, paid staff, volunteers and sessional workers, agency staff, students or anyone working on behalf of YMCA East Surrey. Please note, all references to “members of staff” should be interpreted as meaning all staff, whether they are in a paid or unpaid capacity.

This procedure is focussed on children up to 18 years old, however YMCA East Surrey also takes its responsibility for safeguarding vulnerable adults over 18 years old extremely seriously and where relevant and appropriate the guidance included in this policy covers our work with over 18’s. YMCA East Surrey also has a separate [Safeguarding Adults policy](#) that specifically covers safeguarding of vulnerable adults.

All staff should complete the internal Safeguarding Children brief during their induction period, and undertake the internal training within three months of their staff date. Managers and other relevant operational staff should undertake mandatory external Safeguarding Children training, at an appropriate level, at least every three years thereafter.

2. Responsibilities and monitoring

Monitor:	Head of Children and Young People
Approve:	Board of Management
Endorse:	Finance and Resources Committee
Propose:	Children and Young People Advisory Group
Draft and review:	Training and Development Manager

3. Definitions

YMCA East Surrey defines **safeguarding** as:

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

3.1 Children in Need

Children, as listed within Section 17 of the Children Act 1989, whose vulnerability is such that they are unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired without the provision of services by a local authority. This includes disabled children

3.2 Significant Harm

The Children Act 1989 introduces the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children. It places a duty on Children's Social Care to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm.

There are no absolute criteria for significant harm. Sometimes a single traumatic event may constitute significant harm e.g. a violent assault. More often, significant harm is a compilation of significant events both acute and long standing, which interrupt, change or damage a child's physical or psychological development. It is the corrosiveness of long term emotional, physical, sexual abuse or neglect, which causes impairment to the extent of constituting significant harm.

4. What is abuse and neglect

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or an institution or a community setting, by those known to them, or by a stranger. They may be abused by an adult or adults, or another child or children, or by witnessing the abuse of another person. The abuse and neglect of children takes place in all sectors of our community

4.1 Physical abuse

A form of abuse which may include: 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/carer fabricates the symptoms of, or deliberately induces, illness in a child.

4.2 Emotional abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve:

- ▶ Conveying to the child 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 a child. 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 also involve seeing or hearing the ill treatment of another;
- ▶ It may involve bullying (including cyber bullying), causing children to feel frequently 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 although it may occur alone.

4.3 Sexual abuse

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;
- ▶ This may also include non-contact activities, such as involving children in looking at or in the production of sexual images or watching sexual activities, or 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.

4.4 Neglect

Neglect involves: The persistent failure to meet a child’s basic physical, and/or, psychological needs is likely to result in the serious impairment of the child’s health or development. Neglect may occur in pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent/carers failing to:

- ▶ Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- ▶ Failing to protect a child from physical and emotional harm or danger, or a failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

5. Complex forms of abuse

5.1 Organised or multiple abuse. This can involve:

- ▶ Abuse involving one or more perpetrators and a number of related or unrelated abused children and young people;
- ▶ In some cases, perpetrators act with others to abuse children, in others they act alone or they may use an institutional framework or a position of authority to access and groom children for abuse;
- ▶ Organised and multiple abuse occur both as part of a network of abuse across family or community, and within institutions such as residential homes or schools;
- ▶ Organised and multiple abuse can be a feature of Female Genital Mutilation, Child trafficking, Child Sexual Exploitation and other forms of sexual abuse.

5.2 New technologies and abuse. This can involve:

- ▶ Abuse through bullying and intimidation using texting and mobile phones;
- ▶ Exposure to inappropriate materials via internet sites and games e.g. violence, sex etc.;
- ▶ Predators meeting children on- line through social networking sites.

In addition to the above, more information on the following can be found in the Appendix numbers 5-16:

- ▶ Breast Ironing
- ▶ Child Sexual Exploitation (CSE)
- ▶ Contextual Safeguarding
- ▶ County Lines
- ▶ Death of a Child
- ▶ Domestic abuse
- ▶ E-safety/Cyber bullying
- ▶ Female Genital Mutilation (FGM)
- ▶ Honour Based Violence (HBV)
- ▶ Radicalisation

- ▶ Responding to self-harming behaviours
- ▶ Trafficking

6. Children considered particularly vulnerable to abuse

There are some children living in circumstances which may make them particularly vulnerable to abuse such as children who:

- ▶ are deemed as "Children in Need";
- ▶ are living away from home in public or private care (e.g. foster care, residential care, boarding schools, hospitals, prisons etc.);
- ▶ have disabilities and complex needs;
- ▶ displayed behaviour indicates a lack of parental control;
- ▶ are living within households where there is domestic abuse;
- ▶ are substance misusing, mentally ill or have learning disabled parent/carers;
- ▶ are living in families where there are extreme religious, spiritual or cultural beliefs;
- ▶ are living in temporary accommodation;
- ▶ go missing;
- ▶ are newly arrived or transient families;
- ▶ are unaccompanied asylum seeking children;
- ▶ are victims of trafficking.

7. Alerting to indicators of abuse

There are a variety of ways that somebody in the organisation may become aware of the actual or likely occurrence of abuse of a child.

These include:

- ▶ A child might tell them;
- ▶ Someone else might report that a child has told them or that they strongly believe that a child has been or is being abused;
- ▶ A child might show some signs of physical injury for which there appears to be no satisfactory explanation;
- ▶ A child's behaviour may indicate to them that it is likely that she or he is being abused;
- ▶ Something in the behaviour of one of the workers or young person, or in the way that a worker or young person relates to a child, alerts them or makes them feel uncomfortable in some way;
- ▶ Observing one child abusing another.

Whenever anyone has concern that a child may be at risk of abuse they should follow YMCA East Surrey's Safeguarding Procedures, unless they have been superseded by those of the Local Safeguarding Children Partnerships.

Most children do have accidental injuries occasionally, such as when falling or playing with other children. Such injuries might include bruising to the knees, shins, arms, elbows, or if falling onto the face, nose, forehead cut lip etc. However, there are injuries which are hardly ever caused accidentally and also warning signs which may indicate sexual, emotional abuse or neglect.

For more information on possible indicators of abuse, please see Appendix 1B (page 21).

8. Designated Safeguarding Leads (DSL)

YMCA East Surrey DSLs have overall responsibility for the safeguarding of all persons, including adults and young people. They have all undergone the appropriate safeguarding training provided by Surrey County Council which is refreshed every three years.

YMCA East Surrey's Senior DSLs are:

Ian Burks | CEO
T: 01737 779979 (Reception)
M: 07764 819182
E: ian.burks@ymcaeast Surrey.org.uk

Judith Brooks | Head of Children and Young People
T: 01737 784974
M: 07870 904035
E: judith.brooks@ymcaeast Surrey.org.uk

Lee Fabry | Head of Housing (Hillbrook House)
T: 01737 773089
E: lee.fabry@ymcaeast Surrey.org.uk

Stuart Kingsley | Deputy Head of Children and Young People
01737 222859
07442 011483
E: stuart.kingsley@ymcaeast Surrey.org.uk

8.1 DSL procedures

During office hours, the DSL will:

- ▶ Contact the Surrey Children's Single Point of Access (C-SPA) for Surrey or Multi Agency Safeguarding Hub (MASH) for West Sussex:

Surrey (C-SPA)
T: 0300 470 9100
E: cspa@surreycc.gov.uk

West Sussex (MASH)
T: 0330 222 5296
E: mash@westsussex.gcsx.gov.uk

In an emergency:

- ▶ Dial 999 for the Police

The DSL will then inform the CEO.

Verbal referrals to C-SPA or MASH must always be followed up by a written referral within 48 hours. All action taken must be recorded by the DSL.

The DSL will ensure that Ofsted is notified if a section 47 is opened by the local authority, and if a section 47 is closed by the local authority, or if the incident is deemed serious following discussions with other professionals.

9. What to do if you have concerns about the welfare of a child

See Appendix 2A (page 7) for What to do if... flowchart.

If you suspect a child is at risk of abuse, immediately contact the relevant Line Manager and DSL.

Remember:

- ▶ The safety of the child is paramount;
- ▶ Be calm, reassuring and honest;
- ▶ Do not make promises which can't be kept;
- ▶ Do not interrogate the child, but listen carefully and gently clarify the facts, remain open in your manner and allow the child to continue at their own pace;
- ▶ To tell the child what will happen next and with whom the information will be shared;
- ▶ Consult with your Line Manager and DSL, immediately;
- ▶ Keep the child informed of what is happening and of any decisions made or actions taken;
- ▶ Accurately record the incident immediately or as soon as you can but definitely within 24 hours (see Recording of Concerns, Information and Data Requirements, on section 16, page 18).

The individual who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred - that is a task for the professional child protection agencies.

If a child shows signs that they are suffering from, or is likely to suffer, significant harm, the first consideration must always be whether the child is in imminent danger or requires urgent medical attention. If so, the safety of the child and/or access to suitable medical treatment, need to be secured as a first priority.

If the child is in danger, keep the child with you and contact the Police. If the child requires medical attention call an ambulance and then inform your manager.

If no emergency action is required, the staff member must discuss their concerns immediately with their Line Manager and the DSL, to consider whether the concerns require a referral to Children's Social Care. If you have any doubts about this decision, remember you can always, without necessarily identifying the child, discuss your concerns with senior colleagues in YMCA East Surrey, or consult with Children's Social Care in Surrey and West Sussex, or the NSPCC:

Surrey (C-SPA)

T: 0300 470 9100

E: cspa@surreycc.gov.uk

West Sussex (MASH)

T: 0330 222 5296

E: mash@westsussex.gcsx.gov.uk

NSPCC

T: 0808 800 5000

E: help@nspcc.org.uk

W: <https://www.nspcc.org.uk/what-you-can-do/report-abuse/>

Staff should then cooperate with any investigation or assessment, as required. Children's Social Care should inform the DSL, as the referrer, of the outcome of any investigation.

Please note: if you remain concerned that a child is suffering or at risk of significant harm and no manager supports you in your decision to refer to Children's Social Care, you remain free to act on your concerns and make the referral.

9.1 Non-recent abuse

YMCA East Surrey recognise that abuse in childhood can have a lifelong effect. Therefore, should anyone disclose abuse which has occurred in the past, but you are confident that they are currently safe (e.g. an adopted child may disclose abuse whilst living with birth parents or whilst in care), this must be shared with Children's Social Care or the local Police force; and normal internal procedures followed. Other children may still be at risk and further enquiries or investigation may need to follow.

10. Information sharing and confidentiality

It is important that concerns about children and young people are shared, as it is only when all the pieces of information are put together that a full picture of the situation can be obtained and proper judgements made. A key factor in serious case reviews has been a failure to record information, to share it, to understand the significance of the information shared and to take appropriate action in relation to known or suspected abuse or neglect.

It is critical that all staff working with children and young people are in no doubt that where they have a reasonable cause to suspect that a child or young person may be suffering or may be at risk of suffering significant harm, they should discuss those concerns with their Line Manager and make a referral to Children's Social Care.

Where there are safeguarding concerns information must always be shared. The Data Protection Act was not intended to prevent the sharing of this type of information.

11. Consent

Consent from parents/carers is not required when the threshold of significant harm is met; however, unless doing so would increase the risks to the child, parents/carers should be informed that a referral to Children's Social Care is being made, and asked if they are willing to provide their consent. If consent is not obtained, the DSL should continue as planned and make the referral as per the responsibilities to safeguard and act in the best interests of the child.

If the child is identified as a Child in Need (see earlier definition) then the Line Manager and DSL will agree how these concerns will be shared with the family.

If the family agree to a referral, then a referral form will be completed and YMCA East Surrey will cooperate and contribute, as required, to any subsequent assessment or investigation.

Should the family fail to agree to a referral, then the DSL must consider whether the refusal constitutes a risk of significant harm. If not, then the concerns for the child should be recorded, in line with YMCA East Surrey's recording requirements (section 16, page 18), along with the parent/carers dissent, and staff should continue to monitor the well-being of the child.

12. Recruitment process

[Surrey Safer Recruitment guidance](#) will be followed when recruiting members of staff and volunteers.

The YMCA East Surrey requires enhanced DBS checks to be undertaken on all newly recruited childcare staff and volunteers in order to ensure that individuals who are barred from work of this nature are not recruited to work in regulated activity.

In addition to this, new members of staff should be asked the following questions, with signatures to verify the answers:

- ▶ Have you had any convictions, been cautioned, subject to a court order, received a reprimand or warning or found guilty of committing any offence before or during your employment at this setting?
- ▶ Have you had/do you have parental responsibility for a child that has been or is being placed on a Child Protection Plan whilst in your care?
- ▶ Have there been any allegations made against yourself in a previous role, that will have bearing on your suitability to work with children, young people and vulnerable adults?

All staff should be made aware of the Safeguarding Children policy and procedure, as the safety of all children is paramount. Training and additional guidance will be provided to all new staff, trustees and volunteers as well as refresher training for all staff and volunteers annually.

See Appendix 4B (page 28) for more details of YMCA East Surrey Safer Recruitment Process

13. Disqualification by association

YMCA East Surrey must apply the Childcare (Disqualification) Regulations 2009 and related obligations under the Childcare Act 2006 (the Act). These regulations seek to ensure that only suitable individuals work (paid or unpaid) within childcare settings.

It is a criminal offence for someone to knowingly work in a childcare setting whilst living in a household with someone who is, or would be disqualified from working with children due to committing specific offences. This applies to household members including partners, children, housemates and lodgers.

YMCA East Surrey have a responsibility to ensure staff are suitable to work with children, and are not disqualified. This means that staff working within relevant providers will be required to declare prior to employment commencing if they live in the same household as someone who is disqualified from working with children

The table of relevant offences can be found in the document [Disqualification under the Childcare Act \(2006\)](#)

14. Reporting concerns or allegations against staff

This section illustrates the statutory definition of allegations in regards to safeguarding children and how to respond. An allegation may relate to a person who works with children who has:

- ▶ behaved in a way that has harmed a child, or may have harmed a child;
- ▶ possibly committed a criminal offence against or related to a child;

- ▶ behaved towards a child or children in a way that indicates they may pose a risk of harm to children.

Furthermore, the allegation could be in relation to the treatment or behaviour of the individual's own children.

Allegations can be made in relation to restrictive physical interventions and restraint but can also relate to inappropriate relationships between members of staff and children or young people, for example:

- ▶ having a sexual relationship with a child under 18 if in a position of trust in respect of that child, even if consensual;
- ▶ "Grooming", i.e. meeting a child under 16 with intent to commit a relevant offence;
- ▶ Other 'grooming' behaviour giving rise to concerns of a broader child protection nature e.g. inappropriate text/e-mail messages or images, gifts, socialising etc.;
- ▶ Possession of indecent images/pseudo-photographs of children.

In addition, these procedures should be applied when there is an allegation that any person who works with children:

- ▶ Has behaved in a way in their personal life that raises safeguarding concerns. These concerns do not have to directly relate to a child but could, for example, include arrest for possession of a weapon or indecent images of children;
- ▶ As a parent/carer, has become subject to child protection procedures;
- ▶ Is closely associated with someone in their personal lives (e.g. partner, member of the immediate family or other household member) who may present a risk of harm to child/ren for whom the member of staff is responsible in their employment/volunteering.

14.1 Initial action by person receiving or identifying an allegation or concern

The person to whom an allegation or concern is first reported should treat the matter seriously and keep an open mind.

They should not:

- ▶ Investigate or ask leading questions if seeking clarification;
- ▶ Make assumptions or offer alternative explanations;
- ▶ Promise confidentiality, but give assurance that the information will only be shared on a "need to know" basis.

They should:

- ▶ Make a written record of the information where possible in the child/adult's own words including the time, date and place of incident(s), persons present and what was said;
- ▶ Sign and date the written record;
- ▶ Immediately report the matter to their Line Manager and DSL;
- ▶ If the allegation is against the individual's manager then the matter should be reported direct to the DSL or to the CEO.

If you have concerns about a member of staff/volunteer you must bring this to the attention of your Line Manager. If the concern or allegation is about your Line Manager, please speak to their manager, or the Human Resources Manager.

For further information on Managing Allegations, see Appendix 3B (page 25).

For more information and guidance: <https://surreyscb.procedures.org.uk/qkpph>

15. Escalation

Escalation is the course of action that should be taken by staff where they have concerns that the child's safety is compromised by the action of other agencies, or that other professional input does not support effective safeguarding of the child.

Resolution can be sought where there are differences of opinion by staff members making professional challenges and by them knowing how to escalate concerns about decisions made.

Examples of professional disagreement, resulting in the need for escalation:

- ▶ Where one professional disagrees with another around a particular course of action or inaction, such as closing involvement with a child or family, or where practice appears intrusive;
- ▶ Where one worker or agency considers that another worker or agency has not completed an agreed action for no acceptable or understood reason, which may compromise the safeguarding of the child or young person;
- ▶ Where one agency considers that the child's needs are not being best met by the current multiagency plan. This could include a disagreement that a particular agency does not feel it needs to be involved, but another does, or there is a decision to close the case;
- ▶ Where a member of staff or an agency considers that the child's safeguarding needs are better met by a Child Protection Plan and have requested that a Child Protection Conference be convened and feel that this has been refused.

In all cases where a professional believes a child to be at imminent risk of harm they should refer the case to the Surrey C-SPA, West Sussex's MASH and/or the Police. Should you encounter difficulty in getting an appropriate response to your safeguarding concerns from Children's Social Care and external professional partners:

- ▶ Discuss with your Line Manager and be prepared to escalate as per YMCA East Surrey's Escalation Process (see appendix 2B, page 23);
- ▶ View the relevant procedure of the Local Safeguarding Children Partnership to understand who to contact, and the timescales for each stage of escalation.

16. Recording of concerns, information and data requirements

Staff must record and log all information in chronological order on YMCA East Surrey's "Incident Log". This form can be found in: <G:\Workgroup\Children's Services\Admin\Templates\Incidents logs, recording concerns,etc>

Staff must ensure that all data is kept safe and secure and make sure the information is:

- ▶ Used lawfully;
- ▶ Used for limited, specifically stated purposes;
- ▶ Used in a way that is adequate, relevant and accurate;
- ▶ Not excessive;
- ▶ Handled according to people's data protection rights (see the [Data Protection policy](#));
- ▶ Body maps must be completed for all identified non mobile children/young people who have bruising. All bruising must be clarified with an explanation; this may

include contacting the parent/carers or another professional. All maps to be held in their individual file;

- ▶ The DSL will keep all records involving child protection concerns;
- ▶ Records concerning a member of staff must be held in their personnel file and a copy given to the member of staff (where applicable). This information must be retained on file until the person reaches retirement age or for 10 years if that is longer.

It is imperative that any concerns are accurately recorded as the matter could go on to case conference and/or legal proceedings. The record should include the context, a detailed account of the concerns, what was said or seen and by whom. It is important to record the actual words used by the child or the referrer. The record should indicate:

- ▶ Who was present;
- ▶ who was consulted;
- ▶ how any decisions were made and the reasoning behind them and by whom;
- ▶ any actions taken.

If a decision was made, to take no action, then the reasoning for that decision must also be recorded. All records must be clearly signed and dated.

Tipp-ex or another correction fluid must never be used, if a mistake is made or an amendment required, a line should be made through the original so that the wording remains clearly visible, and it should be initialled by the author.

17. Training

YMCA East Surrey recognises the complexity of the safeguarding work undertaken by members of staff, and the emotional impact it can have upon them. All staff, as part of induction, are introduced to Safeguarding Children, and their responsibilities in relation to it.

All members of staff who have any contact with children receive child protection training at basic or more advanced level according to their role.

Furthermore, all professionals at YMCA East Surrey require a general awareness of known indicators and predisposing factors of abuse as well as detailed knowledge of agreed policies and procedures.

Operational staff are required to undertake annual internal refresher training, to ensure they are updated on changes to best practice and legislation. Additionally, managers will examine the Local Safeguarding Children Partnership Training Strategy for their area and identify the prescribed levels and topics of training required by the LSCB. This will be incorporated into the training plans for individual staff and whole teams where relevant.

The [Surrey Safeguarding Children Partnership \(SSCB\) training strategy](#) and [West Sussex Safeguarding Children Partnership training strategy](#) for staff engaged in Safeguarding Children.

Managers must keep records of training attended and assess the training needs of staff continuously, ensuring that staff are trained to undertake their roles effectively.

Appendices

The following appendices provide more detailed guidance for YMCA trustees, managers, and members of staff that should be referred to when dealing with particular issues relating to safeguarding.

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Appendix 1B

Indicators of abuse

The following is not an exhaustive list. It is designed to draw attention to the fact that a child might be being harmed in some way and in need of protection.

Physical indicators

Physical abuse

Some types of bruises are often associated with non-accidental injury:

- ▶ Hand slap marks;
- ▶ Marks from an implement;
- ▶ Pinch or grab marks;
- ▶ Grip marks on a baby (could indicate severe shaking);
- ▶ Bruised eyes (particularly when no other bruising to forehead);
- ▶ Any bruising on babies.

Other injuries

Sometimes children are injured accidentally by not having been provided with a safe environment, such accidents could for example include scalding, fractures and poisoning.

But some types of injury are less likely to be accidental such as:

- ▶ Burns inside the mouth, inside of the arm and on genitals;
- ▶ Some cigarette burns or burns with another object;
- ▶ Scalds particularly on the feet and ankles;
- ▶ Bite marks;
- ▶ Evidence of old or repeated fractures;
- ▶ Cuts to mouth or tongue;
- ▶ Female genital mutilation (FGM) (see appendix 11B)
- ▶ Breast Ironing (see appendix 6B).

Sexual abuse

A child suffering from sexual abuse may show physical signs in the form of:

- ▶ Bruising to breasts, buttocks, lower abdomen, thighs and genital or rectal areas which could indicate sexual abuse;
- ▶ Injuries, bleeding or soreness to genital or rectal areas;
- ▶ Persistent vulva reddening and or discharge;
- ▶ Repeated urinary tract infections;
- ▶ Pseudo- mature or sexually explicit behaviours;
- ▶ Continual open masturbation or aggressive sexual play with peers.

Neglect

A neglected child may show physical signs by being:

- ▶ Underweight or obese;
- ▶ Often dirty and smelly;
- ▶ Poorly and/or inappropriately clothed;
- ▶ Often hungry;
- ▶ Unduly solemn and unresponsive;
- ▶ Under stimulated and not reaching developmental milestones
- ▶ Poor impulse control;
- ▶ Inability to form relationships.

Neglecting a child's need for love, care, warmth, security and stimulation will affect their emotional and physical development over time. Some children may be left unattended without suitable arrangements for their care or with adults who for some reason (e.g. alcohol or drug misuse) are unable to be fully responsible for the child's care.

Behavioural indicators of abuse

Children who are being neglected or abused often also have behavioural difficulties. Any signs should always be looked at in conjunction with other information about a child and their family circumstances.

Behaviour may be a starting point for further assessment. Indicators might include:

- ▶ Overly compliant or watchful attitude;
- ▶ Acting out aggressive behaviour, severe tantrums;
- ▶ Child only appearing happy in school, or is kept away from school;
- ▶ Child isolated in school and without friends;
- ▶ Child unable to trust anyone;
- ▶ Tummy pains with no medical explanation;
- ▶ Eating problems;
- ▶ Sleep disorders;
- ▶ Frightened child, overly anxious, frozen;
- ▶ Child self-harming;
- ▶ Constantly running away from home;
- ▶ Child showing signs of depression, anxiety, withdrawal, etc.

Other factors

There may be other indicators which could make someone concerned about the risk of abuse or neglect of a child such as:

- ▶ A history of a parent/carers' abuse in childhood whether physical, emotional sexual or neglect;
- ▶ A history of family breakdown, separations or disrupted care;
- ▶ Parental isolation and lack of support;
- ▶ Parental domestic abuse (see appendix 9B)
- ▶ Parental mental ill health, learning difficulties or disability which may impact negatively on a parents' perception of the child or ability to provide care;
- ▶ Parental drug, alcohol or substance misuse;
- ▶ History of transient or violent partners and exposure to domestic abuse;
- ▶ History of criminal behaviour and imprisonment and in particular a conviction of a Schedule 1 offence;
- ▶ Parent/carer lacking awareness of a child's development and needs;
- ▶ Parent/carers who hold extreme religious, spiritual or cultural beliefs;
- ▶ Inconsistent adults within the household or rapidly changing adult relationships;
- ▶ Chaotic families;
- ▶ History of social services involvement or children being "looked after children".

Remember: It is not your responsibility to confirm whether a child is suffering or at risk of suffering significant harm. This is the duty of Children's Social Care, the Police or the NSPCC. Discuss any concerns with your manager and Designated Safeguarding Lead, and follow the safeguarding procedures.

Appendix 2B

Escalation process

Problem resolution is an integral part of professional cooperation and joint working to safeguard children. All agencies must work together in the interest of the child and it is recognised that at times there are differences of opinion on how to progress.

Effective working together depends upon:

- ▶ An open approach and honest relationships between agencies;
- ▶ Resolving disagreements to the satisfaction of workers and agencies;
- ▶ A belief in genuine partnership working.

At all stages of the escalation process, actions and decisions must be shared in a timely manner with appropriate staff who are directly involved with the service users.

Decisions should be recorded in writing and the referring member of staff should be kept informed of the escalation of their concern. In particular, this must include written confirmation between the parties about an agreed outcome of the disagreement and how any outstanding issues will be pursued. All records should be retained on the child's file. The process of resolution should be as simple as possible. Resolution should be sought within the shortest timescale possible to ensure the child is protected.

Disagreement should be resolved at the lowest possible stage between the people who disagree but any worker who feels that a decision is unsafe should consult their manager or Designated Safeguarding Lead (DSL).

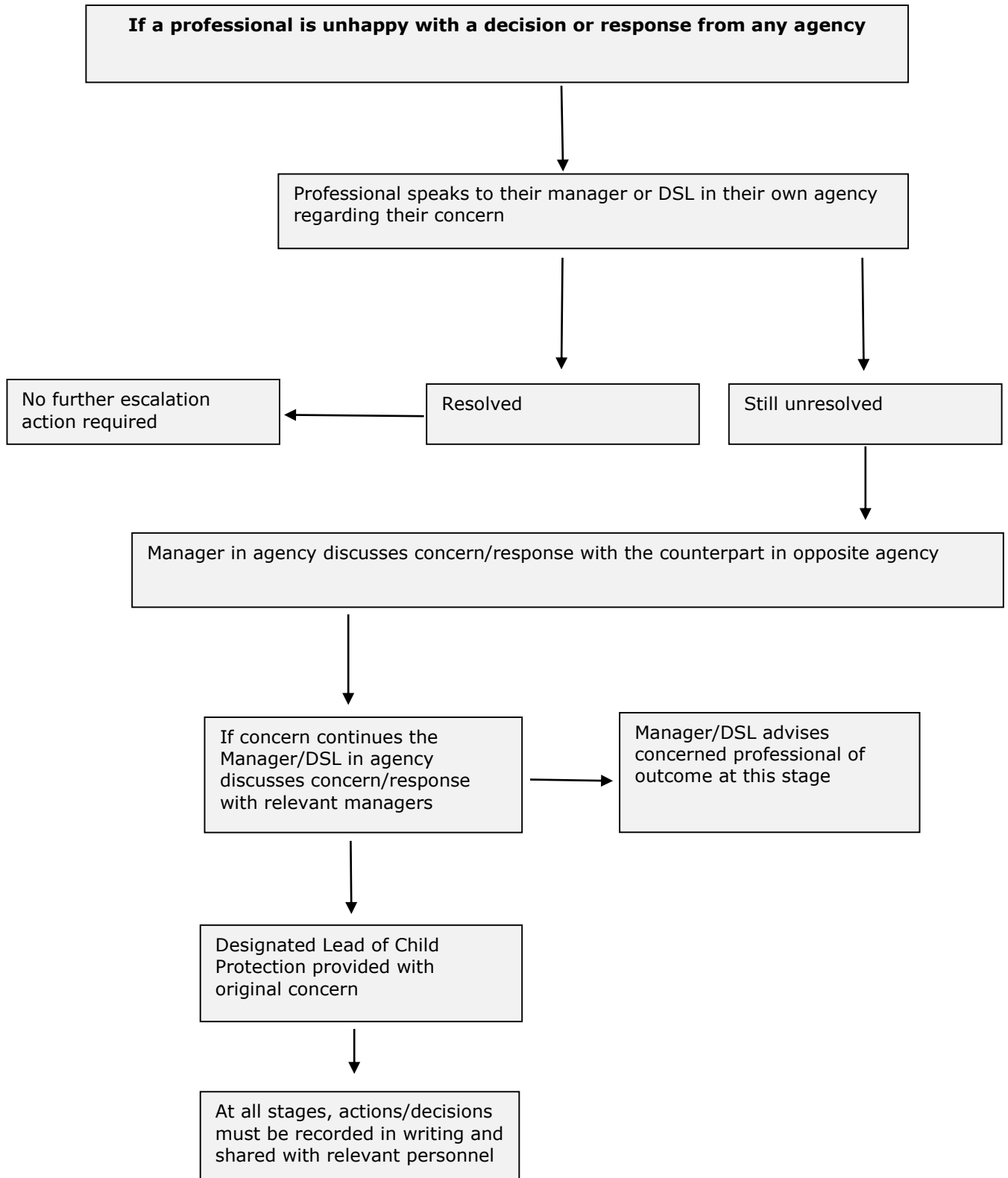
Professional challenge

Professional challenge is acceptable and should be considered part of everyday practice. The safety of the child is the paramount consideration in any professional disagreement. It is also the responsibility of all professionals to present a challenge to the actions and decisions of other agencies where they believe they have evidence to suggest that the child's development may be compromised or that there is risk of harm to the child.

The aim must be to resolve a professional disagreement at the earliest possible stage, as swiftly as possible, always keeping in mind that the child and young person's safety and welfare is paramount.

The best way of resolving difference is through discussion, and where possible a face-to-face meeting between those concerned, which will enable clear identification of the specific areas of difference and the desired outcomes for the child. E-mail communication, whilst important, can be open to misinterpretation or make for a stilted exchange of views.

Local Safeguarding Children Partnership Inter-Agency Escalation Procedure for Professionals with Safeguarding



Appendix 3B

Managing allegations against a staff member or volunteer

These procedures are based on those recommended by the Local Safeguarding Children Partnerships and will be followed by YMCA East Surrey when managing allegations against staff.

Compliance with these procedures will help to ensure that allegations of abuse are dealt with expeditiously, consistent with a thorough and fair process. They should be read in conjunction with [YMCA East Surrey's Disciplinary Policy](#).

The Manager's initial response

Managers need to understand which behaviours to address directly through their complaints or disciplinary procedures and under what circumstances they should contact the Local Authority's Designated Officer (LADO).

- ▶ Surrey LADO: 0300 123 1630
- ▶ West Sussex LADO: 0330 222 3339

Communication of allegations

- ▶ The employer must inform the LADO within one working day when an allegation or a concern of suitability is raised and prior to any further investigation taking place;
- ▶ There will be consideration as to whether or not to inform the parent/carer/s of the child/ren as this may impede the disciplinary or investigation processes;
- ▶ In some circumstances the parent/carer may need to be told straight away for example if the child is injured and requires medical treatment;
- ▶ The parent(s)/carer(s) and the child, if sufficiently mature, should be helped to understand the processes involved and kept informed about the progress of the case and of the outcome where there is no criminal prosecution. This will include the outcome of any disciplinary process, but not the deliberations of, or the information used in, a hearing;
- ▶ Subject to restrictions on the information that can be shared, the employer should, as soon as possible, inform the accused person about the nature of the allegation, how enquiries will be conducted and the possible outcome (e.g. disciplinary action, and dismissal or referral to the DBS and/or regulatory body).

The member of staff should:

- ▶ Be treated fairly and honestly and helped to understand the concerns expressed and processes involved;
- ▶ Be kept informed of the progress and outcome of any investigation and the implications for any disciplinary or related process;
- ▶ If suspended, be kept up to date about events in the workplace.

Ofsted will be informed of any allegation or concern made against a member of staff if it involves any YMCA East Surrey registered childcare settings.

Initial action by the DSL

When informed of a concern or allegation, the DSL should not investigate the matter or interview the member of staff, child concerned or potential witnesses.

They should:

- ▶ Obtain written details of the concern/allegation, signed and dated by the person receiving (not the child/adult making the allegation);
- ▶ Approve and date the written details;

- ▶ Record any information about times, dates and location of incident(s) and names of any potential witnesses;
- ▶ Record discussions about the child and/or member of staff, any decisions made, and the reasons for those decisions.

The DSL must refer the allegation to the duty LADO within one working day. Referral should not be delayed in order to gather information. A failure to report an allegation or concern in accordance with procedures is a potential disciplinary matter.

If an allegation requires immediate attention, but is received outside normal office hours, the Designated Safeguarding Lead (DSL) should consult the Children's Services Emergency Duty Team or the local Police and inform the LADO as soon as possible.

Initial consideration by the DLS and LADO

There are up to three strands in the consideration of an allegation:

- ▶ A Police investigation of a possible criminal offence;
- ▶ Children's Services enquiries and/or assessment about whether a child is in need of protection or services;
- ▶ Consideration by an employer of disciplinary action.

The LADO and DSL should consider first whether further details are needed and whether there is evidence or information that establishes that the allegation is false or unfounded. Care should be taken to ensure that the child is not confused as to dates, times, locations or identity of the member of staff.

The Police must be consulted about any case in which a criminal offence may have been committed. If the threshold for significant harm is not reached, but a Police investigation might be needed, the LADO should immediately inform the Police and convene an Initial Evaluation (similar to strategy meeting), to include the Police, employer and other agencies involved with the child.

Suspension

Suspension is a neutral act and it should not be automatic or considered as a default option. It should be considered in any case where:

- ▶ There is cause to suspect a child has suffered, or is likely to suffer significant harm;
- ▶ The allegation warrants investigation by the Police.
- ▶ The allegation is so serious that it might be grounds for dismissal.

The possible risk of harm to children should be evaluated and managed in respect of the child/ren involved and any other children in the accused member of staff's home, work or community life.

The employer should consider alternatives to suspension where possible. Refraining by agreement from work for a very brief period, or being redeployed to other duties so as not to come into contact with one or more children, may be acceptable.

A form to record a risk assessment for suspension is available from [Surrey Safeguarding Children Partnership](#) and [West Sussex Safeguarding Children Partnership](#)

If suspension is deemed appropriate, the reasons and justification should be recorded and the individual notified of the reasons as per [YMCA East Surrey's Disciplinary Policy](#).

Only the employer has the power to suspend an accused employee and they cannot be required to do so by the local authority or the Police.

If a suspended person is to return to work, YMCA East Surrey will consider what help and support might be appropriate e.g. a phased return to work and/or provision of a mentor, and also how best to manage the member of staff's contact with the child concerned, if still in the workplace.

Disciplinary action

The LADO and the DSL should discuss whether disciplinary action is appropriate in all cases where:

- ▶ It is clear at the outset or decided by a Strategy Discussion that a Police investigation or Children's Services enquiry is not necessary;
- ▶ The employer or LADO is informed by the Police or the Crown Prosecution Service that a criminal investigation and any subsequent trial is complete, or that an investigation is to be closed without charge, or a prosecution discontinued.

The discussion should consider any potential misconduct or gross misconduct on the part of the member of staff, and take into account:

- ▶ Information provided by the Police and/or Children's Services;
- ▶ The result of any investigation or trial;
- ▶ The different standard of proof in disciplinary and criminal proceedings.

If formal disciplinary action is not required, the employer should initiate appropriate action within three working days. If a disciplinary hearing is required, and further investigation is not required, it should be held within fifteen working days.

If further investigation is needed to decide upon disciplinary action, the employer and the LADO should discuss whether the employer has appropriate resources or whether the employer should commission an independent investigation because of the nature and/or complexity of the case and in order to ensure objectivity. The investigation should not be conducted by a relative or friend of the member of staff.

The aim of an investigation is to obtain, as far as possible, a fair, balanced and accurate record in order to consider the appropriateness of disciplinary action and/or the individual's suitability to work with children. Its purpose is not to prove or disprove the allegation.

If, at any stage, new information emerges that requires a child protection referral, the investigation should be held in abeyance and only resumed if agreed with Children's Services and Police. Consideration should again be given as to whether suspension is appropriate in light of the new information.

The investigating officer should aim to provide a report within ten working days.

On receipt of the report the employer should decide, within two working days, whether a disciplinary hearing is needed. If a hearing is required, it should be held within fifteen working days. For more information, please see [YMCA East Surrey's Disciplinary Policy](#).

Appendix 4B **YMCA East Surrey Safer Recruitment Process**

YMCA East Surrey is committed to [Surrey County Council's Safer Recruitment](#). All new employees must have a role relevant DBS check and also three years' worth of references. Any gaps in employment/activity over one month must be explained and verified.

YMCA East Surrey will carry out the following to minimise the risk of employing (or engaging on a voluntary basis) an individual who poses a predictable risk to children and young people:

- ▶ Methodically applying techniques which are accepted as helpful in identifying unsuitable individuals;
- ▶ Analysing rigorously all the information which is available about the candidate and, whenever possible, verifying through references, information which is provided by the candidate.

To ensure that those involved in selecting staff are able to successfully test the candidates' ability and experience against a clearly defined person specification the YMCA will make sure managers can access:

- ▶ Specific training in respect of safe recruitment and selection;
- ▶ Supervised / supported experience of recruitment;
- ▶ Periodic evaluation of performance by their supervisors.

For more information, please see [YMCA East Surrey's Recruitment and Selection Policy](#)

Disclosure and Barring Service (DBS) checks

The [Protection of Freedoms Act 2012](#) sets out the foundation for the Disclosure and Barring Service. It has an Independent Barring Board (IBB) with responsibility for taking barring decisions on new referrals and the management of two barred lists which replaced List 99, PoCA and PoVA Lists. The system aims to provide employers with a quicker and more effective vetting and barring service. All disclosures for work with children and vulnerable persons are to be at an enhanced level for Regulated Activity. The new organisation, DBS, will provide a service combining criminal records checking and the barring functions:

- ▶ The barring part of the DBS will provide caseworkers, who receive and process referrals about individuals, who have harmed, or who pose a risk of harm to, children, young people or vulnerable adults;
- ▶ The checking part of the DBS will allow employers to check and access the criminal record history of people working, or applying to work (whether paid or unpaid) in certain positions, especially those that involve working with children and vulnerable adults;
- ▶ The [Disclosure and Barring Service \(Home Office\)](#) provides a range of advice, guidance and relevant forms.

Certain posts and voluntary work are subject to the Rehabilitation of Offenders Act 1974 Exceptions Amendment Order 1975. These include the following 'regulated positions':

- ▶ Any work in schools, youth or children's centres or other places of work where children and young people are present;
- ▶ Any post that requires unsupervised contact with children made under arrangements by the child's parents/carers, the child's school or registered day care providers;

- ▶ A position of governor or member of management committee for an organisation that regularly works in the presence of, or care for, children, or training, supervising or being in sole charge of children;
- ▶ Any post which involves regularly caring for, training, supervising or being in sole charge of children under the age of 18;
- ▶ The minimum age at which someone can be asked to apply for a DBS check is 16 years' old.

Disclosure of any convictions, cautions, bind-overs which they have received should be requested on the job application form. Any such details must be declared even if they would be considered 'spent' in other circumstances. If a person who has made such disclosures is selected for appointment, they should ask be asked to apply for an Enhanced DBS Disclosure to verify their declarations.

Limitations of disclosures

Disclosures may not provide information on people convicted abroad or where an applicant has worked or been resident overseas in the previous five years, or with respect to individuals who have had a limited period of residence in the UK, therefore caution must be exercised.

The advice of the DBS Overseas Information Service should be sought about criminal record checking overseas - see the [Disclosure and Barring Service \(Home Office\)](#).

Occasionally, an enhanced disclosure check may result in the local Police disclosing non-conviction information to the registered body only and not to the applicant e.g. a current investigation about the individual. Such information must not be passed on to her/him.

Appendix 5B

Breast Ironing

Breast Ironing, also known as "Breast Flattening", is the process whereby young pubescent girls' breasts are ironed, massaged and/or pounded down through the use of hard or heated objects, in order for the breasts to disappear or delay the development of the breasts entirely.

It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage and therefore be kept in education.

The custom uses large stones, a hammer or spatulas that have been heated over scorching coals to compress the breast tissue of girls as young as 9 years old.

Those who derive from richer families may opt to use an elastic belt to press the breasts so as to prevent them from growing.

The mutilation is a traditional practice from Cameroon designed to make teenage girls look less "womanly" and to deter unwanted male attention, pregnancy and rape. The practice is commonly performed by family members, 58% of the time by the mother.

In many cases the abuser thinks they are doing something good for their daughter, by delaying the effects of puberty so that she can continue her education, rather than getting married.

Professionals working with children and young people must be able to identify the signs and symptoms of girls who are at risk of or have undergone Breast Ironing.

Similarly to Female Genital Mutilation (FGM; Appendix 11), Breast Ironing is classified as physical abuse, therefore professionals must follow their Local Safeguarding Children's Partnerships procedures.

Prevalence

The United Nations (UN) states that Breast Ironing affects 3.8 million women around the world and has been identified as one of the five under-reported crimes relating to gender-based violence (<http://www.unwomenuk.org/breast-ironing-must-be-stopped/>).

Law

There is no specific law within the UK around Breast Ironing, however it is a form of physical abuse and if professionals are concerned a child may be at risk of or suffering significant harm they must refer to their Local Safeguarding Children's Partnerships Procedures.

Indicators

Breast Ironing is often a well-kept secret between the young girl and her mother. Often the father remains completely unaware. Some indicators that a girl has undergone Breast Ironing are as follows:

- ▶ Unusual behaviour after an absence from school or college including depression, anxiety, aggression, withdrawn etc.;
- ▶ Reluctance in undergoing normal medical examinations;
- ▶ Some girls may ask for help, but may not be explicit about the problem due to embarrassment or fear;

- ▶ Fear of changing for physical activities due to scars showing or bandages being visible.

Health consequences

Due to the instruments which are used during the process of breast ironing, for example, spoon/broom, stones, pestle, breast band, leaves etc. combined with insufficient aftercare, young girls are exposed to significant health risks.

Breast Ironing is painful and violates a young girl's physical integrity. It exposes girls to numerous health problems such as cancer, abscesses, itching, and discharge of milk, infection, dissymmetry of the breasts, cysts, breast infections, severe fever, tissue damage and even the complete disappearance of one or both breasts.

This form of mutilation not only has negative health consequences for the girls, but often proves futile when it comes to deterring teenage sexual activity according to CAME Women and Girls. The practice not only seriously damages a child's physical integrity, but also their social and psychological well-being.

Breast Ironing in the UK

Concerns have been raised that breast ironing is also to be found amongst African communities in the UK, with as many as a 1,000 girls at risk.

Staff worried about the risk of breast ironing should speak to the Designated Safeguarding Lead (DSL) as soon as possible.

For more information on Breast Ironing: <https://safeguardinghub.co.uk/breast-ironing-a-guide/>

Appendix 6B **Child Sexual Exploitation (CSE)**

Child Sexual Exploitation (CSE) is a type of sexual abuse in which children are sexually exploited for money, drugs, alcohol, accommodation or gifts as a result of them performing, and/or others performing on them, sexual activities. Child sexual exploitation can also occur through the use of technology without the child's immediate recognition; for example, being persuaded to post sexual images on the internet or mobile phones without immediate payment or gain. Children or young people may be tricked into believing they're in a loving, consensual relationship. Child sexual exploitation is a hidden crime. Young people often trust their abuser and don't understand that they are being abused. They may depend on their abuser or be too scared to tell anyone what's happening. Children who work in entertainment may be sexually exploited in return for offers of TV, film or modelling/ photographic work and roles in professional stage productions.

YMCA East Surrey recognises Child Sexual Exploitation (CSE) by the following definition taken from the Department for Education and accepted by Surrey and West Sussex Safeguarding Children Partnerships:

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

- ▶ in exchange for something the victim needs or wants;
- ▶ 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.

CSE is a complex form of abuse and it can often be difficult for those working directly with children to identify and assess. The indicators can sometimes be mistaken for 'normal adolescent behaviours'. Consequently, normal adolescent behaviour can give rise to concerns about CSE.

It requires knowledge, skills, professional curiosity and an assessment which identifies possible indicators and recognises personal circumstances of individual children to ensure that the signs and symptoms are interpreted correctly and appropriate support is given.

Referral

If you are concerned that a child is at risk of/experiencing CSE, you should complete [Surrey's](#) or [West Sussex's](#) multi-agency screening tool

Concerns that a child may be at risk of sexual exploitation should be discussed with your manager in the first instance with a view to deciding whether a referral is required. In addition, you may wish to seek input from the YMCA East Surrey DSL to help your decision-making. As a professional, you must balance the need for swift action with the need to make informed decisions. If a child is at immediate risk, you must call the Police on 999.

When considering making a referral, you will also need to balance the need for confidentiality with your responsibility to share information to protect the child. Where possible, you should always ascertain the views of the child, and keep them, and their parents/carers informed about your actions.

You should consult the [YMCA East Surrey Data Protection Regulation policy](#) to help guide your decision.

Any decision not to share information or not to refer a child should be recorded using the YMCA East Surrey incident form together with the reasons for non-referral.

Once you have decided to make a referral you should complete [Surrey's](#) or [West Sussex's](#) multi-agency screening tool.

All YMCA East Surrey members of staff working with at risk children and young people will undergo training in CSE and regular visits will be encouraged by the relevant officers working on CSE within the Police.

Appendix 7B

Contextual Safeguarding

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.

Parent/carers have little influence over these contexts, and young people’s experiences of extra-familial abuse can undermine parent-child relationships.

Therefore, children’s social care practitioners (such as those within YMCA East Surrey) need to engage with individuals and sectors who do have influence over/within extra familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices.

Contextual Safeguarding provides a framework to advance child protection and safeguarding responses to a range of extra-familial risks that compromise the safety and welfare of young people. In doing so it:

- ▶ Recognises the weight of peer influence on the decisions that young people make;
- ▶ Extends the notion of ‘capacity to safeguard’ to sectors that operate beyond families;
- ▶ Provides a framework in which referrals can be made for contextual interventions that, when delivered effectively, can complement work with individuals and families.

Contextual Safeguarding and child protection systems

The child protection system, and the legislative and policy framework which underpins it, was designed to protect children and young people from risks posed by their families and/or situations where families had reduced capacity to safeguard those in their care. However, extra-familial risks can reduce/undermine the capacity of families/carers to safeguard young people – and to this extent extra-familial risks are accommodated by existing approaches.

In traditional systems this dynamic would be addressed by intervening with families to increase their capacity to safeguard young people from harm and/or relocating young people away from harmful contexts.

A Contextual Safeguarding system supports the development of approaches which disrupt/change harmful extra-familial contexts rather than move families/young people away from them. While parents/carers are not in a position to change the nature of extra-familial contexts, those who manage or deliver services, such as those within the YMCA are; and they therefore become critical partners in the safeguarding agenda.

Impact of context

As individuals move from early childhood and into adolescence they spend increasing amounts of time socialising independently of their families. During this time the nature of young people’s schools and neighbourhoods, and the relationships that they form in these settings, inform the extent to which they encounter protection or abuse.

Evidence shows that, for example: from robbery on public transport, sexual violence in parks and gang-related violence (see Appendix 11) on streets, through to online bullying (see Appendix 17) and harassment from school-based peers and abuse within their

intimate relationships, young people encounter significant harm in a range of settings beyond their families.

Peer relationships are increasingly influential during adolescence, setting social norms which inform young people's experiences, behaviours and choices and determine peer status. These relationships are, in turn, shaped by, and shape, the school, neighbourhood and online contexts in which they develop.

Therefore, if young people socialise in safe and protective schools and community settings they will be supported to form safe and protective peer relationships. However, if they form friendships in contexts characterised by violence and/or harmful attitudes these relationships too may be anti-social, unsafe or promote problematic social norms as a means of navigating, or surviving in, those spaces

For more information on Contextual Safeguarding:
<https://www.contextualsafeguarding.org.uk/en/>

Appendix 8B County Lines

County Lines is a term used when drug gangs from big cities expand their operations to smaller towns, often using violence to drive out local dealers and exploiting children and vulnerable people to sell drugs. In most instances, the users or customers will live in a different area to where the dealers and networks are based, so drug runners are needed to transport the drugs and collect payment.

A common feature in county lines drug supply is the exploitation of young and vulnerable people. The dealers will frequently target children and adults - often with mental health or addiction problems - to act as drug runners or move cash so they can stay under the radar of law enforcement.

In some cases, the dealers will take over a local property, normally belonging to a vulnerable person, and use it to operate their criminal activity from. This is known as cuckooing. People exploited in this way will quite often be exposed to physical, mental and sexual abuse, and in some instances will be trafficked to areas a long way from home as part of the network's drug dealing business.

As within child sexual exploitation, children often don't see themselves as victims or realise they have been groomed to get involved in criminality. So it's important that we all play our part to understand county lines and speak out if we have concerns.

Definition of a gang

Groups of children often gather together in public places to socialise, and peer association is an essential feature of most children's transition to adulthood. Groups of children can be disorderly and/or anti-social without engaging in criminal activity. Defining a gang is difficult, however it can be broadly described as a relatively durable, predominantly street-based group of children who see themselves (and are seen by others) as a discernible group for whom crime and violence is integral to the group's identity.

Children may be involved in more than one 'gang', with some cross-border movement, and may not stay in a 'gang' for significant periods of time. Children rarely use the term 'gang', instead they used terms such as 'family', 'breddrin', 'crews', 'cuz' (cousins), 'my boys' or simply 'the people I grew up with'. Definitions may need to be highly specific to particular areas or neighbourhoods if they are to be useful. Furthermore, professionals should not seek to apply this or any other definition of a gang too rigorously; if a child or others think s/he is involved with or affected by 'a gang', then a professional should act accordingly.

Violence is a way for gang members to gain recognition and respect by asserting their power and authority in the street, with a large proportion of street crime perpetrated against members of other gangs or the relatives of gang members. Youth violence, serious or otherwise, may be a function of gang activity. However, it could equally represent the behaviour of a child acting individually in response to his or her particular history and circumstances

Circumstances which can foster the emergence of gangs include:

- ▶ Areas with a high level of social and economic exclusion and mobility (which weakens the ties of kinship and friendship and the established mechanisms of informal control and social support);

- ▶ Areas made up of predominantly social housing, and especially where it is high rise/high density social housing. There is a perfect correlation in London with 'gang neighbourhoods' and being amongst the 20% most deprived government lower level super output areas (based on the Indices of Multiple Deprivation 2007);
- ▶ Areas with poor performing schools - in terms of leadership, positive ethos, managing behaviour and partnership working;
- ▶ Lack of access to pro-social activities (e.g. youth service) and to vocational training and opportunities;
- ▶ Communities who have experienced war situations prior to arrival in the UK;
- ▶ Areas with a high level of gang activity / peer pressure and intimidation, particularly if the family is denying this or is in fear of the gangs;
- ▶ Family members involved in gang activity and criminality.

Our response

YMCA East Surrey will always take what the child tells them seriously. We will assess this together with the child's presenting behaviours in the context of whatever information they know or can gather from the child about the risk factors described in the risk assessment framework for children affected by gangs and serious youth violence.

Potentially a child involved with a gang or with serious violence could be both a victim and a perpetrator. This requires professionals to assess and support his/her welfare and well-being needs at the same time as assessing and responding in a criminal justice capacity

If a member of staff is concerned that a child is at risk of harm as a victim or a perpetrator of serious youth violence, gang-related or not, the professional should, wherever possible, consult with their DSL, Line Manager and, if available, the local multi-agency gang intelligence forum and/or professional with specialist knowledge in relation to gangs

Local authorities are recommended to nominate a local professional who can develop specialist knowledge in relation to gangs and serious youth violence to act as an adviser to other professionals in cases where there are concerns that a child is/could be affected by gangs and/or serious youth violence.

YMCA East Surrey has a team of JNC Qualified Detached Youth Workers who have considerable experience at dealing with gang issues. For more support with a gang issue contact Stuart Kingsley on 01737 222859 stuart.kingsley@ymcaeast Surrey.org.uk

For further information on County Lines: <https://www.nationalcrimeagency.gov.uk/what-we-do/crime-threats/drug-trafficking/county-lines>

Appendix 9B Death of a child

In the event of finding a child or young person connected to YMCA East Surrey who is unconscious or suspected to have died the first priority is to obtain urgent medical assistance by ringing the emergency services and beginning first aid (All YMCA buildings have a qualified first aider on duty).

Resuscitation once commenced should be continued according to [the UK Council Resuscitation Guidelines 2015](#) until an experienced doctor has made a decision that it is appropriate to stop.

Professionals should:

- ▶ Notify the Police if they are not already present;
- ▶ If the child dies suddenly or unexpectedly at home or in the community, the child should normally be taken to the Emergency Department rather than a mortuary. In some cases, when a child dies at home or in the community, the Police may decide that it is not appropriate to move the child's body immediately, for example, because forensic examinations are needed;
- ▶ Prior to arrival at the Emergency department, provide relevant information and history to Emergency department staff;
- ▶ Where a child is not taken immediately to the Emergency Department, the professional confirming the fact of the death should inform the Designated Paediatrician with responsibility for unexpected deaths in childhood at the same time as the Coroner is informed.

All professionals must ensure that they retain a written record of the initial referral to them and take note of:

- ▶ The position of the child, the clothing worn and the circumstances of how they were found;
- ▶ Explanations for any injury and any discrepancies;
- ▶ Comments made by the parent/carers;
- ▶ Background history, any possible alcohol/drug misuse and the conditions of the living accommodation;
- ▶ Any known underlying medical condition the child may have.

All professionals should provide all the above information and, where applicable, any suspicions must be provided to the receiving Doctor and the Police immediately.

The comments of parent/carers if present or available must be noted in detail.

Anyone who contributes to the written records must legibly sign, date and put their designation / role.

Rapid response planning meeting

The Specialist Nurse in conjunction with the Designated Paediatrician with responsibility for unexpected deaths in childhood will convene a rapid response planning meeting/discussion (usually via telephone/email communications) within 24 hours of the unexpected death of a child or 24 hours from the next working day if the death occurs at a weekend or holiday.

The purpose of this meeting/discussion will be to:

- ▶ Decide whether the Specialist Nurse, Child Death Reviews will visit the family, alone or with the Police, within 24 hours in order to gather information about the child, family and circumstances of death, explain the investigation process and offer support;
- ▶ Consider who else should visit the family to offer support and gather any further information;
- ▶ Share information from case notes / documentation which may shed light on the circumstances leading up to the child's death, including any unexplained or unusual deaths / health problems in the family, neglect or failure to thrive, unusual presentations of the child, parental substance misuse or mental health difficulties, domestic violence and any child protection concerns;
- ▶ Explain the Medical Professionals' understanding of cause of death, if they have one;
- ▶ Consider if there are any child protection risks to siblings and/or any other children in the household and ensure these are referred to Surrey Children's Services if this has not already been done;
- ▶ Ensure a co-ordinated bereavement care plan for the family;
- ▶ Organise a review multi-agency meeting, when all information, including the post mortem report, will be available.

If there is a death of a child or young person at a YMCA East Surrey project or setting it may be necessary for a YMCA professional to contribute to the rapid response planning meeting /discussion. The Line Manager and the DSL should be consulted to ensure that the most appropriate staff member contributes to this meeting.

Appendix 10B Domestic Abuse

The definition of 'domestic violence and abuse' was updated in March 2013 to include the reality that many young people are experiencing domestic abuse and violence in relationships at a young age. They may therefore be Children in need of Early Help services or in need of protection as they are likely to suffer significant harm.

The definition from the Home Office is as follows: "Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence and abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender and sexuality.

This can encompass, but is not limited to, the following types of abuse:

- ▶ Psychological;
- ▶ Physical;
- ▶ Sexual;
- ▶ Financial;
- ▶ Emotional.

What is controlling or coercive behaviour?

Controlling or coercive behaviour is a pattern of behaviour displayed over a period of time, where one person exerts power, control or coercion over another.

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

Coercive behaviour is "a continuing act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten the victim".

Recognising types of behaviour

Behaviours associated with a coercive or controlling relationship include:

- ▶ Isolating a person from their friends and family;
- ▶ Depriving them of their basic needs and taking control of everyday life (e.g. where a person can go, who they can spend time with, where they can work, travel);
- ▶ Repeatedly putting a person down, e.g. telling them that they are worthless;
- ▶ Enforcing rules and activity which humiliate, degrade or dehumanise the victim;
- ▶ Monitoring a person via online communication tools or using spyware;
- ▶ Depriving access to support services, e.g. GP/medical services;
- ▶ Financial abuse including control of finances;
- ▶ Threats to hurt or kill;
- ▶ Threats to a child;
- ▶ Assault;
- ▶ Criminal damage (such as destruction of household goods);
- ▶ Rape.

It is important to note that some of the above may constitute criminal offences in their own right.

Domestic Violence Disclosure Scheme (DVDS)

The Domestic Violence Disclosure Scheme (DVDS) gives members of the public a formal mechanism to make enquires about an individual who they are in a relationship with, or who is in a relationship with someone they know, where there is a concern that the individual may be violent towards their partner. This scheme adds a further dimension to the information sharing about children where there are concerns that domestic violence and abuse is impacting on the care and welfare of the children in the family.

Members of the public can make an application for a disclosure, known as the 'right to ask'. Anybody can make an enquiry, but information will only be given to someone at risk or a person in a position to safeguard the victim. The scheme is for anyone in an intimate relationship regardless of gender.

Partner agencies can also request disclosure is made of an offender's past history where it is believed someone is at risk of harm. This is known as 'right to know'.

If a potentially violent individual is identified as having convictions for violent offences, or information is held about their behaviour which reasonably leads the Police and other agencies to believe they pose a risk of harm to their partner, a disclosure will be made.

For further information see: [Clare's Law- The Domestic Violence Disclosure Scheme.](#)

Multi Agency Risk Assessment Conference (MARAC)

A Multi Agency Risk Assessment Conference (MARAC) is a regular local meeting to discuss how to help domestic abuse victims, aged 16 or over, at high risk of murder or serious harm. Domestic abuse specialists, Police, children's social care, health and other relevant agencies all sit around the same table. They talk about the victim, the family and perpetrator, and share information. The meeting is confidential. Together, MARAC attendees agree an action plan for each victim. They work best when everyone involved understands their roles and the right processes to follow

The MARAC aims to:

- ▶ Increase the safety, health and well-being of victims, including adults and their children;
- ▶ Determine the level of risk that the perpetrator poses to the victim and associated children, and whether there is any risk to the general public;
- ▶ Implement a risk management plan that provides professional support to all those at risk and reduce the likelihood of further harm;
- ▶ Reduce repeat victimisation;
- ▶ Improve agency accountability;
- ▶ Improve support for staff involved in high risk domestic abuse cases;
- ▶ Contribute to the development of best practice;
- ▶ Identify policy issues arising from cases discussed at MARACs and address these through the appropriate channels.

For further information see: <https://www.healthysurrey.org.uk/domestic-abuse/professionals/risk-assessment>

YMCA East Surrey is signed up to the relevant information sharing protocols and may refer a case to the MARAC using the Surrey MARAC Referral Form. Referrals using the MARAC referral form will be passed to the MARAC co-coordinator that covers the borough in which the victim resides. In the first instance, the DSL should telephone one of the

Police MARAC Coordinators, based in the local Police Safeguarding Investigation Units (SIU), who will provide appropriate guidance for making a referral. Contact via 101. Queries concerning the Multi Agency Risk Assessment Conference (MARAC).

Visible high risk

If you have identified a victim, aged 16 or over, that is at high risk of harm using the DASH risk checklist the case would normally meet the MARAC referral criteria.

Professional judgement

If you have serious concerns about a victim's situation, you should refer the case to MARAC. There may be situations where the victim has been unable to disclose information that would confirm the risk, due to cultural or language barriers, or extreme levels of fear.

Appendix 11B **E-safety/cyber bullying/online working**

Introduction

Internet technology (IT) is now an integral part of children's lives and provides them with access to a wide range of information and increased opportunities for instant communication and social networking.

The use of online communication has risen drastically due to the physical distancing restrictions imposed to limit the spread of the COVID-19 (coronavirus) pandemic from March 2020 onwards. This section of YMCA East Surrey's Safeguarding Children policy has been updated in the light of this.

Using the internet can benefit children's education and social development, but it can also present several risks. Online abuse is any type of abuse that happens on the internet, facilitated through technology like computers, tablets, mobile phones and other internet-enabled devices (Department for Education, 2018; Department of Health, 2017; Scottish Government, 2014; Welsh Assembly Government, 2018). Children are often unaware that they are as much at risk online as they are in the real world, and parent/carers may not be aware of the actions they can take to protect them. It is YMCA policy to promote the educational and social benefits of the internet, but that this is balanced against the need to safeguard children.

Benefits and risks

Internet technology allows children to access to information, electronic communications and social networking and can support their training and social development. However, use of the internet can also carry inherent risks:

Content

The internet contains a vast store of information from all over the world, which is mainly aimed at an adult audience and may be unsuitable for children. There is a danger that children may be exposed to inappropriate images such as pornography, or information advocating violence, radicalism, racism or illegal and antisocial behaviour that they are unable to evaluate in a critical manner.

Contact

Chat rooms and other social networking sites can pose a real risk to children as users can take on an alias rather than their real names and can hide their true identity. The sites may be used by adults who pose as children in order to befriend and gain children's trust (known as "grooming") with a view to sexually abusing them. Children may not be aware of the danger of publishing or disclosing personal information about themselves such as contact details that allow them to be identified or located. They may also inadvertently put other children at risk by posting personal information and photographs without consent. The internet may also be used as a way of bullying a child, known as cyberbullying.

Culture

Children need to be encouraged to use the internet in a responsible way, as they may put themselves at risk by:

- ▶ becoming involved in inappropriate, anti-social or illegal activities as a result of viewing unsuitable materials or contact with inappropriate people;
- ▶ using information from the internet in a way that breaches copyright laws;

- ▶ uploading personal information about themselves, including photographs, on social networking sites without realising they are publishing to a potentially global audience;
- ▶ cyberbullying;
- ▶ use of mobile devices to take and distribute inappropriate images of the young person (sexting) that cannot be removed from the internet and can be forwarded on to a much wider audience than the child intended. Children may also be adversely affected by obsessive use of the internet that may have a negative impact on their health, social and emotional development and their educational attainment. They may visit sites that advocate extreme and dangerous behaviour such as self-harm or suicide or violent extremism, and more vulnerable children may be at a high degree of risk from such sites. All children may become desensitised to pornography, violence, sex and drug use or self-harm by regularly viewing these on-line.

Where any e-safety incident has serious implications for the child's safety or well-being, the support worker must discuss the matter with the DSL for the service who will decide whether or not a referral should be made to the Police

Safe use of ICT

When using the internet and internet search engines, children should receive the appropriate level of supervision for their age and understanding. Search engines should have an appropriate level of filtering to block access to unsuitable sites.

When using email, children and young people should be encouraged:

- ▶ to keep messages polite;
- ▶ not to disclose personal contact details for themselves or others;
- ▶ to tell their parent/carer immediately if they receive an offensive or distressing email not to use email to bully or harass others;
- ▶ be wary of opening attachments to emails where they are unsure of the content or have no knowledge of the sender.

When using social networking sites such as Facebook or newsgroups and forum sites, children and young people should be encouraged:

- ▶ not to give out personal details to anyone on-line that may help to identify or locate them or anyone else not to upload personal photos of themselves or others onto sites and to take care regarding what information is posted;
- ▶ how to set up security and privacy settings on sites or use a "buddy list" to block unwanted communications or deny access to those unknown to them;
- ▶ to behave responsibly whilst on-line and keep communications polite;
- ▶ not to respond to any hurtful or distressing messages but to let their support worker know so that appropriate action can be taken.

When using chat rooms, children and young people should be encouraged:

- ▶ not to give out personal details to anyone on-line that may help to identify or locate them or anyone else;
- ▶ to only use moderated chat rooms that require registration and are specifically for their age group;
- ▶ not to arrange to meet anyone whom they have only met on-line;
- ▶ to behave responsibly whilst on-line and keep communications polite;
- ▶ not to respond to any hurtful or distressing messages but to let their support workers know so that appropriate action can be taken;

- ▶ that any bullying or harassment via chat rooms or instant messaging may have serious consequences.

When moderating chat rooms and facilitating group conversations or conducting one-to-one mentoring, youth work or counselling sessions with young people all YMCA East Surrey staff should:

- ▶ ensure that young people able to control their environment (switch off cameras and mics) and that they know they can do this whenever they wish
- ▶ ensure that young people are in a safe space at home and that their parent/carers give their consent for them to participate in on-line session or group chat
- ▶ check that children and young people's environment has the appropriate degree of privacy and that this proportionate to their age and the nature of the on-line session that they are engaged in. Consider whether their parent/carer should be present
- ▶ check the privacy settings of the platform that is being used and take all reasonable measure (such as installing updates) to ensure the privacy of the discussion
- ▶ check that the legal terms and conditions of the platform allow for the age group to use it
- ▶ always use a secure, encrypted connection where possible
- ▶ avoid social one-to one messaging with children and young people
- ▶ avoid handing out their personal contact details and use an organisational log-in or contact
- ▶ have alternative means of communicating (e.g. telephone) with young people promptly if the primary method of communication fails
- ▶ keep up to date with new developments in the technology being used in order to provide the safest and most reliable service to young people
- ▶ inform children and young people if there is to be any recording, live-streaming, or sharing of media, ensure all participants and their parents / guardians are informed of the reason for this (e.g. publicity purposes) and agree to it before participating

It is considered ethically desirable to receive at least some elements of regular supervision by the same method of communication that is used with young people, in order to gain direct experience of the strengths and limitations of the chosen way of working

In addition, when moderating chat rooms and facilitating group conversations, all YMCA East Surrey staff should:

- ▶ draw up agreed ground rules for acceptable behaviour and language with participants before the session starts
- ▶ ensure that children and young people understand agree ground rules for the group
- ▶ agree with their manager before the session the maximum number of participants for a session
- ▶ check that children and young people's environment has the appropriate degree of privacy and that this proportionate to their age and the nature of the on-line discussion that they are engaged in
- ▶ be aware of the ages of the participants and that the age range of the group is appropriate
- ▶ keep a register of participation, including those who arrived early or late
- ▶ ensure that on-line chat sessions are facilitated by two members of staff wherever possible

In addition, when engaging in one-to-one mentoring, youth work or counselling sessions with young people, YMCA East Surrey staff should:

- ▶ assess the young people's psychological state or risk of social isolation to ensure the suitability of the service provided
- ▶ give careful consideration to how the practitioner will respond to young people who become so distressed or disturbed that they require additional services or support from healthcare providers or their social network
- ▶ be clear about the boundaries between what is provided by YMCA ES services directly and how any additional support will be sought in emergency situations by the practitioner, and what depends on young people or their parent/carers acting on their own initiative.

When using web cameras, children and young people should be encouraged:

- ▶ to use them only with people who are well known to them
- ▶ not to do anything that makes them feel uncomfortable or embarrassed
- ▶ to tell their support workers if anyone is trying to force them to do something they don't want to

For additional information on remote service delivery, see [Youth Access Remote Support Toolkit](#)

Cyber bullying

Cyberbullying is defined as the use of IT to deliberately hurt or upset someone. Unlike traditional physical forms of bullying, the internet allows bullying to continue 24 hours per day and invades the victim's home life and personal space. It also allows distribution of hurtful comments and material to a wide audience. Cyberbullying is extremely prevalent as children who would not consider bullying in the physical sense may find it easier to bully through the internet, especially if it is thought the bullying may remain anonymous.

In extreme cases, cyberbullying could be a criminal offence. Bullying may take the form of:

- ▶ rude, abusive or threatening messages via email or text;
- ▶ posting insulting, derogatory or defamatory statements on blogs or social networking sites;
- ▶ setting up websites that specifically target the victim;
- ▶ making or sharing derogatory or embarrassing videos of someone via mobile phone or email (for example, "happy slapping"). Most incidents of cyberbullying will not necessarily reach significant harm thresholds and will probably be best dealt with YMCA East Surrey's own [Bullying and Harassment policy](#).

Children and young people should be encouraged:

- ▶ not to disclose their password to anyone;
- ▶ to only give out mobile phone numbers and email addresses to people they trust;
- ▶ to only allow close friends whom they trust to have access to their social networking page;
- ▶ not to respond to offensive messages;
- ▶ to tell their support worker about any incidents immediately.

Appendix 12B Female Genital Mutilation (FGM)

The World Health Organisation defines female genital mutilation (FGM) as:

- ▶ all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons

FGM is a criminal offence – it is child abuse and a form of violence against women and girls, and therefore should be treated as such. Cases should be dealt with as part of existing structures, policies and procedures on child protection and adult safeguarding. There are, however, particular characteristics of FGM that front-line professionals should be aware of to ensure that they can provide appropriate protection and support to those affected.

Surrey Safeguarding Children’s Partnership recommend that the following principles should be adopted by all agencies in relation to identifying and responding to those at risk of, or who have undergone FGM, and their parent(s)/carer(s) or guardians.

- ▶ The safety and welfare of the child is paramount;
- ▶ All agencies should act in the interests of the rights of the child, as stated in the United Nations Convention on the Rights of the Child (1991);
- ▶ FGM is illegal in the UK;
- ▶ FGM is an extremely harmful practice - responding to it cannot be left to personal choice;
- ▶ Accessible, high quality and sensitive health, education, Police, social care and voluntary sector services must underpin all interventions;
- ▶ As FGM is often an embedded social norm, engagement with families and communities plays an important role in contributing to ending it;
- ▶ All decisions or plans should be based on high quality assessments (in accordance with *Working Together to Safeguard Children 2015* statutory guidance in England, and the *Framework for the Assessment of Children in Need and their Families in Wales 2001*).

If a child/young person under age of 18 identifies one or more serious or immediate risks from the list below, or other risks that in your judgment appear to be serious, then refer to Surrey Children’s Services:

- ▶ A child or sibling asks for help;
- ▶ A parent/carer or family member expresses concern that FGM may be carried out on the child;
- ▶ Girl has confided that she is to have a “special procedure” or to attend a “special occasion”;
- ▶ Girl has talked about going away to “become a woman” or to “become like my mum and sister”;
- ▶ Girl has a sister or other female child relative who has already undergone FGM;
- ▶ Family/child is already known to Children’s Services - if known and have identified FGM within a family you must share this information with Children Services.

Signs that FGM has taken place

- ▶ Prolonged absence from school with noticeable behaviour changes on the girl's return;

- ▶ Longer/frequent visits to the toilet particularly after a holiday abroad, or at any time;
- ▶ Some girls may find it difficult to sit still and appear uncomfortable or may complain of pain between their legs;
- ▶ Some girls may speak about 'something somebody did to them', that they are not allowed to talk about;
- ▶ A professional overhears a conversation amongst children about a 'special procedure' that took place when on holiday;
- ▶ Recurrent Urinary Tract Infections (UTI) or complaints of abdominal pain.

Any information or concern that a female is at immediate risk of FGM, should result in a safeguarding referral to the C-SPA for Surrey and the MASH for West Sussex

A disclosure from the girl or professional observing a physical sign that an FGM procedure has taken place should be reported to the Police via mandatory reporting pathway.

The Serious Crime Act 2015 places a duty on all health care professionals to notify the Police of known cases of FGM relating to children under 18. It is therefore extremely important that any information relating to potential FGM is passed on to your Line Manager, the DSL and if necessary the Police.

Further information and procedures can be found in the following Government document:
http://www.legislation.gov.uk/ukpga/2003/31/pdfs/ukpga_20030031_en.pdf
http://www.legislation.gov.uk/ukpga/2003/31/pdfs/ukpga_20030031_en.pdf

Appendix 13B
Honour Based Violence (HBV)

Forced marriage is an offence and is when a person uses violence, threats or any other types of coercion for the purpose of causing another person to enter into a marriage and believes, or ought reasonably to believe that the conduct may cause the other person to enter into the marriage without free and full consent.

Honour Based Violence (HBV) is a crime or incident which has or may have been committed to protect or defend the honour of the family and/or community.

HBV includes various forms of violence arising from notions of so-called honour and in line with the terminology used by academics, statutory and non-statutory agencies worldwide in relation to such violence.

HBV is a type of abuse recognised in the Care Act. That means that it requires a safeguarding response where the victim is an adult (or child) at risk.

Honour Based Violence is a collection of practices, which are used to control behaviour and exert power within families to protect perceived cultural and religious beliefs and/or honour.

Such violence can occur when perpetrators perceive that an individual has shamed the family and/or community by breaking their honour code.

Honour Based Violence can also be the term specifically used to describe murders in the name of so-called honour, sometimes called 'honour killings'. These are murders in which predominantly women are killed for perceived immoral behaviour, which is deemed to have breached the honour code of a family or community, causing shame.

The Police definition of so-called HBV is: 'a crime or incident, which has been or may be committed to protect or defend the honour of the family and/or community'.

YMCA East Surrey staff should respond in a similar way to cases of honour violence as with domestic violence and forced marriage:

- ▶ In facilitating disclosure;
- ▶ Supporting other agencies responsible for developing individual safety plans;
- ▶ Ensuring the child's safety by according them confidentiality in relation to the rest of the family;
- ▶ Completing individual risk assessments;
- ▶ Referrals to be made via C-SPA (for Surrey) or MASH (for West Sussex), and the Police, as honour based violence can be extremely serious.

Appendix 14B PREVENT

The PREVENT strategy aims to stop people becoming terrorists, supporting terrorism. While it remains rare for children and young people to become involved in terrorist activity, young people from an early age can be exposed to terrorist and extremist influences or prejudiced views. As with other forms of safeguarding strategies, early intervention is always preferable. Those working with other families and communities play a key role in ensuring young people and their communities are safe from the threat of terrorism.

The PREVENT strategy identifies that young people are more likely to be vulnerable to violent extremist or terrorist narratives. YMCA East Surrey has a duty of care to children and staff which includes safeguarding them from the risk of being drawn into terrorism. Being drawn into terrorism includes not just violent extremism but also non-violent extremism, which can create an atmosphere conducive to terrorism and can popularise views which terrorists exploit.

Radicalisation is defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups.

There is no obvious profile of a person likely to become involved in extremism or a single indicator of when a person might move to adopt violence in support of extremist ideas. The process of radicalisation is different for every individual and can take place over an extended period or within a very short time frame.

Three main areas of concern have been identified for initial attention in developing the awareness and understanding of how to recognise and respond to the increasing threat of children/young people being radicalised:

- ▶ Increasing understanding of radicalisation and the various forms it might take, thereby enhancing the skills and abilities to recognise signs and indicators amongst all staff working with children and young people;
- ▶ Identifying a range of interventions - universal, targeted and specialist - and the expertise to apply these proportionately and appropriately;
- ▶ Taking appropriate measures to safeguard the wellbeing of children living with or in direct contact with known extremists.

Children and young people can be drawn into violence or they can be exposed to the messages of extremist groups by many means.

These can include through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet. This can put a young person at risk of being drawn into criminal activity and has the potential to cause significant harm.

The risk of radicalisation is the product of a number of factors and identifying this risk requires that staff exercise their professional judgement, seeking further advice as necessary. It may be combined with other vulnerabilities or may be the only risk identified.

Potential indicators include:

- ▶ Use of inappropriate language;

- ▶ Possession of violent extremist literature;
- ▶ Behavioural changes;
- ▶ The expression of extremist views;
- ▶ Advocating violent actions and means;
- ▶ Association with known extremists;
- ▶ Seeking to recruit others to an extremist ideology.

YMCA East Surrey will arrange "PREVENT" training for all members of staff who may come into contact with young people at risk of radicalisation so that they are aware of the signs and know what action to take if they suspect that young people may be at risk of becoming involved in extremist ideas and ideology.

Members of staff will be encouraged to work collaboratively with other professionals in Surrey and to engage with local Prevent Strategies and signpost to the Learning Together to Be Safe Toolkit and Educate Against Hate which is used in schools.

Members of staff should refer any concerns relating to potential radicalisation in the first instance to their manager and the Designated Safeguarding Lead (DSL) and also to local Police.

As issues relating to radicalisation may be quite complex and sensitive in nature it may not always be clear on what action should be taken. The Surrey Safeguarding Partnership recommended flow chart shown [here](#) can be used when deciding on the most appropriate action to take.

Further information and guidance can be found in the following Government document:

https://www.legislation.gov.uk/ukdsi/2015/9780111133309/pdfs/ukdsiod_9780111133309_en.pdf

Channel

Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. The programme uses a multi-agency approach to protect vulnerable people by:

- ▶ identifying individuals at risk
- ▶ assessing the nature and extent of that risk
- ▶ developing the most appropriate support plan for the individuals concerned

Sections 36 to 41 of the [Counter-Terrorism and Security Act 2015](#) set out the duty on local authorities and partners of local panels to provide support for people vulnerable to being drawn into any form of terrorism.

This guidance has been issued under sections 36(7) and 38(6) of the act to support panel members and partners of local panels.

The document:

- ▶ provides guidance for Channel panels
- ▶ provides guidance for panel partners on Channel delivery (that is, those authorities listed in Schedule 7 to the Counter-Terrorism and Security Act 2015 who are required to co-operate with Channel panels and the police in carrying out their functions in Chapter 2 of Part 5 of the Counter-Terrorism and Security Act 2015)
- ▶ explains why people may be vulnerable to being drawn into terrorism and describes signs to look for

- ▶ provides guidance on the support that can be provided to safeguard those at risk of being drawn into terrorism

Channel may be appropriate for anyone who is vulnerable to being drawn into any form of terrorism. Channel is about ensuring that vulnerable children and adults of any faith, ethnicity or background receive support before their vulnerabilities are exploited by those that would want them to embrace terrorism, and before they become involved in criminal terrorist activity.

For further information, please see:

<https://www.gov.uk/government/publications/channel-guidance>

Appendix 15B

Responding to self-harming behaviours

Definitions from the Mental Health Foundation (2003) are:

- ▶ Deliberate self-harm is self-harm without suicidal intent, resulting in non-fatal injury;
- ▶ Attempted suicide is self-harm with intent to take life, resulting in non-fatal injury;
- ▶ Suicide is self-harm, resulting in death.

The term self-harm rather than deliberate self-harm is the preferred term as it a more neutral terminology recognising that whilst the act is intentional it is often not within the young person's ability to control it.

Self-harm is a common precursor to suicide and children and young people who deliberately self-harm may kill themselves by accident.

Self-harm can be described as wide range of behaviours that someone does to themselves in a deliberate and usually hidden way. In the vast majority of cases self-harm remains a secretive behaviour that can go on for a long time without being discovered. Many children and young people may struggle to express their feelings in another way and will need a supportive response to assist them to explore their feelings and behaviour and the possible outcomes for them.

The indicators that a child or young person may be at risk of taking actions to harm themselves or attempt suicide can cover a wide range of life events such as bereavement, bullying at school or a variety of forms of cyber bullying, often via mobile phones, homophobic bullying, mental health problems including eating disorders, family problems such as domestic violence and abuse or any form of child abuse as well as conflict between the child and parents.

The signs of the distress the child may be under can take many forms and can include:

- ▶ Cutting behaviours;
- ▶ Other forms of self-harm, such as burning, scalding, banging, hair pulling;
- ▶ Self-poisoning;
- ▶ Not looking after their needs properly emotionally or physically;
- ▶ Direct injury such as scratching, cutting, burning, hitting yourself, swallowing or putting things inside;
- ▶ Staying in an abusive relationship;
- ▶ Taking risks too easily;
- ▶ Eating distress (anorexia and bulimia);
- ▶ Addiction for example, to alcohol or drugs;
- ▶ Low self-esteem and expressions of hopelessness.

Information sharing and consent

The best assessment of the child or young person's needs and the risks they may be exposed to requires useful information to be gathered in order to analyse and plan the support services. In order to share and access information from the relevant professionals the child or young person's consent will be needed.

Professional judgement must be exercised to determine whether a child or young person in a particular situation is competent to consent or to refuse consent to sharing information. Consideration should include the child's chronological age, mental and

emotional maturity, intelligence, vulnerability and comprehension of the issues. A child at serious risk of self-harm may lack emotional understanding and comprehension and the Fraser guidelines should be used. Advice should be sought from a Child and Adolescent Psychiatrist if use of the Mental Health Act may be necessary to keep the young person safe.

Informed consent to share information should be sought if the child or young person is competent unless:

- ▶ The situation is urgent and delaying in order to seek consent may result in serious harm to the young person;
- ▶ Seeking consent is likely to cause serious harm to someone or prejudice the prevention or detection of serious crime.

If consent to information sharing is refused, or can/should not be sought, information should still be shared in the following circumstances:

- ▶ There is reason to believe that not sharing information is likely to result in serious harm to the young person or someone else or is likely to prejudice the prevention or detection of serious crime;
- ▶ The risk is sufficiently great to outweigh the harm or the prejudice to anyone which may be caused by the sharing;
- ▶ There is a pressing need to share the information.

Professionals should keep parent/carers informed and involve them in the information sharing decision even if a child is competent or over 16. However, if a competent child wants to limit the information given to their parent/carers or does not want them to know it at all, the child's wishes should be respected, unless the conditions for sharing without consent apply.

Where a child is not competent, a parent/carer with parental responsibility should give consent unless the circumstances for sharing without consent apply.

Further support and advice in dealing with self-harm issues can be accessed from Heads Together, YMCA East Surrey's counselling service (01737 773089). YMCA East Surrey also has its own WAVES project for young people facing mental health difficulties which is based at the YMCA Sovereign Centre (01737 222859).

Appendix 16B Trafficking

The organised crime of child trafficking into the UK has become an issue of considerable concern to all professionals with responsibility for the care and protection of children. Any form of trafficking children is an abuse. Children are coerced, deceived or forced into the control of others who seek to profit from their exploitation and suffering. Some cases involve UK-born children being trafficked within the UK.

Most children are trafficked for financial gain. This can include payment from or to the child's parents. In most cases, the trafficker also receives payment from those wanting to exploit the child once in the UK. Trafficking is carried out by organised gangs and individual adults or agents.

Trafficked children may be used for:

- ▶ Sexual exploitation;
- ▶ Domestic service;
- ▶ Sweatshop, restaurant and other catering work;
- ▶ Credit card fraud;
- ▶ Begging or pick pocketing or other forms of petty criminal activity;
- ▶ Agricultural labour, including tending plants in illegal cannabis farms;
- ▶ Benefit fraud;
- ▶ Drug mules, drug dealing or decoys for adult drug traffickers;
- ▶ Illegal inter-country adoptions;
- ▶ Contemporary slavery.

Trafficked children are victims of serious crime and this will impact on their health and welfare. In order to coerce and control, they are commonly subject to physical abuse including use of drugs and alcohol, emotional and psychological abuse, sexual abuse and neglect as a result of a lack of care about their welfare and the need for secrecy surrounding their circumstances.

Whenever a YMCA East Surrey staff member or volunteer comes into contact with a child, who they feel may be trafficked, the practitioner should check whether the child is receiving services from Surrey Children's Services. If not, then the staff member/volunteer should raise the issue with their manager or DSL and make a referral to the C-SPA (for Surrey) and the MASH (for West Sussex).

Further information and guidance can be found in the following document produced by Department for Education:

[Care of Unaccompanied migrant children and child victims of modern slavery: Statutory guidance for local authorities November 2017](#)