



Safeguarding Children Policy

Date of review Reviewed By Date of next review	March 2022 Kim Carwardine September 2022
Designated Safeguarding Lead (DSL) Deputy Designated Safeguarding Lead (dDSL)	Kim Carwardine Kath Barclay

This policy will be made available to parents on request and will be available on Bridge the Gap Malvern website. In addition, the following documents can be obtained at the web addresses provided:

- Working Together to Safeguard Children 2018
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/779401/Working_Together_to_Safeguard-Children.pdf
- Keeping Children Safe in Education, Department for Education September 2021 (note it is a statutory requirement for Part 1 and Annex A of this document to have been read and understood by all staff and Governors).
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1021914/KCSIE_2021_September_guidance.pdf
- Disqualification under the Childcare Act June 2006
<https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006/disqualification-under-the-childcare-act-2006>
- Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings - May 2019
<https://www.saferrecruitmentconsortium.org/GSWP%20Sept%202019.pdf>
- Worcestershire Safeguarding Partnership
<https://www.safeguardingworcestershire.org.uk/wscb/>

Worcestershire Safeguarding Children Partnership (WSCP)

In Worcestershire the three Safeguarding Partners are:

1. Chief Executive of Worcestershire County Council
2. Chief Constable of West Mercia Police
3. Accountable Officer for NHS South Worcestershire, NHS Wyre Forest and NHS Redditch and Bromsgrove Clinical Commissioning Groups (CCGs)

WSCP replaces the Worcestershire Safeguarding Children Board (WSCB), however guidance produced by WSCB remains valid and should be followed by professionals.



Introduction

Safeguarding and promoting the welfare of children is everyone's responsibility. All staff should make sure that all decisions made are in the best interests of the child/vulnerable adult. Safeguarding and promoting the welfare of children and vulnerable adults is defined for the purposes of this policy as:

- protecting from abuse and maltreatment
- preventing harm to health or development
- ensuring children grow up with the provision of safe and effective care
- taking action to enable all children and young people to have the best outcomes.

Child protection is part of the safeguarding process. It focuses on protecting individual children identified as suffering or likely to suffer significant harm. This includes child protection procedures which detail how to respond to concerns about a child.

The centre's duty is to ensure that safeguarding permeates all activity and functions. Bridge The Gap Malvern adheres to the statutory guidance issued by the Department of Education (Keeping Children Safe in Education 2021). This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2002; and in line with government publications the Teachers' Standards 2012, 'Working Together to Safeguard Children' 2015 and 'Keeping Children Safe in Education' 2021. Please note that the centre's Radicalisation and Extremism Self Risk Assessment is available in the Staff Handbook or can be requested from the DSL. Our policy applies to all staff, part time and full time, permanent or temporary and volunteers working at Bridge the Gap Malvern, hereafter referred to as the centre.

There are five main elements to our policy:

- Ensuring we practice safe recruitment in checking the suitability of staff and volunteers to work with students;
- Raising awareness of child protection issues and equipping students with the skills needed to keep them safe;
- Developing and then implementing procedures for identifying and reporting cases, or suspected cases, of abuse;
- Supporting students who have been identified as in need of early help or at risk of harm in accordance with his/her agreed Child Protection, Child in Need or Early Help plan;
- Establishing a safe environment in which students can learn and develop.

Signs that a child or young person may benefit from early help include:

- displaying disruptive or anti-social behaviour
- being bullied or bullying others
- having poor attendance at school
- being involved in, or at risk of, offending
- having poor general health
- having anxiety, depression or other mental health issues
- misusing drugs or alcohol
- having a particularly challenging relationship with parents or appearing to be unusually independent from their parents
- experiencing difficulties at home, such as domestic abuse, parental substance abuse or parental mental health problems



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Some groups of children may be more likely to need early help than their peers. These include children who:

- have been excluded from school
- have special educational needs
- are disabled
- are in care
- are leaving or preparing to leave care
- are young carers
- are young parents (or about to become young parents)
- are experiencing housing issues
- have health conditions
- have mental health needs
- have a family member in prison or who are affected by parental offending
- are at risk of honour-based abuse (such as female genital mutilation or forced marriage)
- Children who are persistently absent from school, including persistent absences for part of the school day.

The nature of the centre's intake is that many students will experience a range of SEND, including autism and attachment disorders, high anxiety and low levels of emotional resilience. Some may be in the looked after system or adopted. Students are likely to have experienced trauma/ACEs. It is therefore incumbent on all staff to recognise the additional safeguarding challenges that these children represent. In particular, staff need to be aware that:

- There is higher risk of peer group isolation
- They may be more vulnerable to bullying
- Bullying may have a disproportionate impact on them
- They may struggle to communicate with staff about their situations and/or concern for others
- Behaviour/mood changes and injuries may relate to possible abuse so this should always be considered, possible signs must never just be assumed to be due to their SEN or disability

The centre will also:

- Establish and maintain positive relationships within which students feel safe, secure, valued, respected and encouraged to talk, believing they will be listened to;
- Ensure students know that there are adults at the centre whom they can approach if they are worried;
- Include opportunities for students to develop the skills they need to recognise and stay safe from abuse and to know who they can turn to for help.

Procedures

We will follow the procedures set out by the Worcestershire Safeguarding Children Partnership (WSCP) and Worcester Safeguarding Adults Board (WSAB), and take account of guidance issued by the Department for Education (DfE). The WSCP/WSAB website address is:

<https://www.safeguardingworcestershire.org.uk>

The centre will:

- Ensure it has a Senior Leader nominated as a Designated Safeguarding Lead (DSL) who will undertake regular, appropriate training and support for this role (currently



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Kim Carwardine).

- Ensure it has a nominated Director responsible for safeguarding children (currently Kath Barclay).
- Ensure every member of staff, including temporary staff (supply staff are not used), knows the name of the DSL (and any dDSLs) and how to contact them, and understands their role.
- Ensure all staff understand their responsibilities in being alert to the signs of abuse and neglect, including the specific issues of Female Genital Mutilation (FGM), child sexual exploitation (CSE), child criminal exploitation (CCE), children missing education (CME) and radicalisation and extremism (RE), and maintain an attitude of “it could happen here”. All staff must always act in the best interest of the student.
- Ensure all staff understand their responsibility for referring any concerns to the DSL/dDSL in a timely manner and are aware that they may raise concerns directly with Children’s Social Care if they believe their concerns have not been listened to or sufficiently acted upon.
- Risk assess volunteers to decide whether to obtain an enhanced DBS for volunteers who are not engaging in a regulated activity. Such risk assessments will be recorded.
- All staff in leadership roles will be subject to the S128 check.
- The centre will report immediately to Children’s Social Care Services any students who have suffered or are likely to suffer significant harm. The centre will work with external agencies in line with procedures set out by the Worcestershire Safeguarding Children Partnership (WSCP) and take account of guidance issued by the Department of Education (DfE) to support children who are in need of additional support. The centre will act to promote the welfare of a child in need of additional support, even if they are not suffering harm or are not at immediate risk.
- Ensure that parents have an understanding of the responsibility for Safeguarding placed on Bridge The Gap Malvern, and staff, by publishing this document on Bridge The Gap Malvern Limited’s website.
- Notify Worcestershire Children’s Services if there is an unexplained absence of more than two days of a pupil who is subject to a child protection plan.
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding safeguarding matters, including attendance, at strategy meetings, initial case conferences, core groups and child in need review meetings.
- Ensure that the duty of care towards students and staff is promoted by raising awareness of illegal, unsafe and unwise behaviour and assisting staff to monitor their own standards and practice.
- Keep written records of all concerns about students, even where there is no need to refer the matter immediately.
- Ensure all Safeguarding records are kept securely in locked locations.
- Ensure that Safeguarding files are transferred in a safe and timely manner when students move to a different provision.
- Be aware of and follow procedures set out by Children’s Services and the WSCP where an allegation is made against a member of staff or volunteer, including making a referral to the DBS and/or National College for Teaching and Leadership if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have been had they not resigned. Such referrals will always be given priority and will be done promptly and made within at least one month of the person leaving our employment.
- Operate safer recruitment practice.
- Ensure that the DSL/dDSL undertakes an annual review of the centre’s safeguarding policies and procedures and of the efficiency with which the related



duties have been discharged in accordance with current legislation.

- Ensure policies and procedures are reviewed and updated regularly and at least annually.

Training

All staff will be given safeguarding induction which will include basic safeguarding information relating to signs and symptoms of abuse, how to manage a disclosure from a child and when and how to record a concern about the welfare of a child, advice on safe working practice, the centre's Safeguarding Children's Policy, the Staff Code of Conduct, the centre's response to children missing education, the identity and contact details of the DSL and a copy of Part 1 of Keeping Children Safe in Education.

All regular visitors, visiting speakers, external mentors to the centre, and volunteers not working directly with children, will be told where they can access this policy, given the name of the DSL and informed of the centre's procedures in reporting concerns.

All staff will be required to sign to confirm that they have read and understood this policy and Part 1 of the current version of KCSIE annually, receive annual Safeguarding refresher training and any updates as necessary throughout the year.

The DSL (and any other staff with specific responsibility for safeguarding) will undertake training at a level suitable to their role and responsibility, updated at least every two years. The DSL will also undertake further relevant training in safeguarding related issues such as CSE, Radicalisation (Prevent Training), Online Safety and Management of Allegations and cascade the learning from this training to the rest of the staff.

Staff Code of Conduct

All staff (including full time, part time, temporary and permanent members of staff) must adhere to the centre's Code of Conduct and a copy of this is made available to all Staff. Staff should be mindful of the need to consider safeguarding arrangements where students are engaged in one to one sessions. Specific guidance can be provided on a case-by-case basis by consulting with the DSL/dDSL.

Off site provision

The centre will obtain written confirmation that external alternative providers have completed all relevant safeguarding checks on their staff, evidence of DBS checks and safeguarding training and details of their Safeguarding Lead.

Child on Child abuse

Child on child abuse may take many forms including:

- Bullying, including cyber bullying, prejudice-based and discriminatory bullying
- Abusive, harassing or misogynistic messages
- Physical abuse, including online activity which facilitates, threatens and/or encourages physical abuse
- Sexual violence and sexual harassment including online activity which facilitates, threatens and/or encourages sexual violence.
- Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.
- Sexting, ie consensual and non-consensual sharing of nude and semi-nude images and / or videos



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- Sharing of abusive images and pornography to those who don't want to receive such content
- Abuse in intimate personal relationships between peers
- Upskirting*
- Initiation/hazing ceremonies, on line or off line.

**Since April 12, 2019, upskirting has been a criminal offence in England and Wales. Upskirting typically involves taking a picture under a person's clothing without their consent, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. Under the Voyeurism Act, upskirting offenders can now be arrested, face up to two years in prison and having their name placed on the sex offenders' register. This includes instances where culprits say the images were taken "just for a laugh".*

Guidance on how to respond to the sharing of nudes and semi nudes:

<https://www.gov.uk/government/publications/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people/sharing-nudes-and-semi-nudes-how-to-respond-to-an-incident-overview>

All staff must:

- Be aware that technology is a significant component in many safeguarding and wellbeing issues, and that children are at risk of online abuse (as well as face to face)
- Be aware that children and young people can abuse their peers online through:
 - Abusive, harassing, and misogynistic messages
 - Non-consensual sharing of indecent nude and semi-nude images and/or videos, especially around chat groups
 - Sharing of abusive images and pornography
- Recognise the indicators of peer-on-peer abuse, know how to identify it and respond to reports
- Recognise that peer-on-peer abuse may be taking place, even if not reported
- Understand their role in preventing it and responding to it if they believe a child may be at risk
- Understand the importance of challenging inappropriate behaviours between peers and that not doing so can create an unsafe environment and lead to a culture that normalises abuse
- Abuse can take place inside and outside of school or online.

All child on child abuse will be taken seriously. Attempts are made to minimise child on child abuse using the following strategies:

- Students are made aware of the centre's expectations of behaviour and attitude during their induction to the centre. It is explained that the centre's behaviour expectations extend to their behaviour, and any social interaction with other students, on and off line, outside of centre.
- Students are explicitly informed that they can report all forms of abuse or welfare concerns regarding themselves or others to their Transition Coordinator or any other member of Bridge The Gap Malvern Staff. They are also given the name and contact details of the DSL as well as information about the DSL's role.
- Relationship and social skills education/training forms part of every Bridge The Gap Malvern programme and children are encouraged to disclose all forms of child on child abuse.
- The centre implements the government's Relationship and Sexual Education and



Health Education statutory guidance, June 2019.

<https://www.gov.uk/government/publications/relationships-education-relationships-an-d-sex-education-rse-and-health-education>

- Abusive comments are never overlooked as 'banter' and all students are encouraged to communicate respectfully with adults and their peers
- Sexist or racist abuse will not be tolerated and will be addressed accordingly.
- All allegations of peer on peer abuse will be recorded using the same cause for concern procedures as all other incidents.
- Victims and perpetrators will both be supported through a process of Restorative Justice and behaviour plans will be used if necessary.

Contextual Safeguarding

- Assessments of student's safety will include the wider picture, i.e. the social context in which the student operates outside of the centre.
- Bridge The Gap Malvern students do not attend a specific establishment and may live anywhere in Worcestershire so the context of each student will be considered individually
- Consideration will always be given to a student's wider social context when considering concerns around changes in behaviour, attitude and overall well being.
- All staff, but especially the DSL/dDSL(s) should consider whether students are at risk of abuse or exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation, and serious youth violence.

Mental health Concerns and Safeguarding

Mental health problems can, in some cases, be an indicator that a student has suffered or is at risk of suffering abuse, neglect or exploitation. Their experiences of abuse will have an impact on their mental health. If staff have a mental health concern about a student that is also a safeguarding concern immediate action should be taken. The centre should ensure they have clear systems and processes in place for identifying possible mental health problems and referring if necessary.

Responsibilities

The Directors will ensure that

- The school's policies and procedures, particularly those concerning referrals of cases of suspected abuse and neglect, are understood and followed by all staff.
- Safeguarding and child protection is at the forefront, and underpin all relevant aspects of process and policy development.
- There is a centre wide approach to safeguarding.
- Teaching about safeguarding, including online safety, is adapted for vulnerable students, victims of abuse and students with SEND

The DSL will ensure that:

- Safeguarding policies and procedures are in place, available to parents (on the centre website or by other means) and reviewed annually
- An annual report on the effectiveness of the centre's safeguarding procedures is presented to the Director of BTGM. Any weaknesses relating to safeguarding are remedied without delay.
- All legislative duties are complied with, including the duty to report suspected or known cases of FGM and the duty to prevent students from being drawn into terrorism.



- Safeguarding policies and procedures are fully implemented and followed by all staff. The DSL will
 - Organise safeguarding induction training for all newly appointed staff. DSL to complete safeguarding training every two years. Staff to complete safeguarding training every three years. Whole staff refresher updated training will take place yearly following changes to KCSIE guidance. Undertake an annual audit of safeguarding procedures, using the County safeguarding checklist or similar.
 - Liaise with social workers of students who have a social worker and subject to any CIN, CPP or court orders and report any concerns immediately to them. For care leavers the DSL will contact the local authority Personal Advisor appointed to advise and support the care leaver. The DSL or Head of Centre will attend multi-agency meetings. further guidance can be found at https://whatworks-csc.org.uk/wp-content/uploads/WWCSC_what_works_education_c_hildren_SWs_Feb20.pdf
 - Refer a student to the Early Help Hub or Children's Social Care promptly, when there are concerns about possible abuse and neglect. The DSL will contact the Police in the case of serious harm. See National Police Chief Councils Guidance for centres on when to contact the police. https://www.npcc.police.uk/documents/ChildrenandYoungpeople/Whentocallthepolice_guidanceforcentresandcolleges.pdf
 - Refer a student to the Channel Panel promptly when there are concerns about possible radicalisation or involvement in extremist groups. Guidance on Channel is available at: <https://www.gov.uk/government/publications/channel-guidance>.
 - Keep written records of concerns about students, including the use of body maps, even where there is no need to refer the matter immediately. Note staff must only view parts of a child's body which are normally visible.
 - Ensure all child protection records are kept securely in locked locations.
 - Ensure that all child protection files are transferred in a safe and timely manner when a student moves settings, both between and across phases, within and out of county.
 - Notify the social worker if there is an unexplained absence of more than two days of a pupil who is subject to a child protection plan.
 - Monitor unauthorised absence, particularly where children go missing on repeated occasions, reporting concerns in line with the procedure for a child going missing in the Missing Children's Policy.
 - Develop effective links with relevant agencies and other professionals and co-operate as required with their enquiries regarding safeguarding matters including co-operation with Child Safeguarding Practice Reviews (formerly termed Serious Case Reviews), attendance at strategy meetings, initial and review child protection conferences, core group and child in need review meetings.
 - Contribute to assessments and provide a report to initial and review conferences which has been shared with parents first.
 - Coordinate a programme of safety, health and well-being through the curriculum, including issues of protective behaviours, healthy relationships, staying safe on-line, and the active promotion of the fundamentals of British Values.

Managing a Disclosure

All staff in the centre are in a unique position to observe student's behaviour over time and often develop close and trusting relationships with students. If a student discloses directly to a member of staff, the following advice will be followed:

- Listen carefully to what is said.
- Do not promise confidentiality.



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- Ask only open questions such as:
 - ‘Could you tell me what happened?’
 - ‘Please explain what you mean when you say....?’
 - ‘Can you describe the person? or Can you describe the place?’
- Do not ask leading questions (which may be considered to suggest what might have happened, or who has perpetrated the abuse) e.g. ‘Did your Dad hit you?’
- Do not force the child to repeat what he/she said in front of another person.
- Do not begin an investigation – for example by asking the child to record what happened in writing or taking a photograph of any injuries.
- Report the concern immediately to the DSL and complete a hand-written record as soon after the disclosure as possible, and in any case within 24 hours, using the child’s words as far as possible. Use body maps to record any observed injuries - **Note staff must only view parts of a student’s body which are normally visible.**

Where a student discloses safeguarding concerns or allegations against another student in the same setting, the DSL should refer to the local procedures on the WSCB website (section 2.11) and seek advice from the Children’s Services Front Door before commencing its own investigation or contacting parents.

Staff Obligations – staff should refer to the Staff Code of Conduct, which provides details about their obligations for keeping the School informed of reasons why they should not work with students.

Definitions of Abuse and Neglect

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children.

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

Emotional abuse: the persistent emotional maltreatment of a student such as to cause severe and adverse effects on the student’s emotional development. It may involve conveying to a student 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 student 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 the student. These may include interactions that are beyond a student’s developmental capability as well as overprotection and limitation of exploration and learning, or preventing the student participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing students frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation,



kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving students in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a student 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 students.

Neglect: the persistent failure to meet a student's basic physical and/or psychological needs, likely to result in the serious impairment of the student's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Child sexual exploitation (CSE): involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim, which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyber bullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

Staff are aware that expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example NSPCC offers information for centres and colleges on the TES website and also on its own website www.nspcc.org.uk. Also <https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guidance-for-practitioners>.

Staff can also access broad government guidance on the issues listed below via the GOV.UK website:

- child sexual exploitation (CSE) – see also below
- bullying, including cyber bullying
- domestic violence
- drugs
- fabricated or induced illness
- faith abuse
- female genital mutilation (FGM) – see also below
- forced marriage
- gangs and youth violence
- gender-based violence/violence against women and girls (VAWG)
- mental health
- private fostering
- radicalisation



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- sexting
- teenage relationship abuse
- trafficking

County Lines and Child Criminal Exploitation (CCE): Criminals deliberately target vulnerable children and groom them into trafficking drugs or engaging in other criminal activities, with promises of money, friendship and status. The centre recognises that many of its pupils present with vulnerabilities that make them especially at risk of being targeted by criminals. For example, students in the looked after system; with learning difficulties; or trapped in poverty. Students who miss meetings with the centre could be an indicator that they are involved with criminal activities. Any reports or suspicion that pupils are being abused in this way will be acted on immediately.

'GET SAFE'

GET SAFE is the Worcestershire multi agency response to the criminal exploitation of children and young people aged 10- 25 years of age.

GET Safe stands for:

- **G**angs
- **C**hild Sexual **E**xploitation
- **T**rafficking
- **M**odern Day **S**lavery
- **A**bsent or **M**issing
- **F**orced **M**arriage
- **C**riminal **E**xploitation

GET SAFE also includes: County Lines, Honour based violence, Female Genital Mutilation (FGM) and Radicalisation.

We use the contextual safeguarding and signs of safety approaches to understand the young person's world and the risks and vulnerabilities alongside the protective factors and strengths.

We are clear that **criminal exploitation is harm and abuse** and that as partner agencies we have a duty to work together to identify when this is happening and take action to address and tackle this at all levels. This includes working together to protect and support those young people being harmed and abused, identifying the locations used to carry out this abuse, disrupting the activity and work together to pursue and prosecute the perpetrators who carry this out.

In Worcestershire there is a clear multi agency strategy and action plan - [WSCP Child Exploitation Strategy 2020 - 2022](#)

This GET SAFE procedure does not replace the Child protection procedures, these should be followed where appropriate to safeguard and protect children and young people. The GET SAFE procedure is a process in which we identify risk and vulnerability and take multi-agency action to address this in a well-planned and coordinated way at the earliest opportunity for children and young people.

For further information about GET SAFE, go to the website below

<https://www.safeguardingworcestershire.org.uk/wscb/professionals/cse/>



Child Criminal Exploitation

- It can include vehicle crime and threatening/committing serious violence
- Children may become trapped as they or their families may be threatened with violence and they may be coerced or entrapped into debt or into carrying weapons. They may carry weapons as a form of protection
- Children involved in criminal exploitation need to be treated as victims themselves (particularly older children), even though they may commit crimes themselves
- You should be aware that girls are at risk of criminal exploitation too, even though their experience may be different

Serious violence

The Serious Violence Strategy, introduced by the government in 2018, identifies offences such as homicides and knife and gun crime as key factors which account for around one per cent of all recorded crime and the impact these crimes have on communities.

As in all areas of safeguarding children, the centre will work with the WSCP to help reduce the incidents of serious violence.

All staff should be aware of indicators which may signal that children are at risk from, or are involved with, serious violent crime. These may include:

- increased absence from sessions, activities arranged with the Transition Coordinator
- a change in friendships or relationships with older individuals or groups
- a significant decline in performance
- signs of self-harm or a significant change in wellbeing
- signs of assault or unexplained injuries
- unexplained gifts or new possessions

Early intervention is about recognising and responding to the indicators of potential vulnerability, providing early support that is effective. When a young student begins to show the signs of exploitation or vulnerability to exploitation, and therefore are at increased risk from serious violence, we should be able to intervene as early as possible to help reduce the risk factors and increase the protective factors.

Child Abduction and Community Safety

Child abduction is when children are taken from their parents or carers without permission. It can be committed by parents or other family members, by people known but not related to the child (like neighbours, friends and acquaintances), and by strangers.

Community safety incidents are things like unknown adults trying to talk to young people.

Always follow visit risk assessments and ensure young people are aware of the risks and that getting home procedures are followed.

Recognising signs of child abuse

Categories of Abuse

- Physical Abuse
- Emotional Abuse (including Domestic Abuse)
- Sexual Abuse
- Neglect

Signs of Abuse in Children

The following non-specific signs may indicate something is wrong:

- Significant change in behaviour
- Extreme anger or sadness



- Aggressive and attention-seeking behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour

N.B. Please refer to further detail on signs of abuse given below.

Risk Indicators

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:

- Must be regarded as indicators of the possibility of significant harm
- Justifies the need for careful assessment and discussion with the DSL (or in the absence of that individuals, an experienced colleague)
- May require consultation with and/or referral to Children's Services

The absence of such indicators does not mean that abuse or neglect has not occurred. In an abusive relationship the student may:

- Appear frightened of the parent/s
- Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and different ethnic groups)

The parent or carer may:

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
- Be absent or misusing substances
- Persistently refuse to allow access on home visits
- Be involved in domestic abuse

Staff should be aware of the potential risk to students when individuals, previously known or suspected to have abused children, move into the household.

Recognising Physical Abuse

The following are often regarded as indicators of concern:

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents/carers are uninterested or undisturbed by an accident or injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a "cry for help" and if ignored could lead to a more serious injury)
- Family use of different doctors and A&E departments
- Reluctance to give information or mention previous injuries

Bruising

Children can have accidental bruising, but the following must be considered as non accidental unless there is evidence or an adequate explanation provided:

- Any bruising to a pre-crawling or pre-walking baby



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- Bruising in or around the mouth, particularly in small babies which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks on small children
- Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child. A medical opinion should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion.

Any burn with a clear outline may be suspicious e.g.

- Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
- Linear burns from hot metal rods or electrical fire elements
- Burns of uniform depth over a large area
- Scalds that have a line indicating immersion or poured liquid (a child getting into hot water on his/her own accord will struggle to get out and cause splash marks)
- Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation
- Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. Non-mobile children rarely sustain fractures.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent with the fracture type
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- There is an unexplained fracture in the first year of life

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.

Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather



than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse. The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- Aggressive behaviour towards others
- Scape-goated within the family
- Frozen watchfulness, particularly in pre-centre children
- Low self-esteem and lack of confidence
- Withdrawn or seen as a “loner” – difficulty relating to others

Recognising Sexual Abuse

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child/family. Recognition can be difficult, unless the child discloses and is believed.

There may be no physical signs and indications are likely to be emotional/behavioural. Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct
- Sexually explicit behaviour, play or conversation, inappropriate to the child’s age
- Continual, inappropriate or excessive masturbation
- Self-harm (including eating disorder), self-mutilation and suicide attempts
- Involvement in prostitution or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

Some physical indicators associated with this form of abuse are:

- Pain or itching of genital area
- Blood on underclothes
- Pregnancy in a younger girl where the identity of the father is not disclosed
- Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Sexual Abuse by Young People

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around behaviour of the young person(s) concerned. This includes children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children.

Developmental Sexual Activity encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent. Inappropriate Sexual Behaviour can be inappropriate



socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is “acting out” which may derive from other sexual situations to which the child or young person has been exposed.

If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some students, educational inputs may be enough to address the behaviour.

Abusive sexual activity includes any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base.

With any situation involving potential abuse by a student the DSL will always seek guidance on the matter from the Senior Adviser for Safeguarding Children in Education or the Worcestershire Children’s Social Care Services Front Door. The DSL will also follow the guidance in the Inter Agency section of the WSCB website, in particular section 6.15 ‘sexually active young people’ and section 4.3 ‘Children who abuse others’.

Assessment

In order to more fully determine the nature of the incident the following factors should be given consideration.

The presence of exploitation in terms of:

- Equality – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies
- Consent – agreement including all the following:
 - Understanding that is proposed based on age, maturity, development level, functioning and experience
 - Knowledge of society’s standards for what is being proposed
 - Awareness of potential consequences and alternatives
 - Assumption that agreements or disagreements will be respected equally o Voluntary decision - Mental competence
- Coercion – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide.

Assessments of student’s safety will include the wider picture, i.e. the social context in which the young person operates outside of the centre.

Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

- Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care

- A student seen to be listless, apathetic and unresponsive with no apparent medical cause
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Student thrives away from home environment
- Student frequently absent from centre
- Student left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods

Child Sexual Exploitation

Child sexual exploitation is a form of child sexual abuse. It includes both physical contact and non-contact activities. Some children may not realise they have been exploited, eg they may believe that they are in a romantic relationship. The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones/sim cards and worrying about losing contact via mobile
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs) ●
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern
- moving around the country, appearing in new towns/cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people / anti-social groups / with other vulnerable peers
- associating with other young people involved in sexual exploitation ●
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with centre, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual) ●
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders ●
- drug or alcohol misuse
- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.

The DSL is responsible for implementing local guidance in respect of child sexual exploitation as given on the Worcestershire Safeguarding Children Partnership (WSCP)



website:

www.safeguardingworcestershireshire.org.uk

The DSL must ensure that all staff are aware of signs and symptoms of CSE and know that these must be reported and recorded as child protection concerns. In particular, be aware of local sites which attract young people in the evenings/night time, and that will subsequently attract predators, eg Victoria (Vicky) Park, Priory Park and Duke's Meadow in Malvern, The Hive and Cripplegate in Worcester. The DSL must follow the Worcestershire Pathway for dealing with issues of CSE, including completion of the screening tool.

Effects of domestic abuse on children and young people

The impact of domestic abuse on the quality of a child's or young person's life is very significant. Children and young people who live with domestic abuse are at increased risk of behavioural problems, emotional trauma, and mental health difficulties in adult life. The impact of domestic abuse on children and young people can be wide-ranging and may include effects in any or all of the following areas:

Physical: Children and young people can be hurt either by trying to intervene and stopping the violence or by being injured themselves by the abuser. They may develop self-harming behaviour, or eating disorders. Their health could be affected, as they may not be being cared for appropriately. They may have suicidal thoughts or try to escape or blank out the abuse by using drugs, alcohol or by running away.

Sexual: There is a high risk that children and young people will be abused themselves where there is domestic abuse. In homes where living in fear is the norm, and situations are not discussed, an atmosphere of secrecy develops and this creates a climate in which sexual abuse could occur. In addition to this, children and young people may sometimes be forced to watch the sexual abuse of their mother/carer. This can have long-lasting effects on the sexual and emotional development of the child/young person.

Economic: The parent or carer of the child or young person may have limited control over the family finances. Therefore, there might be little or no money available for extracurricular activities, clothing or even food, impacting on their health and development.

Emotional: Children and young people will often be very confused about their feelings – for example, loving both parents/carers but not wanting the abuse to continue. They may be given negative messages about their own worth, which may lead to them developing low self-esteem. Many children and young people feel guilty, believing that the abuse is their fault. They are often pessimistic about their basic needs being met and can develop suicidal thoughts. Some children and young people may internalise feelings and appear passive and withdrawn or externalise their feelings in a disruptive manner.

Isolation: Children and young people may become withdrawn and isolated; they may not be allowed out to play; and if there is abuse in the home they are less likely to invite their friends round. Schooling may be disrupted in many ways, and this may contribute to their growing isolation. They may frequently be absent from the centre as they may be too scared to leave a parent/carer alone. They may have to move away from existing friends and family – e.g. into a refuge or other safe or temporary accommodation.

Threats: Children and young people are likely to have heard threats to harm their mother/father/carer. They may have been directly threatened with harm or heard threats



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to harm their pet. They also live under the constant and unpredictable threat of violence, resulting in feelings of intimidation, fear and vulnerability, which can lead to high anxiety, tension, confusion and stress. This clearly highlights that living with domestic abuse has a significant impact on a child's ability to achieve the five outcomes as outlined in the Every Child Matters agenda:

- be healthy;
- stay safe;
- enjoy and achieve;
- make a positive contribution;
- achieve economic well being.

What you might see in the student:

- Unexplained absences or lateness – either from staying at home to protect their parent/carer or hide their injuries, or because they are prevented from attending the centre;
- Students who are constantly tired, on edge and unable to concentrate through disturbed sleep or worrying about what is happening at home;
- Students displaying difficulties in their cognitive and centre performance;
- Students whose behaviour and personality changes dramatically;
- Students who become quiet and withdrawn and have difficulty in developing positive peer relations;
- Students displaying disruptive behaviour or acting out violent thoughts with little empathy for victims;
- Students who are no trouble at all.

This list is not exhaustive – this is intended to give you an idea of some of the types of behaviour that could be presented.

What the centre can do

The centre can create an environment which both promotes their belief and commitment that domestic abuse is not acceptable, and that they are willing to discuss and challenge it. For many victims, the centre might be the one place that they visit without their abuser. It would help if the centre displayed posters or had cards/pens available with information about domestic abuse and contact details for useful agencies, for example:

NSPCC Helpline 0808 800 5000

Police 101 (or 999 in an emergency)

Worcestershire Safeguarding Children Partnership (WSCP)

www.safeguardingworcestershire.org.uk

Worcestershire County Council Advice page

http://www.worcestershire.gov.uk/info/20379/domestic_abuse_and_sexual_violence

West Mercia Women's Aid <http://www.westmerciawomensaid.org/>

Research shows that the repeated use of physical, sexual, psychological and financial abuse is one of the ways in which male power is used to control women. The underlying attitudes which legitimise and perpetuate violence against women should be challenged by the centre as part of the whole centre ethos. The centre can support individual students by:

- having a whole-centre philosophy that domestic abuse is unacceptable;
- Responding to disclosures and potential child protection concerns; recognising that domestic abuse and forced marriage may be a child protection concern;
- Giving emotional support – the child or young person might need referral to a more



specialist service or need additional support to complete coursework, exams etc;

- Facilitating a peer support network – children and young people can become isolated but often welcome talking to friends about their problems;
- Offering practical support – if children or young people are new to the centre they may be unfamiliar with the syllabus, the area, etc;
- Providing somewhere safe and quiet to do their homework or just to sit and think;

Improving the self esteem and confidence of children and young people by:

- offering them opportunities to take on new roles and responsibilities;
- offering tasks which are achievable and giving praise and encouragement; ● monitoring their behaviour and setting clear limits;
- criticising the action, not the person;
- helping them to feel a sense of control in their centre lives;
- involving them in decision making;
- helping them to be more assertive;
- respecting them as individuals;
- encouraging involvement in extracurricular activities.

Advice the centre will follow on receiving notification of a Domestic Abuse incident

Background

- Log the information and keep the record alongside other information/concerns that the centre has on this student/family, with all other confidential safeguarding records in a secure place. This will allow the centre to recognise any pattern and/or frequency of notifications and take appropriate action. Please note that the centre may receive further communication about this same incident, once further assessment of the situation has been undertaken by Police – be careful not to log this as a separate incident.
- Inform any staff of notification on a ‘need to know’ only basis
- Alert all staff who teach the student with minimum of information – e.g. ‘This pupil/student may need extra support / may need extra time to complete homework’.
- Monitor pupil/student behaviour in centre (including attendance) and should concerns arise which may be attributed to the impact of the incident, consult with Social Care through the Children’s Services Front Door as the concerns may be significant and lead to new safeguarding action, or to seek advice on how to proceed.
- Provide appropriate support for the student, if required – do not question the student about the incident. Respect the student’s decision on whether or not they wish to discuss the situation.
- Provide appropriate support for the adult, if asked – e.g. Refuge runs the National Domestic Abuse helpline number, 24 hours (0808 2000 247) Refuge what is domestic violence/effects of domestic violence on children

Operation Encompass <https://www.operationencompass.org/>

Notification to centres re police attended incidents, and advice on how to support those children

OE Teachers’ National Helpline on 0204 513 9990.

FREE advice from an Education Psychologist about how best to support children experiencing DV.

Worcestershire County Council Advice page

http://www.worcestershire.gov.uk/info/20379/domestic_abuse_and_sexual_violence

Worcestershire Safeguarding Children Partnership (WSCP)



www.safeguardingworcestershire.org.uk

West Mercia Women's Aid <http://www.westmerciawomensaid.org/>

NSPCC- UK domestic-abuse Signs Symptoms Effects

SafeLives: young people and domestic abuse.

Bear in mind

- Victim of the incident may be anxious that the information will be shared inappropriately.
- Notification may not give details as to which parent is the perpetrator/victim - any disclosure to the 'wrong' parent could heighten risk.
- Need to be aware who is 'connected' to the student - e.g. a member of staff may be the student's relative / friend of the family.

Inappropriate sharing of information could heighten the risk for the victim and/or the child. If in doubt, consult with either the Children's Services Front Door (01905 768054) or Denise Hannibal-Education / Advisor Safeguarding (01905 844436) dhannibal@worcschidrenfirst.org.uk

So-called 'honour-based' abuse (HBA)

Whilst the centre's predominately white British pupil population makes culturally related abuses such as HBA, forced marriage, FGM and breast ironing low risk, it is essential that staff are fully aware of, and vigilant, with regards to these crimes.

So-called HBA encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators. All forms of HBA are abusive.

Concerns have been raised that breast ironing is to be found amongst African communities in the UK, with as many as 1000 girls at risk. Keeping Children Safe in Education (2020) mentions breast ironing on page 80 in the section on so-called 'Honour Abuse'.

Appendix 1 of this policy provides information and guidance on recognising and dealing with concerns about Forced Marriage, which is a form of Domestic Abuse.

Appendix 2 of this policy provides information and guidance on recognising and dealing with concerns about Female Genital Mutilation (FGM), which is a form of Human Rights Abuse.

Record Keeping

Any member of staff receiving a disclosure of abuse from a student or noticing signs or symptoms of possible abuse, should make notes as soon as possible (within the hour, if possible) writing down exactly what was said, using the student's own words as far as possible. The yellow 'Safeguarding Concerns Form' must be completed and handed to the DSL/dDSL in a sealed envelope, timed, dated and signed, with names printed alongside the signature. The DSL/dDSL will act IMMEDIATELY to take appropriate action.

All records of a child protection nature should be passed to the DSL including case conference minutes and written records of any concerns.



Child protection records are kept securely in a locked cabinet and transferred in a safe and timely manner when a child moves to a different provision.

All Causes for concerns/ Incidents must be logged on a yellow form and passed to the DSL/dDSL as soon as possible. A bound book will be maintained of all concerns and actions, and forms will be filed in student Safeguarding files.

The DSL and dDSL will have weekly meetings to monitor the newly submitted cause for concern/incident forms and at this meeting will also review actions for any safeguarding referrals. Over time these records may lead to a safeguarding referral to be made.

DSL will maintain and regularly audit the centre's Safeguarding records and ensure that each stand-alone file includes a chronology of significant events.

Information Sharing & Confidentiality

We recognise that all matters relating to Child Protection are confidential.

The DSL will disclose any information about a student to other members of staff on a need to know basis only.

All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.

All staff must be aware that they cannot promise confidentiality to a student as this might compromise the student's safety or well-being.

Communication with Parents

We recognise that good communication with parents is crucial in order to safeguard and promote the welfare of children effectively.

We will always undertake appropriate discussion with parents prior to involvement of another agency unless to do so might place the child or an adult at further risk of harm or would impede a criminal investigation.

We will ensure that parents have an understanding of the responsibilities placed on the centre and staff to safeguard students and their duty to co-operate with other agencies in this respect.

Supporting Students

Students who are abused or witness violence may find it difficult to develop a sense of self worth. They may feel helplessness, humiliation and some sense of blame. The centre may be the only stable, secure and predictable element in the lives of students who have been abused or who are at risk of harm. We are aware that research shows that at the centre their behaviour may be challenging and defiant or they may be withdrawn.

The centre will endeavour to support all students by:

- Encouraging self-esteem and self-assertiveness through the curriculum specifically through sessions with Transition Coordinators, as well as promoting respectful relationships, challenging bullying and humiliating behaviour;
- The centre ethos which promotes a positive, supportive and secure environment giving students a sense of being valued;
- A consistently applied Behaviour Policy that is aimed at supporting vulnerable pupils



in the centre.

- The centre will ensure that the student knows that some behaviour is unacceptable but they are valued and not to be blamed for any abuse which has occurred;
- Liaison with other agencies that support the pupil such as Children's Services, Child and Adult Mental Health Services, education welfare service and educational psychology service and those agencies involved in the safeguarding of children;
- The use of Early Help Services, through the Early Help Hub, when appropriate;
- Notifying Children's Social Care Services immediately there is a significant concern.
- Providing continuing support to a student about whom there have been concerns who leaves the centre by ensuring that appropriate information is forwarded under confidential cover to the student's new setting.

Supporting Staff and Supervision of Staff

We recognise that staff working in the centre who have become involved with a student who has suffered harm, or appears to be likely to suffer harm, may find the situation stressful and upsetting. We will support such staff by providing an opportunity to talk through their anxieties with the DSL, and to seek further support such as counseling if appropriate. We will enable supervision for the DSL, primarily through support from the Director responsible for safeguarding.

In order to ensure that staff are competent, confident and safe to work with students, and to reduce the risk of allegations being made against staff, they will be made aware of safer working practice guidance and will be given opportunities to discuss and develop their understanding of what constitutes safe and unsafe behaviour.

Safer Recruitment and Selection of Staff

The centre has a written recruitment policy statement and procedures linking explicitly to this policy.

A statement of Bridge The Gap Malvern's commitment to Safeguarding is included in all job advertisements, publicity material, recruitment websites, and candidate information packs.

When considering the employment of overseas trained teachers, the centre will follow the guidance at the gov.uk website.

The recruitment process is robust in seeking to establish the commitment of candidates to support the centre's measures to safeguard children and to deter, identify and reject people who might pose a risk of harm to children or are otherwise unsuited to work with them.

All staff in regulated activity within our centre have been checked as to their suitability, including verification of their identity, right to work in the UK and qualifications, a satisfactory barred list check, a prohibition check and enhanced DBS check as well as further enquiries through search engines.

Bridge The Gap Malvern maintains a single central record of recruitment checks for audit purposes. This is checked and updated regularly. Any member of staff working in regulated activity will not be left unsupervised and will be subject to a risk assessment prior to verification by Bridge the Gap Malvern of their satisfactory DBS check.

Volunteers who are not working in regulated activity, will be supervised at all times.



Concerns and Allegations against staff

We acknowledge that a student may express a concern or an allegation against members of staff or volunteers. If such a concern or an allegation is made, which meets the criteria as identified in Part 4 of Keeping Children Safe in Education, the member of staff receiving the concern or allegation will immediately inform the DSL. If the DSL is not immediately available; the matter should be referred to Kath Barclay, BTGM Director. If a concern or an allegation is made against a DSL, the Directors should be informed immediately; All unnecessary delays to the process should be eradicated and the Local Authority Designated Officer (LADO) will be contacted within one working day of all concerns and allegations that come to the centre's attention or that are made directly to the police.

In all cases of a concern or allegation being made, and prior to undertaking any investigation, the centre will immediately contact the LADO to discuss the allegation, consider the nature, content and context of the concern or allegation and agree a course of action including any involvement of the Police. Discussions will be recorded in writing, and communication with both the individual and the parents of the student agreed. Due weight to the views of the LADO and the Policy will be taken when making a decision about suspension.

In borderline cases informal discussions with the LADO may take place without naming the individual.

Where any member of staff or volunteer is considered unsuitable to work with students, the centre will cease to use that person's services.

Ceasing to use a person's services includes: dismissal, non-renewal of a fixed term contract, no longer engaging/refusing to engage a supply teacher provided by an employment agency, terminating the placement of a student teacher or other trainee, no longer using staff employed by contractors, no longer using volunteers, resignation and voluntary withdrawal from supply teaching, contract working, a course of initial teacher training, or volunteering. Reports will include as much evidence about the circumstances of the case as possible. Compromise Agreements or Settlement Agreements cannot apply in this connection, or where the individual refuses to cooperate with an investigation.

The following organisations will be informed when the centre ceases to use a person's services due to concerns over the safety of students and vulnerable adults.

- The Disclosure and Barring Service
- The Charity Commission
- The National College for Teaching and Leadership (NCTL) Teaching Regulatory Authority (TRA)

We will make every effort to maintain confidentiality and guard against unwanted publicity. In the event of an allegation made against a member of staff, the centre is aware of its legal obligations to do its utmost to protect the anonymity of the member of staff during the investigative stage. This legislation is to protect staff in the event that an allegation is found to be unfounded or malicious.

Staff Concerns

The centre has a Whistleblowing Policy that staff should refer to. We recognise that students cannot be expected to raise concerns in an environment where staff fail to do so. Thus, all staff should be aware of their duty to raise concerns about the attitude or actions of others.



Any member of staff may make a referral to external agencies. Staff should report concerns about poor or unsafe practice and potential failures in the centre's safeguarding regime. Such concerns can be raised directly with the DSL / DDSL.

Staff concerns about the DSL should be immediately reported to the Directors.

Abuse by Students

Where there is reasonable cause to suspect a student is suffering, or likely to suffer significant harm by the actions of one or more pupils the matter will be investigated according to the procedure laid out in this Policy, including referral to local agencies.

Complaints or Concerns expressed by students, parents or staff

We recognise that listening to students is an important and essential part of safeguarding them against abuse and neglect. To this end any expression of dissatisfaction or disquiet in relation to an individual student will be listened to and acted upon in order to safeguard his/her welfare.

We will also seek to ensure that the student or adult who makes a complaint is informed not only about the action the centre will take but also be given an indication of the length of time that will be required to resolve the complaint. The centre will also endeavour to keep the student or adult regularly informed as to the progress of his/her complaint. The centre's Complaints Policy is readily available.

Prevention

We recognise that the centre plays a significant part in the prevention of harm to our students by providing them with good lines of communication with trusted adults, supportive friends and an ethos of protection. The centre will therefore:

- Establish and maintain an environment where students feel secure, are encouraged to talk, and are always listened to;
- Ensure students know that there are adults in the centre whom they can approach if they are worried or in difficulty;
- Include in the curriculum opportunities that equip children with the skills they need to recognise and stay safe from abuse.

Positive Physical Intervention

In light of the SEND and complex needs of the students placed with Bridge The Gap Malvern, physical intervention is avoided at all costs; the centre does not use Team Teach interventions. See the centre's De-escalation Procedure. The centre acknowledges that staff must only ever use physical intervention as a last resort, and that at all times it must be the minimal reasonable force necessary to prevent injury or damage to property (please refer to the 'Use Of Reasonable Force Advice for Headteachers, Staff & Governing Bodies, July 2013, <https://www.gov.uk/government/publications/use-of-reasonable-force-in-centres>). The term 'reasonable force' at the centre means no more force than is necessary. Individual student risk assessments will consider known triggers and strategies to avoid escalation, thus reducing the potential need for physical intervention from staff.

The centre understands that physical intervention of a nature that causes injury or distress to a child may be considered under safeguarding children or disciplinary procedures. A record of all incidents of physical intervention that occur in the centre will be maintained by the DSL.



Bridge The Gap Malvern recognises that touch may be appropriate in the context of working with students and all staff are clear about appropriate professional boundaries (see the Safe Touch Policy).

Abuse of Trust

We recognise that as adults working with vulnerable students we are in a relationship of trust with the students in our care and acknowledge that it could be considered a criminal offence to abuse that trust.

We acknowledge that the principle of equality embedded in the legislation of the Sexual Offenders Act 2003 applies irrespective of sexual orientation.

We recognise that the legislation is intended to protect young people in education who are over the age of consent but under 18 years of age.

Children Missing Education (CME)

We recognise that a child going missing from education is a potential indicator of abuse or neglect. Our procedures for dealing with children that go missing from education are based on the LA and LSCB procedures.

We will ensure that we follow these procedures for dealing with students that go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of their going missing in future.

We will ensure that we report students missing education to the LA CME officer, in line with statutory requirements.

Also refer to the [Child Missing Education Policy](#).

Radicalisation and Extremism

We encourage students to respect the fundamental British values of democracy, the rule of law, individual liberty and mutual respect, and tolerance of those with different faiths and beliefs. We ensure that partisan political views are not promoted in the teaching of any subject in the centre and where political issues are brought to the attention of the pupils, reasonably practicable steps have been taken to offer a balanced presentation of opposing views to students.

We value freedom of speech and the expression of beliefs/ideology as fundamental rights underpinning our society's values. Both students and staff have the right to speak freely and voice their opinions. However, freedom comes with responsibility and free speech that is designed to manipulate the vulnerable or that leads to violence and harm of others goes against the moral principles in which freedom of speech is valued. Free speech is not an unqualified privilege; it is subject to laws and policies governing equality, human rights, community safety and community cohesion. We seek to ensure our students are aware of the dangers of radicalisation and we work to build their resilience to such dangers through the Equality and Diversity programme, assemblies and our PSHE programme.

We seek to protect students against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements. The Staff Code of Conduct Policy provides for monitoring the



appropriateness of visiting speakers and states that visiting speakers must not have unsupervised contact with any students.

Appendix 3 of this Policy provides information and guidance on recognising indicators of vulnerability of radicalisation. If a member of staff has concerns about a student being at risk of radicalisation or concerns that that are being or have been subjected to radicalisation ideology they should immediately raise the matter with the DSL who will decide whether or not a referral should be made, will act on the concern and share information with appropriate external agencies as required. However, the centre recognises that anybody can make a referral. Please note that information and emergency advice can be obtained from the Department of Education helpline telephone 0202 73407264 or via the Police by telephoning 101. Alternatively, the authorities can be contacted via counter.extremism@education.gsi.gov.uk

Racist Incidents

Repeated racist incidents (or a single serious incident) may lead to consideration under Safeguarding procedures. A log of all racist incidents will be maintained.

Bullying and Child on Child Abuse

To allow or condone bullying may lead to consideration under child protection procedures. All incidences of bullying, including racist, homophobic and gender related bullying, cyber bullying via social media eg, sexting and up skirting, will be dealt with in accordance with the centre's [Anti-Bullying policy](#). We recognise that students with SEND are more susceptible to being bullied. A log of bullying incidents will be maintained.

E-safety

The centre recognises that Internet safety is a whole centre responsibility, involving staff, students and parents. New staff will receive online safety training as part of their induction and all staff sign yearly the agreement to E-safety. Students may expose themselves to danger, whether knowingly or unknowingly, when using the Internet and other technologies.

Additionally, some students may find themselves involved in activities which are inappropriate or possibly illegal. The centre therefore recognises its responsibility to educate its students, teaching them the appropriate behaviours and critical thinking skills to enable them to remain both safe and legal when using the Internet and related technologies. These issues are addressed within individual sessions with Transition Coordinators. Guidance on teaching online safety can be found at

<https://www.gov.uk/government/publications/teaching-online-safety-in-centres>. National Crime Agency's CEOP education programme: Thinkuknow <https://www.thinkuknow.co.uk/>.

Parents will receive this information through regular updates and also be invited to attend talks on e-safety . We will ensure that appropriate filters are in place to prevent access to unsuitable sites and we will monitor the use of the centre network and internet to ensure that any student or staff member attempting to access inappropriate, abusive or harmful material is appropriately advised and/or supported. Guidance is available regarding, searching, screening and confiscation guidance for centres

<https://www.gov.uk/government/publications/searching-screening-and-confiscation>. The UK Council for Internet Safety (UKCIS) Education Group has published Advice for Schools and Colleges on Responding to Sexting Incident

<https://www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis>

The centre's safeguarding practice extends to ensure that students are kept safe working remotely from home on centre work and attending online conference calls with staff. Also



Refer to Bridge the Gap Malvern [E-Safety Policy](#) for keeping children safe online whilst attending the centre and [Remote Learning Policy](#). The E Safety policy will be reviewed by the centre and Directors.

Health and Safety

The centre's [Health and Safety Policy](#) reflects the consideration we give to the safeguarding of our students both within the centre environment and when away from centre, for example when undertaking centre activities and individual sessions with Transition Coordinators. Risk Assessments are undertaken and reviewed regularly, in respect of site security and risk to and from students displaying harmful behaviour.

Appendix 4 of this Policy provides information and guidance on Home School Safeguarding Guidance for Work Related Experience.

Photography and use of images

The welfare and protection of students is paramount and consideration should always be given to whether the use of photography will place children at risk. Images may be used to harm students for example as a preliminary to 'grooming' or by displaying them inappropriately on the Internet, particularly social networking sites.

Safe Environment

Bridge The Gap Malvern undertakes appropriate risk assessments and checks in respect of all equipment and of the building and grounds. The centre has adequate security arrangements in place in respect of the use of its grounds and buildings by visitors both in and out of centre hours. Visitors to the centre will be appropriately checked and vetted, to ensure they are not linked to extremist groups or promoting extremist or other harmful material.

Referrals

Although it is expected that the majority of referrals will be made by the DSL, any member of staff may make a referral to an external agency. As stated in the section on Thresholds, if, at any time, a student is thought to have suffered serious harm or is thought to be at risk from suffering serious harm then this should be reported to Children's Social Care immediately.

Challenge and Escalation

We recognise that professional disagreements may arise between any agencies and resolving problems is an integral part of co-operation and joint working to safeguard children. As part of our responsibility for safeguarding children, we acknowledge that we must be prepared to challenge each other if we feel that responses to concerns, assessments or the way in which plans are implemented are not safeguarding the child and promoting their welfare.

We are aware of the Worcestershire Safeguarding Children Partnership (WSCP) escalation procedures for raising concerns in respect of poor practice and our responsibility to utilise these as and when necessary, in the interests of safeguarding and promoting the welfare of children.

Monitoring and Evaluation

Our Safeguarding Children policy and procedures will be monitored and evaluated by:

- The DSL and all staff
- Scrutiny of data and risk assessments;
- Scrutiny of the centre's single central record of recruitment checks. The centre's



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single central record of recruitment checks is available to the Director

- Monitoring of logs of bullying/racist/behaviour incident records;
- Providing the Director with regular updates as required.

Review

This Policy will be reviewed annually. If there has been a substantiated allegation against a member of staff, the centre will work with the LADO to review the policy and procedures or practice.

INTERNAL CONTACTS

Kath Barclay, DSL
Caroline Hallam, DDSL

EXTERNAL CONTACTS

Worcestershire Children First

Professional number – 01905 768054
Public number – 0845 846000 (option 2)
By e-mail – childrensteam@worcschildrenfirst.org.uk
Out of Hours Emergency Duty Team – 01905 768020

Adult Safeguarding Contacts

Worcestershire Adult Safeguarding Team
Advice – 01905 843189
Referral – 01905768053

Channel/Prevent contacts

Local Authority James Wheeliker (jwheeliker@worcestershire.gov.uk) West Mercia
Police DS Phil Colley 01386 591835 / 07736 084701 DC Gary Shephard 01386 591816 / 07772 904013
T/DC Jemma Greenhow 01386 591825 / 07890 746662
prevent@warwickshireandwestmercia.pnn.police.uk

Police

Police Public Protection Unit - 24hrs non-emergency 101
Emergency 999

For concerns regarding radicalisation

Department of Education helpline 0202 73407264
Police 101
E-Mail counter.extremism@education.gsi.gov.uk

Advice

Denise Hannibal- Education Advisor Safeguarding, 01905 844436
Hayley Doyle-Area Safeguarding Lead, 01905 845230
John Hancock – LADO 01905 752800 NSPCC Helpline 0808 800 5000
Worcestershire Safeguarding Children Partnership (WSCP)
www.safeguardingworcestershire.org.uk



Appendix 1

Forced Marriage

Forced Marriage – A Form of Honour Based Abuse and Domestic Abuse

Forced Marriage should be recognised as a human rights abuse – and should always invoke child protection procedures within the centre.

A forced marriage is a marriage conducted without the full consent of both parties, and one where duress is a factor. A forced marriage is not the same as an arranged marriage – in an arranged marriage the families take a leading role in choosing the marriage partner. The marriage is entered into freely by both people.

Warning signs

Warning signs can include a sudden drop in performance, truancy from lessons and conflicts with parents over continuation of the student's education.

There may be excessive parental restrictions and control, a history of domestic abuse within the family, or extended absence through sickness or overseas commitments. Students may also show signs of depression or self-harming, and there may be a history of older siblings leaving education early to get married.

The justifications

Most cases of forced marriage in the UK involve South Asian families. This is partially a reflection of the fact that there is a large established South Asian population in the UK. It is clear, however, that forced marriage is not a solely South Asian phenomenon – there have been cases involving families from East Asia, the Middle East, Europe and Africa.

Some forced marriages take place in the UK with no overseas element, while others involve a partner coming from overseas, or a British citizen being sent abroad. Parents who force their children to marry often justify it as protecting them, building stronger families and preserving cultural or religious traditions. They may not see it as wrong.

Forced marriage can never be justified on religious grounds: every major faith condemns it and freely given consent is a pre-requisite of Christian, Jewish, Hindu, Muslim and Sikh marriage.

Culture

Often parents believe that they are upholding the cultural traditions of their home countries, when in fact practices and values there have changed. Some parents come under significant pressure from their extended families to get their children married.

The law

Although there is no specific criminal offence of 'forcing someone to marry' within England and Wales, forced marriage may involve criminal offences. Perpetrators – usually parents

or family members – could be prosecuted for offences including: threatening behaviour, assault, kidnap, abduction, imprisonment and in the worse cases murder.

Sexual intercourse without consent is rape, regardless of whether this occurs within the confines of a marriage. A girl who is forced into marriage is likely to be raped and may be raped until she becomes pregnant.

In addition, the Forced Marriage (Civil Protection) Act (2007) makes provision for protecting children, young people and adults from being forced into marriage without their full and free consent through Forced Marriage Protection Orders. Breaching a Forced Marriage Protection Order is a criminal offence.

The Anti-Social Behaviour, Crime and Policing Act 2014 makes it a criminal offence, with effect from 16 June 2014, to force someone to marry. This includes:

- Taking someone overseas to force them to marry (whether or not the marriage takes place);
- Marrying someone who lacks the mental capacity to consent to the marriage (whether they're pressured into it or not).

What to do if a student seeks help

- The student should be seen immediately in a private place, where the conversation cannot be overheard.
- The student should be seen on her own, even if she attends with others. · Develop a safety plan in case the student is seen i.e. prepare another reason why you are meeting.
- Guidance from the Forced Marriage Unit details that Forced Marriage issues must be treated automatically as a safeguarding procedure.
- Explain all options to the student and recognise and respect her wishes. If the student does not want to be referred to Children's Services, you will need to consider whether to respect the student's wishes – or whether the student's safety requires further action to be taken. If you take action against the student's wishes you must inform the student.
- Establish whether there is a family history of forced marriage – i.e. siblings forced to marry. Advise the student not to travel overseas and discuss the difficulties she may face.
- Seek advice from the Forced Marriage Unit.
- Liaise with Police and Children's Services to establish if any incidents concerning the family have been reported.
- Refer to the local Police Child Protection Unit if there is any suspicion that there has been a crime or that one may be committed.
- Refer the student with her consent to the appropriate local and national support groups, and counselling services.

What to do if the student is going abroad imminently

The Forced Marriage Unit advises education professionals to gather the following information if at all possible – it will help the unit to locate the student and to repatriate her:

- a photocopy of the student's passport for retention – encourage her to keep details of her passport number and the place and date of issue
 - as much information as possible about the family (this may need to be gathered discreetly)
- full name and date of birth of student under threat



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- pupil's father's name
- any addresses where the student may be staying overseas
- potential spouse's name
- date of the proposed wedding
- the name of the potential spouse's father if known
- addresses of the extended family in the UK and overseas

Specific information

It is also useful to take information that only the student would know, as this may be helpful during any interview at an embassy or British High Commission — in case another person of the same age is produced pretending to be the student. Professionals should also take details of any travel plans and people likely to accompany the student. Note also the names and addresses of any close relatives remaining in the UK and a safe means to contact the student — a secret mobile telephone, for example, that will function abroad.

Forced marriage: what educators should NOT do

- treat such allegations merely as domestic issues and send the student back to the family home
- ignore what the student has told you or dismiss the need for immediate protection
- approach the student's family or those with influence within the community, without the express consent of the student, as this will alert them to your concern and may place the student in danger
- contact the family in advance of any enquiries by the Police, Children's Services or the Forced Marriage Unit, either by telephone or letter
- share information outside child protection information sharing protocols without the express consent of the student
- breach confidentiality except where necessary in order to ensure the student's safety ● attempt to be a mediator

Further guidance is available from:

The Forced Marriage Unit: Tel: (+44) (0)20 7008 0151 between 9.00 a.m. and 5.00 p.m.
Monday to Friday

Emergency Duty Officer (out of hours): (+44) (0)20 7008 1500 E-mail: fmufco.gov.uk

Website: www.fco.gov.uk/forcedmarriage

FMU publication: 'Multi-Agency Practice Guidelines: Handling Cases of Forced Marriage' June 09

See also:

'The Right to Choose - Multi-Agency Guidance in relation to Forced Marriage' Government Office - November 2008

Interagency Guidance on Forced Marriage on the WSCB website. Ref: WSCB local procedures 'Forced Marriage'

Worcestershire's Forced Marriage, Honour-Based Violence and Female Genital Mutilation Protocol - April 2014.



Appendix 2

Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM) – a form of Honour Based Abuse and a Human Rights Abuse

What is FGM?

FGM includes procedures that intentionally alter or injure the female genital organs for non-medical reasons. There are four known types of FGM, all of which have been found in the UK:

Type 1 – clitoridectomy: partial or total removal of the clitoris and, in very rare cases, only the prepuce (the fold of skin surrounding the clitoris)

Type 2 – excision: partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are the ‘lips’ that surround the vagina)

Type 3 – infibulation: narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, or outer, labia, with or without removal of the clitoris

Type 4 – other: all other harmful procedures to the female genitalia for non-medical purposes, e.g., pricking, piercing, incising, scraping and cauterising the genital area.

FGM is sometimes known as ‘female genital cutting’ or female circumcision. Communities tend to use local names for this practice, including ‘sunna’.

Why is FGM carried out?

It is believed that:

- It brings status and respect to the girl and that it gives a girl social acceptance, especially for marriage.
- It preserves a girl’s virginity/chastity.
- It is part of being a woman as a rite of passage.
- It upholds the family honour.
- It cleanses and purifies the girl.
- It gives the girl and her family a sense of belonging to the community.
- It fulfils a religious requirement believed to exist.
- It perpetuates a custom/tradition.
- It helps girls and women to be clean and hygienic.
- It is cosmetically desirable.
- It is mistakenly believed to make childbirth safer for the infant.

Religion is sometimes given as a justification for FGM. For example, some people from Muslim communities argue that the Sunna (traditions or practices undertaken or approved by the prophet Mohammed) recommends that women undergo FGM, and some women have been told that having FGM will make them ‘a better Muslim’. However, senior Muslim clerics at an international conference on FGM in Egypt in 2006 pronounced that FGM is not Islamic, and the London Central Mosque has spoken out against FGM on the grounds that it constitutes doing harm to oneself or to others, which is forbidden by Islam.



Within which communities is FGM known to be practised?

According to the Home Office it is estimated that up to 24,000 girls under the age of 15 are at risk of FGM. UK communities that are most at risk of FGM include Kenyan, Somali, Sudanese, Sierra Leone, Egyptian, Nigerian and Eritrean, as well as non-African communities including Yemeni, Afghani, Kurdish, Indonesian and Pakistani. Obviously, this not to say that all families from the communities listed above practise FGM, and many parents will refuse to have their daughters subjected to this procedure. However, in some communities a great deal of pressure can be put on parents to follow what is seen as a cultural or religious practice.

Is FGM harmful?

FGM is extremely harmful and is often described as brutal because of the way it is carried out, and its short and long term effects on physical and psychological health.

FGM is carried out on children between the ages of 0 and 15, depending on the community in which they live. It is often carried out without any form of sedation and without sterile conditions. The girl or young woman is held down while the procedure of cutting takes place and survivors describe extreme pain, fear and feelings of abandonment.

Where the vagina is cut and then sewn up, only a very small opening may be left. This is often seen as a way to ensure that when the girl enters marriage, she is a virgin. In some communities the mother of the future husband and the girl's own mother will take the girl to be cut open before the wedding night.

Repeat urinary tract infections are a common problem for women who have undergone FGM, and for some, infections come from menstruation being restricted. Many women have problems during pregnancy and childbirth. The removal of the clitoris denies women physical pleasure during sexual activity and some groups will practise complete removal to ensure chastity.

Is it illegal?

FGM is internationally recognised as a violation of the human rights of girls and women, and is illegal in most countries - including the UK. The Female Genital Mutilation Act 2003 came into force in 2004: The act makes it illegal to:

- practise FGM in the UK
- take girls who are British nationals or permanent residents of the UK abroad for FGM, whether or not it is lawful in that country
- aid and abet, counsel or procure the carrying out of FGM abroad. The offence carries a penalty of up to 14 years in prison, and/or a fine.

Signs, symptoms and indicators

The following list of possible signs and indicators are not diagnostic, but are offered as a guide as to what kind of things should alert professionals to the possibility of FGM.

Things that may point to FGM happening:

- a child talking about getting ready for a special ceremony
- a family arranging a long break abroad
- a child's family being from one of the 'at-risk' communities for FGM (see above)
- knowledge that an older sibling has undergone FGM
- a young person talks of going abroad to be 'cut', or get ready for marriage.

Things that may indicate a child has undergone FGM:

- prolonged absence from centre or other activities
- behaviour change on return from a holiday abroad, such as the child being withdrawn and appearing subdued
- bladder or menstrual problems
- finding it difficult to sit still, and looking uncomfortable
- complaining about pain between their legs
- mentioning something somebody did to them that they are not allowed to talk about
- secretive behaviour, including isolating themselves from the group · reluctance to take part in physical activity
- repeated urinary tract infection
- disclosure.

What should BTGM do?

Where BTGM has a concern about a student, they should contact Children's Social Care Services. If the concerns are based on more concrete indicators – i.e., the young person says this is going to happen to them, or disclosure that it has happened to them or to an older sister – centres should make a child protection referral.

BTGM should NOT:

- contact the parents before seeking advice from children's social care;
- make any attempt to mediate between the child/young person and parents.

It is important to keep in mind that the parents may not see FGM as a form of abuse; however, they may be under a great deal of pressure from their community and or family to subject their daughters to it. Some parents from identified communities may seek advice and support as to how to resist and prevent FGM for their daughters, and education about the harmful effects of FGM may help to make parents feel stronger in resisting the pressure of others in the community. Remember that religious teaching does not support FGM.

The 'one chance' rule

In the same way that we talk about the 'one chance rule' in respect of young people coming forward with fears that they may be forced into marriage, young people disclosing fears that they are going to be sent abroad for FGM are taking the 'one chance', of seeking help.

It is essential that we take such concerns seriously and act without delay. Never underestimate the determination of parents who have decided that it is right for their daughter to undergo FGM. Attempts to mediate may place the child/young person at greater risk, and the family may feel so threatened at the news of their child's disclosure that they bring forward their plans or take action to silence her.

Mandatory Reporting Duty

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) will place a statutory duty upon teachers, along with social workers and healthcare professionals, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils, but the same definition of what is meant by "to discover that an act of FGM appears to have been carried out" is used for all professionals to whom this mandatory reporting duty applies.



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Staff must report to the police cases where they discover that an act of FGM appears to have been carried out (this can be done by telephoning 101). Unless the teacher has a good reason not to, they should still consider and discuss any such case with the centre's designated safeguarding lead and involve children's social care as appropriate.



Appendix 3

Radicalisation

Indicators of Vulnerability to Radicalisation

1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.

Terrorism as defined in the Terrorism Act 2000 (TACT 2000) is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

2. Extremism is defined by the Government in the Prevent Strategy as: Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

3. Extremism is defined by the Crown Prosecution Service as: The demonstration of unacceptable behaviour by using any means or medium to express views which: · Encourage, justify or glorify terrorist violence in furtherance of particular beliefs; · Seek to provoke others to terrorist acts;

- Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
- Foster hatred which might lead to inter-community violence in the UK.

4. There is no such thing as a “typical extremist”. Those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.

5. Students may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that centre staff are able to recognise those vulnerabilities.

6. Indicators of vulnerability include:

Identity Crisis – the student is distanced from their cultural / religious heritage and experiences discomfort about their place in society;

Personal Crisis – the student may be experiencing family tensions; a sense of isolation; and low self esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;



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Personal Circumstances – migration; local community tensions; and events affecting the student’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;

Unmet Aspirations – the student may have perceptions of injustice; a feeling of failure; rejection of civic life; Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;

Special Educational Need – students may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

7. However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.

8. More critical risk factors could include:

- Being in contact with extremist recruiters;
- Accessing violent extremist websites, especially those with a social networking element;
- Possessing or accessing violent extremist literature;
- Using extremist narratives and a global ideology to explain personal disadvantage;
- Justifying the use of violence to solve societal issues;
- Joining or seeking to join extremist organisations;
- Significant changes to appearance and / or behaviour;
- Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.

Also refer to the [Prevent Strategy Policy](#)



Appendix 4

Home School Safeguarding Guidance for Work Related Experience

1. What are your responsibilities?

All providers have a duty of care for young people under their supervision, but the home centre retains the primary and overarching responsibility for its learners in any educational setting. This remains the case with any provision set up for a young person by an off-site learning provider, e.g. a work placement as part of collaborative provision. It is therefore vital that programmes and providers are chosen with care and in line with the county Provider Quality Standard Agreement, that learners and their parent/carer are properly and effectively advised, and that all those involved in providing for the learner have all the information they need to take proper and effective care.

2. What should the home centre do?

a) Ensure that the centre has a safeguarding policy in place which reflects the requirements of the national guidance for 'Working Together to Safeguard Children' (2015), Keeping Children Safe in Education (September 2020) the local authority produced 'Model Safeguarding Children Policy', and taking into account the additional needs of 14-19 off-site learners.

b) Ensure the relevant Service Level Agreement (SLA) is agreed and signed by both the Learning Provider and the Home School.

c) Provide Information, Advice and Guidance.

During the referral/recruitment process, it is the home centre's responsibility to ensure that both learner and parent/carer understands safeguarding issues surrounding the off-site provision, i.e. transport arrangements, undertaking learning in a different environment, learning alongside young people from other centres, different levels of supervision, working with teachers unknown to the young person. The home centre is responsible for making the judgement that a young person is able to cope with this kind of provision.

d) Satisfy itself that the provision is safe and appropriate for the learner, and that it complies with the local authority's Provider Quality Standard Agreement. This will remain the case if a learning provider proposes arranging a third party placement for a young person.

e) Provide relevant information to the learning provider according to agreed consortium processes. In order for the home centre to exercise its responsibility for its learners, it is vital that all relevant information pertaining to the learner is forwarded to the learning provider before the start of the provision, and in a way that is easily understood, e.g. jargon and acronym free. Information to be shared would include:

- All relevant personal information, e.g. contact details, date of birth etc



- All relevant learning information, e.g. target grades, SEND Codes of Practice, SEND assessments, barriers to learning etc
- All relevant medical information
- Flagging of the existence of relevant safeguarding/child protection issues. It will then be the responsibility of the home centre's Designated Safeguarding Lead (DSL) to contact the learning provider's designated Child Protection Officer. Information will only be shared where it is deemed relevant and pertinent to the off-site provision.
- All relevant behavioural issues (via a Behavioural Risk Assessment, if agreed within the consortium)
- All relevant contact information, including at least two emergency contact numbers
- Ensure all relevant permissions are obtained from parent/carer, and copies shared with the learning provider
- Ensure learner contract is signed, outlining the young person's responsibilities

f) Update to the learning provider any of the above information if a learner's situation changes. The home centre's DSL will again be responsible for making a judgement as to whether it is appropriate/relevant to share changes to safeguarding/child protection information with the learning provider.

g) Ensure there is a named person in the home centre, who is appropriately trained and competent to deal with learners' problems arising from off-site provision, and that all learners have contact details for that person.

h) Ensure that the young person understands the detail of the transport plan

i) Risk assesses the Learner Transport Plan against the individual learner's need and the off-site provision arrangements, and takes steps to provide support as appropriate.

3. What should you do if a learner makes a disclosure to the learning provider at the learning provider's premises (this could also include a third party, e.g. an employer during a work placement)?

Ensure that learning providers have contact details for your Designated Safeguarding Lead (DSL), and those of the member of staff who will act in his/her absence. If you are able, please provide an out of hours contact number.

Act on information according to the local authority's Safeguarding Children Guidance. It is vital that, once a concern has been referred to the home centre, all parties are clear as to who is taking responsibility for progression of the issue. In the majority of cases, the home centre will be responsible for following the national 'Keeping Children Safe in Education' guidance (September 2020), with regard to the Worcestershire Children's Services HR leaflet for Managing Allegations and dealing with disclosures.

If the disclosure has been referred by the learning provider directly to the Children's Social Care Services Front Door, for example, if the disclosure was made out of normal centre hours, the home centre will follow the bulleted guidance above, once contact with the Children's Services Front Door has been made.

4. What do you do if your learner makes an allegation against a member of your staff to the learning provider at the learning provider's premises?

Ensure the learning provider has the relevant home centre contact details for dealing with concerns or allegations. This will usually be the DSL. The Front Door number will also be



provided in case the DSL or the designated deputy within the home centre is not available. Using the information above, and following the 'Keeping Children Safe in Education' national guidance for managing concerns or allegations, the learning provider will refer the issue to the Director of BTGM who will follow the agreed national process.

5. What do you do if your learner makes an allegation to you against the learning provider?

You should not attempt to investigate the allegation yourself

Inform the DSL / DDSL, in his/her absence, Director of BTGM.

The DSL / DDSL must inform the learning provider's most senior member of staff, or if the allegation relates to them, the Directors.

The learning provider will follow the 'Keeping Children Safe in Education' nationally published procedures. NB: If you are unsure about what to do in any situation relating to a safeguarding issue, immediately contact the Children's Services Front Door for advice on 01905 768054. Please refer to the national guidance for 'Working Together to Safeguard Children', and the links to safer working practices that can be accessed via the

Worcestershire Safeguarding Children Partnership (WSCP) website at

www.safeguardingworcestershire.org.uk. It is expected that all partners will comply with these guidelines, and will have signed up to the local authority's Provider Quality Standard Agreement.



Appendix 5

Safeguarding and Protecting Vulnerable Adults

This document supplements Bridge the Gap Malvern's Safeguarding Policy.

Definition of a vulnerable adult

A person, 18 years or over, who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

Definition of mental capacity

A person's ability to make their own choices and decisions. Under UK law, someone's **capacity** is judged according to the specific decision to be made, so a person may have sufficient **capacity** to make simple decisions but not more complicated ones. In England and Wales the Mental Capacity Act says that a person lacks capacity to make a decision if they have an 'impairment of or disturbance in the function of their mind or brain' (either temporary or permanent), and as a result they cannot do **one or more** of the following:

- Understand the information relating to this particular decision (including its benefits and risks)
- Retain the information for long enough to make this decision
- Weigh up the information involved in making this decision
- Communicate their decision in any way.

The Mental Capacity Act 2005 is underpinned by five key principles

1. A presumption of capacity – every adult has the right to make their own decisions and must be assumed to have capacity unless it is proved otherwise.
2. Individuals have the right to make their own decisions – adults must be given all appropriate help before anyone can conclude that they cannot make their own decisions.
3. Individuals have the right to make eccentric or unwise decisions – this does not mean they lack capacity.
4. Best interests – anything done for or on behalf of people lacking capacity must be done in their best interest.
5. Least restrictive intervention – anything done for or on behalf of people without capacity should be the least restrictive of their basic human rights and freedom.

You need to assess if the impairment or disturbance means that the person is unable to make a specific decision when they need to and this can only apply if all practical and appropriate support to help the person make the decision has failed. A person is only deemed unable to make a decision if they cannot :



understand information about the decision to be made;
retain that information in their mind;
use or weigh that information as part of the decision making process; or
communicate their decision (by talking, using sign language or any other means.)

The requirement for a mental capacity assessment should be agreed as part of a strategy meeting and undertaken by health or social care staff.

The difference between adult and child abuse

The primary difference in addressing adult and child abuse relates to the adult's right to self-determination. Adults may choose not to act at all to protect themselves and only in extreme circumstances will the law intervene. This is not the case for children because they are minors under the Children Act 1980 and this legislation can be used quickly and effectively to ensure protection from abuse once it has been recognised. In cases of suspected adult abuse it is important to recognise that assertive persuasion to encourage the individual to report or take action against an abuser or abusive situation may have negative outcomes for the vulnerable adult and could be detrimental to their wellbeing by causing them further harm. Therefore, the protection of vulnerable adults from abuse is a more complex process than child protection and requires policy and procedures that reflect this. Policy users need to develop an understanding that protecting vulnerable adults necessitates a more supportive and advisory approach in response to reporting abuse, than in child protection situations where the legal framework is clear and definitive and requires stipulated responses. In serious situations the child can be removed from the abusive environment, for vulnerable adults it is not always possible or appropriate to achieve this level of safety. Each vulnerable adult is a unique individual with varying degrees of need and ability. Some people will have a combination of physical and learning disability, others may have one or the other; some may have mental health needs and a combination of other complex disabilities such as Epilepsy, Diabetes, Down Syndrome, visual or hearing impairment.

Additional forms of abuse which vulnerable adults may be subject to include:

Financial Abuse

Financial Abuse is defined as "the unauthorised and improper use of funds, property or any resources belonging to an individual".

Those who financially abuse may be people who hold a position of trust, power, and authority or have the confidence of the Adult at Risk.

Examples of Financial Abuse

- Misuse and/or misappropriation of monies, benefits and/or property;
- Forcing changes to a will or testament;
- Preventing access to money, property, possessions or inheritance.

Signs and Symptoms of Financial Abuse:

- Unexplained sudden inability to pay bills or maintain lifestyle;
- Unusual or inappropriate bank account activity;
- Lasting Power of Attorney or Enduring Power of Attorney obtained when Adult at Risk is unable to comprehend and give consent;
- Withholding of money;
- Recent change of deeds or title of property;



- Unusual interest shown by family or others in the Adult at Risk's assets;
- Person managing financial affairs is evasive or uncooperative.

Discriminatory Abuse

Discriminatory Abuse links into all other forms of abuse.

Discriminatory Abuse exists when values, beliefs or culture result in a misuse of power that denies mainstream opportunities to some groups or individuals.

It is the exploitation of a person's vulnerability, resulting in repeated or pervasive treatment of an individual, which excludes them from opportunities in society, for example, education, health, justice, civic status and protection. It includes where a person or group is treated less favourably than any other person or group based on their colour, sex, age, disability, sexual orientation, religion, status, etc

Examples of Discriminatory Abuse

- Unequal treatment;
- Verbal abuse;
- Inappropriate use of language;
- Slurs;
- Harassment;
- Deliberate exclusion.

Signs and Symptoms of Discriminatory Abuse:

- Lack of respect shown to an individual;
- Signs of a sub-standard service offered to an individual;
- Repeated exclusion from rights afforded to citizens such as health, education, employment, criminal justice and civic status;
- Failure to follow the agreed care plans can result in the Adult at Risk being placed at risk.

Organisational Abuse

Repeated instances of poor care may be an indication of more serious problems. Organisational abuse is abuse that arises from an unsatisfactory regime. It occurs when the routines, systems and norms of an institution override the needs of those it is there to support. Such regimes compel individuals to sacrifice their own preferred lifestyle and cultural diversity in favour of the interests of those there to support them, and others. This can be the product of both ineffectual and punitive management styles, creating a climate within which abuse of Adults at Risk, intentional or otherwise, is perpetrated by individual staff and others. There is a lack of good leadership within the institution and members of staff are not equipped to carry out the care required.

Managers and staff of such services have a responsibility to ensure that the operation of the service is focused on the needs of service users, not on those of the organisation. Managers will ensure they have mechanisms in place that both maintain and review the appropriateness, quality and impact of the service for which they are responsible. These mechanisms will always take into account the views of service users, their carers and relatives.



Examples of behaviour: Inflexible routines set around the needs of staff rather than individual service users, e.g. requiring everyone to eat together at specified times, bathing limited to times to suit staff, no doors on toilets. These can arise through lax, uninformed or punitive management regimes.

Signs and Symptoms of Organisational Abuse:

- Inappropriate or poor care;
- Misuse of medication;
- Inappropriate restraint Sensory deprivation, e.g. denial of use of spectacles or hearing aid;
- Lack of respect shown to the Adult at Risk;
- Denial of visitors or phone calls;
- Restricted access to toilet or bathing facilities;
- Restricted access to appropriate medical or social care;
- Failure to ensure appropriate privacy or personal dignity;
- Lack of flexibility and choice, e.g. mealtimes and bedtimes, choice of food;
- Lack of personal clothing or possessions;
- Lack of adequate procedures, e.g. for medication, financial management;
- Controlling relationships between staff and service users;
- Poor professional practice;
- Lack of staff training.

Indicators of Organisational Abuse

People who have contact with Adults at Risk should be aware of some signs, which **may** indicate abuse:

- Seeking shelter or protection;
- Unexplained reactions towards particular individuals;
- Unexplained reactions toward particular settings;
- Frequent or regular visits to the GP, or hospital casualty department or hospital admissions;
- Frequent or irrational refusal to accept investigations or treatments for routine difficulties;
- Unexplained change in material circumstances;
- Inconsistency of explanation or no explanation.

Where the following 'trigger' behaviours are apparent in a service user/patient, these **may** be additional indicators that abuse is occurring:

- Destruction of physical environment;
- Turning night into day/sleep disturbance;
- Chronic incontinence;
- Extreme physical and/or emotional dependence;
- Verbal abuse and aggression towards the carer;
- Changes in personality;
- Non-compliance with carer's wishes;
- Obsessive behaviour;
- Wandering/absconding;
- Self-harm.

Organisational factors that may contribute to abuse:

- Weak or oppressive management;
- Inadequate leadership;



- High staff turnover;
- Incidents seen in isolation;
- Inadequate staffing (numbers, competence);
- Inadequate staff supervision or support;
- Insufficient training;
- Rigid routines;
- Closed communication channels.

Neglect and acts of omission

The failure of any person, who has responsibility for the charge, care or custody of an adult at risk, to provide the amount and type of care that a reasonable person would be expected to provide. Neglect can be intentional or unintentional.

Examples of neglect and acts of omission:

- Failure to provide for medical, social or educational needs
- Withholding necessities such as food, drink and warmth,
- A lack of protection from hazards.

Self Neglect

Self-neglect covers a wide range of behaviour including neglect of one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

Impact and typical characteristics of self-neglect may be:

- Poor standards of personal care
- Evidence of urine or faeces from adult or animal in the home
- Evidence of significant hoarding
- Home filthy, verminous, not habitable
- Lacks mental capacity
- Evidence of physical, mental or learning disability or illness
- Refuses important health care
- Non co-operative with services
- Substance misuse- heavy use of drugs or alcohol or both
- No support from family or others- very isolated
- Victim of crime, anti-social behaviour or abuse
- Perpetrator of crime, anti-social behaviour
- Risk of fatality or serious harm
- Fire Risk
- Self- neglect has a serious impact on the safety of others

Many of these situations may be resolved by safeguarding enquiries. However Adult Protection procedures will have to be considered for cases where there is imminent/ high risk of fatality or harm or harm to others.

Modern slavery

The Modern Slavery Act 2015 applies to England and Wales, and includes two substantive offences – human trafficking, and slavery, servitude and forced or compulsory labour. Servitude, forced or compulsory labour and human trafficking are all forms of modern slavery. The following definitions have been sourced from the Modern Slavery Act 2015, Crown Prosecution Service (CPS) and the UK Human Trafficking Centre (UKHTC)

Slavery

Slavery is described as the status or condition of a person over whom any, or all, of the powers attaching the right of ownership are exercised. In essence, characteristics of



ownership and indoctrination need to be present for a state of slavery to exist.

Servitude

Servitude is linked to slavery, but is much broader than slavery. Servitude is a 'particularly serious form of denial of freedom'. It includes, in addition to the obligation to provide certain services to another, the obligation on the 'serf' to live on the other's property and the perceived impossibility of changing his or her status.

Forced or compulsory labour

Forced or compulsory labour is defined as being 'all work or service which is exacted from any person under the menace of any penalty and for which the said person has not offered himself voluntarily'. It may include recruitment by deception, coercion and/or abuse, exploitation at work, and coercion at destination.

Human trafficking

The arrangement of facilitation of the travel of another person, to exploit them. It is irrelevant whether the exploited person, adult or child, consents to the travel.

A person may arrange or facilitate the exploitation of another by recruiting them, transporting or transferring them, harbouring or receiving them, or transferring or exchanging control over them.

'Travel' means arriving in, or entering, any country; departing from any country; and travelling within any country.