



Covent Garden Dragon Hall Trust Safeguarding Policy

Version 11



This draft version (Version 11) replaces the previous version (Version 10)

Ver	Date Created	Approved by Trustees	Comments
1	30th Apr 09	Yes	None
2	15th Jan 11	Yes	Updated to reflect new templates and restructured to make more accessible.
3	4th Apr 12	Yes	Updated to reflect changes
4	28th Apr 14	Yes	Name change from "Member Protection Policy" to "Safeguarding Policy". Numerous other updates including reflecting the new London multi-agency policy and procedures to safeguard adults from abuse. Tightening of DBS check wording. Checks to be done within 30 days of confirmed involvement; and explicit exclusions for certain offence types
5	20th May 16	Yes	
6	3rd March 17	Yes	Added details on how we get media consent for young people and staff
7	10th April 18	Yes	Approved by Camden Safeguarding Children Board, logo added
8	12th April 19	Yes	Added details relating to SoapBox and work in Islington
9	1st October 19	Yes	Includes updated information from The London Child Protection Procedures (19th June 2019) and CGDHT's Privacy Policy
10	24th April 20	Yes	Includes Covid19 response
11	11thNov 21	Draft	Includes updated definitions and external communication guidance

1. Introduction

The purpose of this document is to outline Covent Garden Dragon Hall Trust's (CGDHT) Safeguarding policy and procedures for the protection of children, young people and vulnerable adults. The policy and procedures apply to all CGDHT staff, including paid staff, apprentices, trustees, volunteers, freelancers and consultants and all associated activities.

At CGDHT we believe that no children, young people or vulnerable adults should experience abuse of any kind. It is the duty of all our staff (see definitions below) to protect each person from abuse and to be alert to the possibility of abuse.

The policy recognises that the welfare and interests of children, young people and vulnerable adults are paramount in all circumstances. It aims to ensure that regardless of age, ability or disability, gender reassignment, race, religion or belief, sex or sexual orientation, socio-economic background, they should:

- have a positive and enjoyable experience of our programmes in a safe and person-centred environment;
- be protected from abuse and harm.

CGDHT acknowledges that some participants e.g. those with disabilities, those who are looked after by the local authority, those who English is not their first language or come from a challenging home environment, can be particularly vulnerable and we accept the responsibility to take reasonable and appropriate steps to ensure their welfare.

The policy and procedures are mandatory for everyone involved with CGDHT. Failure to comply with the policy and procedures will be addressed without delay and may ultimately result in dismissal/exclusion from the organisation and considered for disciplinary action.

CGDHT operates zero tolerance to abuse and has a duty to act/pass on any information that may be received (or gathered), where abuse is suspected of any child, young person, vulnerable adult, staff member, volunteer, apprentice or person they are made aware of. All staff must observe and comply with the policy and procedures at all times.

CGDHT aims to provide an environment where everyone can work safely, and children, young people and vulnerable adults can engage and enjoy programmes provided through the work of the Charity or in partnership with other agencies and/or community voluntary sector organisations.

This policy sets out CGDHT's role and responsibilities in relation to Safeguarding Children (up to 18 years) and Safeguarding Adults (18 years +). Although the procedures are entwined they are also different so the differences between the two need to be clear and are as set out further on in this policy.

The following policy and procedures have been adopted by the Trustees Board of CGDHT and have been set up:

- In relation to Safeguarding Children: the local, regional and national multi-agency procedures and protocols used by partner agencies. The primary guidance documents are 'Working Together to Safeguard Children' and 'London Child Protection Procedures'.

- In relation to Safeguarding Adults: Pan-London procedures with local arrangements.
- In relation to guidance document by The Charity Commission 'Safeguarding and protecting people for charities and trustees';

This policy and procedures will be reviewed annually and/or as required by any stipulation within The London Child Protection Procedures, or Social Care Institute for Excellence in relation to Safeguarding Adults and any local guidance.

2. The CGDHT Definitions

Member:	The children (under 18) and vulnerable adults (over 18) who use CGDHT facilities and participate in the activities, organised by CGDHT or in partnership with other organisations;
Staff:	Any volunteer, apprentice, freelancer, paid member of staff or trustee, (see below),
Paid Staff:	Member of staff who is paid for their work at CGDHT.
Volunteer:	Staff member who is unpaid for their work at CGDHT.
Apprentice:	Apprentices are aged 16 or over and combine working with studying to gain skills and knowledge in a specific job.
Freelancer:	Freelancer is self-employed or part of other companies but CGDHT is still responsible for their health and safety;
Trustee:	Member of the Board of Trustees who steers, directs and has responsibility for the charity.

Safeguarding and promoting the welfare of children is defined for the purposes of this policy as;

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

3. Designated person for safeguarding children and adults (DSL)

James Dellow, is the Designated Lead with responsibility for safeguarding children and adults (DSL), as appointed by the Trustee Board. Anyone who has concerns about a child or vulnerable adult should contact the DSL immediately. If the DSL is not available you should contact Nicole Furre, CGDHT Director, who is the nominated Deputy with designated responsibility for safeguarding children and adults or Nick Crivello, Deputy Centre Manager and Deputy DSL at SoapBox.

Contact details of DSL:	020 7404 7274, email: youth@dragonhall.org.uk
Contact details of CGDHT Director:	0756425087; director@dragonhall.org.uk
Contact details of Deputy DSL:	07714860479; nick@dragonhall.org.uk

The Designated Lead will:

- Liaise with local Safeguarding Children Boards, Social Services, Local Education Authorities and any other agencies identified;

- Be responsible for coordinating action within CGDHT on safeguarding issues;
- Ensure that all staff are familiar with this policy and procedures;
- Raise awareness about safeguarding children and adults and arrange training as appropriate.

4. Safeguarding Children vs. Safeguarding Vulnerable Adults

4.1 Safeguarding Children:

Safeguarding children relates to any child (under 18) who has suffered from, or may be at risk of abuse, be it:

1. Physical
2. Emotional
3. Sexual abuse, exploitation, harassment including online sexual abuse
4. Neglect
5. Abuse of Disabled Children
6. Bullying, online bullying or cyberbullying
7. Self-harming behaviour
8. Domestic abuse
9. Female Genital Mutilation
10. Forced Marriage
11. Extremism or Radicalisation
12. Trafficking and Exploitation

Definitions of these are detailed in Appendix 1.

The first indication of concern about a child's welfare is not necessarily the presence of an injury. Concerns may be aroused by:

- Bruises, bite marks, burns/scalds, scars or fractures on a child's body;
- Remarks made by the child, another child, a parent or another adult, including explicit language or actions;
- Observations of the child's behaviour or reactions;
- Unexplained changes in the child's behaviour, personality or appearance (significant loss of weight, being unkempt etc);
- Evidence of disturbance or explicit detail in child's play, drawing or writing;
- Neglect - where lack of due care for a child is creating significant risk to their health and well being.

4.2 Safeguarding Vulnerable Adults:

A vulnerable adult, or an adult at-risk, is any person who is aged 18 years or over and at-risk of abuse or neglect because of their needs for care and or support. Where someone is over 18, but still receiving children's services and a safeguarding issue is raised, the matter should be dealt with as a matter of course by the adult safeguarding team. A vulnerable adult, or an adult at-risk, might be faced with:

- A learning disability
- A physical disability
- Age or illness

These are the types of abuse that a vulnerable adult may be at risk of:

1. Physical
2. Emotional
3. Sexual abuse, exploitation, harassment including online abuse
4. Neglect and acts of omission
5. Self-neglect
6. Bullying, online bullying or cyberbullying
7. Self-harming behaviour
8. Domestic abuse
9. Female Genital Mutilation
10. Forced Marriage
11. Extremism and Radicalisation
12. Trafficking and Exploitation
13. Financial or material
14. Discriminatory
15. Organisational

Definitions of these are detailed in Appendix 2.

People who abuse:

- Often are well known to their victims but can be strangers; Anyone, in fact, who has contact with them;
- Might be a family member, relative, partner, friend or neighbour, associate, a paid or voluntary care worker, or a health or social care worker, other service user;
- Could be another vulnerable adult or service user;
- May not realise that they are abusing and can sometimes act out of character and abuse because of the stress of caring.

Abuse can take place in a wide range of settings such as:

- The vulnerable adults own home, family or a community
- Residential settings;
- A carer's home;
- A day centre;
- A care home;
- A hospital;
- The workplace;
- Educational institutions;
- Social/leisure environments.

4.2 Non-recent historic abuse:

Non-recent child abuse, sometimes called historical abuse, is when an adult was abused as a child or young person under the age of 18. Non-recent historic abuse refers to one of 3 situations:

1. An adult making an allegation of abuse when they were under 18 years of age, that occurred at least 1 year before it was reported.
1. A child making an allegation of abuse that occurred at least 1 year before it was reported.
1. Someone reports an allegation, on behalf of someone else, relating to an offence committed over a year ago. NSPCC (2018).

Such disclosures can occur after long periods of time as the complainant may now feel comfortable that they are no longer at risk, have the confidence to make an allegation that will be believed, become aware that there have been other reports, or feel they need closure to move on. Whatever the motive, and however long ago the allegation, action must be taken because:

1. The alleged may not have been an isolated incident.
1. It may be part of a wider abuse situation.
1. The person(s) may still be abusing individuals and/or working with children.
1. There may be ongoing legal action.

Should an allegation or disclosure be made it is important to record and report such information as you would if it were a current situation. This includes allegations about staff or volunteers that no longer works/volunteers at Future Youth Zone and incidents that involved young people that no longer attend Future Youth Zone.

5. Safeguarding Procedures

CGDHT adopts four safeguarding procedures as described below:

5.1 Safe Recruitment Procedures

CGDHT recruitment policy stipulates that all paid staff, volunteers and apprentices will have to complete an application form, detailing past work history and references. Individuals are then interviewed and two references are requested. Only on receipt of satisfactory references will the application be advanced to the Disclosure and Barring Service check (DBS).

CGDHT requires the DBS check known as 'Enhanced with lists check'. This means that the Disclosure may turn up any of the following findings:

- Unspent Convictions
- Spent Convictions
- Cautions, Reprimands and Warnings
- Local Police Intelligence
- Whether someone is on the DBS barred lists (children or adults).

All applicants will be assumed to be in the 'Child and Adult Workforce' and to be working with both adults and children in regulated activity. This will be the case even if an applicant is

expected to work only in adult groups, because CGDHT may require staff to occasionally fill in for shortages in a project involving children.

CGDHT uses Carecheck (<http://carecheck.co.uk>) to conduct its online DBS checks.

The Nominated Persons (who administer checks) are the DSL James Dellow and CGDHT Director - Nicole Furre. The DSL (or designee) will administer checks for Youth Work & Play staff/volunteers/apprentices whilst the Centre Director will administer checks for all other staff, volunteers and Trustees, as well as the DSL.

Applicants should have a DBS check within 30 days of confirmed involvement. Until the DBS checking process has been completed, the applicant should not be given any responsibilities relating to the children, young people or vulnerable adults accessing CGDHT services. Furthermore, they should not be left alone with a member of staff, volunteer or apprentice.

No person will be allowed to be involved with CGDHT if they:

- are listed on DBS barred lists;
- have a finding that informs of any potential risk towards a member or any other vulnerable people that CGDHT comes into contact with;
- fail to disclose a conviction that comes to light through the DBS check.

Under the Rehabilitation of Offenders Act 1974 and the Legal Aid, Sentencing and Punishment of Offenders Act 2012, CGDHT welcomes people who have previous cautions/convictions, so long as they have no bearing on the welfare of our members, staff, or any other vulnerable people that CGDHT comes into contact with; or which may harm the reputation of the organisation if they became public knowledge.

However, CGDHT cannot consider people who have convictions involving violence, domestic violence, harassment, sexual offences or offences against children. The nominated person(s) has signed a confidentiality agreement over the content of disclosures, but may have to consult with colleagues on a need-to-know basis if there is any doubt whether a finding should affect acceptance.

As all DBS checks are carried out electronically, there is no requirement for the DBS administrator to keep any information on the disclosures themselves. However, the Certificate Number and Date of Issue will be recorded in staff records to allow for proof of DBS checking and for the date of re-checks to be calculated.

In line with best practice, all CGDHT staff will be re-checked every three years. This means that no person with an active involvement with CGDHT will have a disclosure that is more than three years old.

5.2 Training and professional development:

All CGDHT staff (paid or unpaid) are required to attend safeguarding training. CGDHT will provide annual (or mid-segment, if necessary) training and development opportunities for all staff, or support them to attend training, either face-to-face or via e-learning systems.

CGDHT staff can access e-learning for safeguarding children and new volunteers will be encouraged to do so. Any paid staff, trainee, apprentice or unpaid member of staff

completing this e-learning has to forward their certificate of completion to the DSL who will keep a copy.

In the case of staff who work in statutory agencies or related charity agencies, such as local authority, NHS or NSPCC etc, and have to attend safeguarding training as part of their role, if they are unable to attend CGDHT training proof of attendance on training delivered by their employer will be accepted. Certificates of attendance will be given to the DSL who, along with the Centre Director, will take a position on whether the training is an acceptable alternative.

CGDHT will keep a database of staff training requirements, ensuring that all staff complete safeguarding training within six months of their start date and then on a yearly basis.

If changes in legislation are introduced during this period, and training is available to introduce staff with the latest developments, they will be signed up for training based on availability.

When the CGDHT related policies are reviewed and updated, staff/volunteers/apprentices will be required to attend internal training and meetings in relation to this.

5.3 Staff Conduct:

A complete code of conduct can be found in Appendix 3. Specifically however:

Contact with members outside club times:

Apart from regular provision, CGDHT may run extra activities for members (children, young people and adults) such as social activities, residential trips, off-site visits and holiday activities. These activities must be agreed in advance with the Youth & Community Manager and DSL.

Guidance on any other contact between the member and staff is contained in Appendix 4.

A staff member should not be left alone, in private, with a member under any circumstances.

A staff member should not give out their personal contact details to members or their families. Any contact needed should be directed through appropriate CGDHT contact details.

In relation to children (under 18), parental consent needs to be sought for all individual children and young people taking part in any on- or off-site activities/events/trips. A consent form is part of CGDHT's Membership Form which is completed by all new members of CGDHT.

As part of our established good practice, risk assessments are carried out for all on and off-site activities, with staff taking full responsibility for using measures to reduce risk for activities within CGDHT. A template for the Risk Assessment can be found in Appendix 10.

Contact with members for personal care:

CGDHT staff should not assist members with personal care needs such as toileting, dressing or administering medication unless agreed in advance with the Youth & Community Manager, Member and parents/carers (if appropriate).

In a case of an emergency, when a member needs assistance, two staff of the appropriate gender (where practicable) need to assist and the matter needs to be logged with the Youth & Community Manager. The Youth & Community Manager should then report back to the member's parent/carer/support worker (if appropriate) and log that they have passed the information on.

When accessing community activities, members that require extra guidance and supervision (as risk assessed) should have an allocated staff member as a one-to-one support. They will have the role of ensuring the member is safe and will receive support from the Youth & Community Manager in this role.

5.4. Incident/ Concern Reporting

All staff working for CGDHT must be aware that a member may be a victim of abuse.

Concern about a member must be discussed with the Designated Lead Person immediately so that, if necessary, a referral can be made without delay.

In urgent situations, referrals must not be delayed and if necessary the emergency services should be notified i.e. in the event of a crime being committed or concerns about a member's immediate safety.

Individual staff should not investigate concerns. This is the role of the statutory agencies. However, if a member does say something, it is vital to listen carefully, so that it can be reported accurately.

The details of what to do in such a circumstance is detailed in Appendices 5 and 6, Islington Children's Services: request for service form is included in Appendix 7 and CGDHT's Incident Form can be found in Appendix 8.

Contact details for external agencies that may need to be consulted can be found in Appendix 9.

Consent must be obtained for referrals/requests for services, for those under 18 years old or those above 18 years old that are not able to give consent, to proceed except in the following circumstances:

1. Where there are clear child protection concerns. It is good practice to inform the parents/carers that you will be making a referral unless to do so will place the child or adults at increased risk or compromise a criminal or safeguarding investigation. If this is the case then an immediate referral should be made without consent being obtained;

2. When the referrer has sought consent but the parent/carer has refused permission. In this instance, the referrer believes that by not sending the referral to Children's Services Contact Team, the identified concern(s) are likely to escalate and may place the child/ren at further risk of potential harm. Where referrers are unsure if their concern reaches the threshold for child protection, or unsure of a referral to Children's services, a discussion should take place with the DSL without providing the child/family details.

5.5 Confidentiality

Our members have the right to expect that all staff will deal sensitively and sympathetically with their situation. It is important that information remains confidential and that only those with a 'need to know' should be privy to it.

5.6 Consent for Young People and Vulnerable Adults and using images and videos

When a new member would like to start at CGDHT we hand out a membership form with our media consent form attached. We ask parents/carers to fill it out, sign it and finally get the young person to sign the form. This included details that allow us to use photos or videos on our website (Appendix 10).

The form also included external media outlets, even though most external organisations have their own consent forms for media. CGDHT wants to ensure young people and parents are safeguarded in this situation. In doing so, CGDHT's E-safety (Online and Social media Policy) has to be respected by all members of staff, volunteers, apprentices and our partners.

In relation to the GDPR, if an image can be used to identify a living individual, it constitutes personal data. This includes where individuals in an image are named, and also situations where names are not used but other contextual information would enable individuals to be identified.

This note therefore provides guidance on whether the following types of images are likely to be classed as personal data:

- Images of crowds where young people take part (during activities of CGDHT in another venue, trips and other activities)

There is no requirement to provide privacy information to all individuals in the image. However, individuals should still be informed that photographs or videos are being taken. As no personal data is being processed by CGDHT in this case, individuals cannot object to the use of their personal data. However, it is CGDHT policy to respect the preferences of individuals who request not to be recorded at larger events. This means that all CGDHT staff will need to consider taking reasonable steps to achieve this.

- Images of small groups

CGDHT will provide individuals with privacy information, making sure that they are aware that their images would be taken and the context in which those images would subsequently be used by CGDHT;

- Images of individuals

CGDHT will provide the individual with privacy information notice (and familiarise them with Privacy Policy of CGDHT), making sure that they are aware that their image would be taken and the context in which their image would subsequently be used by CGDHT.

CGDHT'S Supporting Policies and Procedures:

CGDHT aims to adopt the highest possible standards and take all reasonable steps in relation to the safety and welfare of children, young people, vulnerable adults or adults at-risk. This policy should be read in conjunction with the following policies and procedures:

- Health and Safety;
- Safer Recruitment;
- Equal Opportunities;
- Early Help;
- Complaints;
- Whistleblowing;
- Bullying and Harassment;
- Disciplinary;
- Grievance;
- E-safety and Social Media.

The following legislation is relevant to this policy:

- Health and Safety at Work Act 1974;
- The Police Act 1997;
- Protection of Children Act 1999;
- The Human Rights Act 1998;
- Sexual Offences Act 2003;
- The Children Act 2004;
- Safeguarding Vulnerable Groups Act 2006;
- Equality Act 2010;
- Rehabilitation of Offenders Act 1974 and the Legal Aid, Sentencing and Punishment of Offenders Act 2012;
- Protection of Freedoms Act 2012 - The Protection of Freedoms Act 2012 is of particular importance as all decisions made to bar individuals from working with children or adults are now made by the Disclosure and Barring Service (DBS) under this legislation;
- GDPR and data protection act 2018;
- Working Together to Safeguard Children 2018;
- London Child Protection Procedures;
- Office of the Public Guardian Safeguarding policy.

Appendix 1

Definitions of Child Abuse are taken from **Working Together to Safeguard Children 2018** alongside **The London Child Protection Procedures, considering latest updates published on 19th June 2019.**

Child abuse and neglect is a generic term encompassing all ill treatment of children including serious physical and sexual assaults as well as cases where the standard of care does not adequately support the child's health or development.

Children may be abused or neglected through the infliction of harm, or through the failure to act to prevent harm.

Abuse can occur in a family or an institutional or community setting. The perpetrator may or may not be known to the child.

Working Together to Safeguard Children 2018 and **The London Child Protection Procedures** sets out definitions and examples of the following broad categories of abuse:

- Physical
- Emotional
- Sexual abuse, exploitation, harassment including online sexual abuse
- Neglect
- Abuse of Disabled Children
- Bullying, including online bullying, online sexual bullying and cyberbullying
- Self-harming behaviour
- Female Genital Mutilation
- Forced Marriage
- Extremism or Radicalisation
- Trafficking

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

Abuse

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institution; or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child.

Physical harm may also be caused when a parent fabricates the symptoms of or deliberately induces illness in a child.

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent effects on the child's emotional development, and may involve:

- Conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person;
- Imposing age or developmentally inappropriate expectations on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction;
- Seeing or hearing the ill-treatment of another e.g. where there is domestic abuse;
- Serious bullying, causing children frequently to feel frightened or in danger;
- Exploiting and corrupting children.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Sexual abuse, exploitation, harassment including online sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect

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

failing to:

- a. Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- b. protect a child from physical and emotional harm or danger;
- c. Ensure adequate supervision (including the use of inadequate caregivers);
- d. Ensure access to appropriate medical care or treatment;

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

Included in the four categories of child abuse and neglect above, are a number of factors relating to the behaviour of the parents and carers which have significant impact on children such as domestic abuse. Children can be affected by seeing, hearing and living with domestic abuse as well as being caught up in any incidents directly, whether to protect someone or as a target. It should also be noted that the age group of 16 and 17 year olds have been found in recent studies to be increasingly affected by domestic abuse in their peer relationships.

The Home Office definition of Domestic violence and abuse was updated in May 2018 as:

“Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

Psychological;
Physical;
Sexual;
Financial;
Emotional.”

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

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

Abuse of Disabled Children

Disabled children are at increased risk of abuse and those with multiple disabilities are at even more significant risk both of abuse and neglect. Parents of disabled children may experience multiple stresses. This group of children may be particularly vulnerable to abuse for a number of reasons including:

- Having fewer social contacts than other children, young people or adult at risk;
- Receiving intimate personal care from a larger number of carers;
- Having an impaired capacity to understand what they are experiencing is abuse or to challenge the abuser;
- Having communication difficulties resulting in difficulties in telling people what is happening;
- Being reluctant to complain for fear of losing services;
- Being particularly vulnerable to bullying or intimidation;
- Being more vulnerable to abuse by peers than other children, young people or adults at risk.

Disability is defined as: A major physical impairment, severe illness and/or a moderate to severe learning difficulty; an ongoing high level of dependency on others for personal care and the meeting of other basic needs.

Bullying, online bullying or cyberbullying

Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (e.g. hitting, kicking, theft), verbal (e.g. racist or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from the activities and social acceptance of their peer group). There is increasing use of new technologies as a tool for bullying and such incidents should be taken seriously.

Online abuse: Online abuse is any type of abuse that happens on the web, whether through social networks, playing online games or using mobile phones. Children and young people

may experience cyberbullying, grooming, sexual abuse, sexual exploitation or emotional abuse. It can take place anywhere and anytime.

Online child sexual abuse: When sexual exploitation happens online, young people may be persuaded, or forced, to: send or post sexually explicit images of themselves, take part in sexual activities via a webcam or smartphone, have sexual conversations by text or online. Abusers may threaten to send images, video or copies of conversations to the young person's friends and family unless they take part in other sexual activity. Images or videos may continue to be shared long after the sexual abuse has stopped.

Online bullying or cyberbullying: Cyberbullying is an increasingly common form of bullying behaviour which happens on social networks, games, and mobile phones. Cyberbullying can include spreading rumours about someone, or posting nasty or embarrassing messages, images, or videos. Cyberbullying includes: sending threatening or abusive text messages, creating and sharing embarrassing images or videos, 'trolling' – sending menacing or upsetting messages on social networks, chat rooms or online games, excluding children from online games, activities or friendship groups, setting up hate sites or groups about a particular child, encouraging young people to self-harm.

Self-Harming Behaviour

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

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

Definitions from the Mental Health Foundation (2003) are:

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

Domestic Abuse

The definition of 'domestic violence and abuse' was updated by the Home Office in March 2013 to include the reality that many young people are experiencing domestic abuse and violence in relationships at a young age. They may therefore be Children in need or likely to suffer significant harm, the definition from the Home Office is as follows:

"Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence and abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender and sexuality. The abuse can encompass, but is not limited to:

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

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

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

Psychological / Emotional Abuse - intimidation and threats (e.g. about children or family pets), social isolation, verbal abuse, humiliation, constant criticism, enforced trivial routines, marked over intrusiveness;

Physical violence - slapping, pushing, kicking, stabbing, damage to property or items of sentimental value, attempted murder or murder;

Physical restriction of freedom - controlling who the mother or child/ren see or where they go, what they wear or do, stalking, imprisonment, forced marriage;

Sexual violence - any non-consensual sexual activity, including rape, sexual assault, coercive sexual activity or refusing safer sex; and

Financial abuse - stealing, depriving or taking control of money, running up debts, withholding benefits books or bank cards.

The issue of children living with domestic abuse is now recognised as a matter for concern in its own right by both government and key children's services agencies.

Female Genital Mutilation (FGM)

Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. It is important to note that the procedure has no health benefits.

FGM has been classified by the World Health Organisation (WHO) into four types:

Type 1 – Clitoridectomy: partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and, in very rare cases, only the prepuce (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; and

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 recognized internationally as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women.

Forced Marriage

A forced marriage is one that is conducted without the full consent of both parties and where duress is a factor. Forced marriage can amount to sexual and emotional abuse and put children, young people or adults at risk, susceptible to physical abuse. In circumstances where there are concerns that someone is at imminent risk of a forced marriage urgent referrals should be made to Children's Adults' Social Care. In the case of a child, young person or adult at risk, in danger of forced marriage it is likely that an initial discussion with

the parent, carer or other community member may significantly increase the level of risk to the person.

Although there is no specific criminal offence in England and Wales of 'forcing someone to marry', criminal offences may nevertheless be committed. Perpetrators - usually parents or family members - could be prosecuted for offences including threatening behaviour, assault, kidnap, abduction, theft (of passport), threats to kill, imprisonment and murder. Anyone threatened with forced marriage or forced to marry against their will can apply for a Forced Marriage Protection Order. Third parties, such as relatives, friends, voluntary workers and police officers, can also apply for a protection order with the leave of the court.

Extremism or Radicalisation

Children and young people can be radicalised in different ways:

They can be groomed either online or in person by people seeking to draw them into extremist activity. Older children or young people might be radicalised over the internet or through the influence of their peer network – in this instance, their parents might not know about this or feel powerless to stop their child's radicalisation;

They can be groomed by family members who hold harmful, extreme beliefs, including parents/carers and siblings who live with the child and/or person(s) who live outside the family home but have an influence over the child's life;

They can be exposed to violent, anti-social, extremist imagery, rhetoric and writings which can lead to the development of a distorted world view in which extremist ideology seems reasonable. In this way they are not being individually targeted but are the victims of propaganda which seeks to radicalise.

A common feature of radicalisation is that the child or young person does not recognise the exploitative nature of what is happening and does not see themselves as a victim of grooming or exploitation.

The harm children and young people can experience ranges from a child adopting or complying with extreme views which limits their social interaction and full engagement with their education, to young children being taken to war zones and older children being groomed for involvement in violence.

The government has defined extremism as:

Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs.

The grooming of children for the purposes of involvement in violent extremist activity is child abuse and professionals and volunteers working with children and young people should follow their agency, and local area policies and procedure for the safeguarding of children when they have concerns that a child or young person is at risk of, or is being, exploited in this way.

Trafficking and Exploitation

All children are rendered more vulnerable as a result of accompanied or unaccompanied migration; trafficked children are at increased risk of suffering Significant Harm. The two

most common terms for the illegal movement of people - 'trafficking' and 'smuggling', are very different. In human smuggling immigrants and asylum seekers pay people to help them enter the country illegally; after which there is no longer a relationship. Trafficked victims are coerced or deceived by the person arranging their relocation. On arrival in the country of destination the trafficked child or person is denied their human rights and is forced into exploitation by the trafficker or person into whose control they are delivered. Traffickers are known to recruit their victims using a variety of methods. Some children are subject to coercion, which could take the form of abduction or kidnapping. However, the majority of children are trapped by in subversive ways:

Children are promised education or respectable work - as in restaurants, domestic servants etc.;

Parents are persuaded that their children will have a better life elsewhere.

Many children travel on false documents and for those who do not, the traffickers usually throw away their identification papers.

Appendix 2

Types and definition of Abuse of Vulnerable adults are defined by the Office of Public Guardian. OPG works with other agencies to recognise and manage suspicions, allegations and findings of abuse of adults and children at risk. In addition, for some types of abuse common for both children and vulnerable adults **The London Child Protection Procedures** have been used.

Abuse

Abuse and neglect take many forms Abuse can lead to a violation of someone's human and civil rights by another person or persons. Abuse can be physical, financial, verbal or psychological. It can be the result of an act or a failure to act.

It can happen when an adult at risk is persuaded into a financial or sexual exchange they have not consented to, or can't consent to. Abuse can occur in any relationship and may result in significant harm or exploitation.

Some types of abuse are illegal, and in these cases adults who lack capacity are protected by law the same as everyone else. Sometimes, an urgent referral is made for the safety of the adult at risk and/or to preserve evidence.

Physical

This includes assault, hitting, slapping, pushing, giving the wrong (or no) medication, restraining someone or only letting them do certain things at certain times.

Emotional

This includes emotional abuse, threats of harm or abandonment, depriving someone of contact with someone else, humiliation, blaming, controlling, intimidation, putting pressure on someone to do something, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or support networks.

Sexual

This includes rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, taking sexual photographs, making someone look at pornography or watch sexual acts, sexual assault or sexual acts the adult didn't consent to or was pressured into consenting.

Neglect and acts of omission

This includes ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, or not giving someone what they need to help them live, such as medication, enough nutrition and heating.

Self-neglect

This covers a wide range of behaviour which shows that someone isn't caring for their own personal hygiene, health or surroundings. It includes behaviour such as hoarding.

Abuse can take many forms. It might not fit comfortably into any of these categories, or it might fit into more than one. Abuse can be carried out by one adult at risk towards another. This is still abuse and should be dealt with. The adult at risk who abuses may also be neglecting him/herself which could also be reason for a safeguarding referral.

Bullying, online bullying or cyberbullying

Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (e.g. hitting, kicking, theft), verbal (e.g. racist or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from the activities and social acceptance of their peer group). There is increasing use of new technologies as a tool for bullying and such incidents should be taken seriously.

Online abuse: Online abuse is any type of abuse that happens on the web, whether through social networks, playing online games or using mobile phones. Children and young people may experience cyberbullying, grooming, sexual abuse, sexual exploitation or emotional abuse. It can take place anywhere and anytime.

Online child sexual abuse: When sexual exploitation happens online, young people may be persuaded, or forced, to: send or post sexually explicit images of themselves, take part in sexual activities via a webcam or smartphone, have sexual conversations by text or online. Abusers may threaten to send images, video or copies of conversations to the young person's friends and family unless they take part in other sexual activity. Images or videos may continue to be shared long after the sexual abuse has stopped.

Online bullying or cyberbullying: Cyberbullying is an increasingly common form of bullying behaviour which happens on social networks, games, and mobile phones. Cyberbullying can include spreading rumours about someone, or posting nasty or embarrassing messages, images, or videos. Cyberbullying includes: sending threatening or abusive text messages, creating and sharing embarrassing images or videos, 'trolling' – sending menacing or upsetting messages on social networks, chat rooms or online games, excluding children from online games, activities or friendship groups, setting up hate sites or groups about a particular child, encouraging young people to self-harm.

Self-Harming Behaviour

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

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

Definitions from the Mental Health Foundation (2003) are:

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

Domestic Abuse

The definition of 'domestic violence and abuse' was updated by the Home Office in March 2013 to include the reality that many young people are experiencing domestic abuse and violence in relationships at a young age. They may therefore be Children in need or likely to suffer significant harm, the definition from the Home Office is as follows:

"Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence and abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender and sexuality. The abuse can encompass, but is not limited to:

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

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

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

Psychological / Emotional Abuse - intimidation and threats (e.g. about children or family pets), social isolation, verbal abuse, humiliation, constant criticism, enforced trivial routines, marked over intrusiveness;

Physical violence - slapping, pushing, kicking, stabbing, damage to property or items of sentimental value, attempted murder or murder;

Physical restriction of freedom - controlling who the mother or child/ren see or where they go, what they wear or do, stalking, imprisonment, forced marriage;

Sexual violence - any non-consensual sexual activity, including rape, sexual assault, coercive sexual activity or refusing safer sex; and

Financial abuse - stealing, depriving or taking control of money, running up debts, withholding benefits books or bank cards.

The issue of children living with domestic abuse is now recognised as a matter for concern in its own right by both government and key children's services agencies.

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Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. It is important to note that the procedure has no health benefits.

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excision of the labia majora (the labia are the 'lips' that surround the vagina);

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Although there is no specific criminal offence in England and Wales of 'forcing someone to marry', criminal offences may nevertheless be committed. Perpetrators - usually parents or family members - could be prosecuted for offences including threatening behaviour, assault, kidnap, abduction, theft (of passport), threats to kill, imprisonment and murder. Anyone threatened with forced marriage or forced to marry against their will can apply for a Forced Marriage Protection Order. Third parties, such as relatives, friends, voluntary workers and police officers, can also apply for a protection order with the leave of the court.

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They can be groomed by family members who hold harmful, extreme beliefs, including parents/carers and siblings who live with the child and/or person(s) who live outside the family home but have an influence over the child's life;

They can be exposed to violent, anti-social, extremist imagery, rhetoric and writings which can lead to the development of a distorted world view in which extremist ideology seems reasonable. In this way they are not being individually targeted but are the victims of propaganda which seeks to radicalise.

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The harm children and young people can experience ranges from a child adopting or complying with extreme views which limits their social interaction and full engagement with

their education, to young children being taken to war zones and older children being groomed for involvement in violence.

The government has defined extremism as:

Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist. (The overall UK strategy for Countering Terrorism, known as CONTEST is available at; www.gov.uk/government/publications/counter-terrorism-strategy-contest).

The grooming of children for the purposes of involvement in violent extremist activity is child abuse and professionals and volunteers working with children and young people should follow their agency, and local area policies and procedure for the safeguarding of children when they have concerns that a child or young person is at risk of, or is being, exploited in this way.

Trafficking and Exploitation

All children are rendered more vulnerable as a result of accompanied or unaccompanied migration; trafficked children are at increased risk of suffering Significant Harm. The two most common terms for the illegal movement of people - 'trafficking' and 'smuggling', are very different. In human smuggling immigrants and asylum seekers pay people to help them enter the country illegally; after which there is no longer a relationship. Trafficked victims are coerced or deceived by the person arranging their relocation. On arrival in the country of destination the trafficked child or person is denied their human rights and is forced into exploitation by the trafficker or person into whose control they are delivered. Traffickers are known to recruit their victims using a variety of methods. Some children are subject to coercion, which could take the form of abduction or kidnapping. However, the majority of children are trapped by in subversive ways:

Children are promised education or respectable work - as in restaurants, domestic servants etc.;

Parents are persuaded that their children will have a better life elsewhere.

Many children travel on false documents and for those who do not, the traffickers usually throw away their identification papers.

Financial or material

This includes theft, fraud, internet scamming, putting pressure on someone about their financial arrangements (including wills, property, inheritance or financial transactions) or the misuse or stealing of property, possessions or benefits. Modern slavery This covers slavery (including domestic slavery), human trafficking and forced labour. Traffickers and slave masters use whatever they can to pressurise, deceive and force individuals into a life of abuse and inhumane treatment. Discriminatory This includes types of harassment or insults because of someone's race, gender or gender identity, age, disability, sexual orientation or religion.

Discriminatory

This includes types of harassment or insults because of someone's race, gender or gender identity, age, disability, sexual orientation or religion.

Organisational

This includes neglect and poor care in an institution or care setting such as a hospital or care home, or if an organisation provides care in someone's home. The abuse can be a one-off incident or repeated, on-going ill treatment. The abuse can be through neglect or poor professional practice, which might be because of structure, policies, processes and practices within an organisation. Neglect and acts of omission This includes ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, or not giving someone what they need to help them live, such as medication, enough nutrition and heating.

Appendix 3

CGDHT Safeguarding Code of Conduct

All CGDHT members must be treated with equality, dignity and respect.

It is expected that any staff member, group or organisation working with children & vulnerable adults must carry out the following practices as a matter of high importance, both in centre based & off site activities:

Organisational Responsibilities:

1. All staff are to be given a copy of these guidelines and a copy of CGDHT Safeguarding Policy. Staff must also follow CGDHT Safer Recruitment Procedures and agree to have a DBS check carried out;

94748928. There should always be at least two adults supervising activities, who have been DBS checked or undergoing checks, no matter how small the group. If a member is to be interviewed alone there should be two adults present or door left open in view of another adult. Where possible the gender of the adults, in a working or supervisory position, should reflect that of the group worked with or interview to be carried out.

94752552. No person under the age of 16 years should be left in charge of any member of any age. Furthermore, no member or group of members should be left unattended at any time.

94751696. A register & record of attendance of members attending activities e.g. youth club, excursions etc. should be kept for each session. Also written consent should be sought for any on- or off-site activities. For any members under 18 years old or those above 18 years old that are not able to give consent, parental consent must be obtained.

94752336. Confidentiality about member's personal information must be practiced. Members and parents have a right to expect that staff will deal sensitively and sympathetically with their situation. It is important that information is only available to those who 'need to know' it. All staff must respect issues of confidentiality.

94752424. It is important to keep a check on visitors & guests whether their visit is by invitation or unsolicited. This will ensure the welfare of members is safeguarded at all times

94749096. **A First Aid Kit & staff trained in first aid** should be available at all times, with clear information as to how to access it and where to get help in case of emergency.

An **Accident Book** should be kept and any accidents should be recorded immediately in the book. Parents/carers are to be made aware of the accident at the end of the session, unless the accident requires earlier communication.

Written permission from the parents/carers is to be given to administer medication and the name of the medicine and the dosage is to be clearly written in a **Medication Book**. The person administering the medicine is to sign the Medication Book after each time medication is given.

94752512. All Health & Safety issues should be considered in the room(s) used. This includes all equipment and substances used and a separate risk assessment should be carried out for all activities and reviewed on a regular basis by appropriately trained staff.

94748672. Photography & videoing events or activities can only be carried out with the full consent of parents/guardians, or members over 18 if they have the capacity to consent. If publishing images on a web site or newsletter, names must be kept anonymous. Photo and video consent forms can be found in Appendix 10.

Staff Responsibilities:

94750032. Staff should promote activities that are fun, enjoyable and educational, ensuring fair play and challenge any bullying behaviour.

94750416. Any allegations or disclosure by a member must be treated seriously and dealt with in line with the CGDHT's Safeguarding Policy.

94749776. At no time should any staff member, who has not yet been DBS cleared, be left alone with or in charge of any members. Furthermore, all staff members should avoid being left alone with any child for any significant period and under no circumstances drive a member home alone.

94752720. All staff must not involve themselves in rough physical or sexually provocative games and are to avoid inappropriate or intrusive touching of any kind, and are to control and discipline without physical punishment.

100098128. All staff must not use any foul or abusive language and avoid making sexually suggestive comments to a member, even in fun.

100098256. The member should always be told why his/her behaviour is not acceptable and the reasons for applying a particular sanction. In the case of children under 18 and those without capacity to consent for themselves, you must ensure that parents/carers are fully informed and support whatever sanction is applied.

100098344. Parents/Carers should always be immediately informed if staff have had to do things of a personal nature for a member such as changing clothing.

100098384. The lead worker must be fully aware of fire safety and evacuation procedures in the event of an emergency and practice them at least once every six months (see fire safety procedures in Dragon Hall and any other buildings used).

100098432. Members' individual needs should always be considered when running events and activities, this includes the adapting of equipment and activities appropriate to their needs.

100098472. Under no circumstances should any member with prior arrangements for being collected by a parent/guardian, be left alone at the end of any session.

Additional Code of Conduct for Off Site & Residential Activities:

100098512. Planning for any off site activities should follow CGDHT's Off-Site guidelines.

100098560. Where residential events or courses are organised, males should never enter all female rooms or vice versa.

100098600. If members are to be taken on excursions, written permission should be obtained from the parents/guardian with parental responsibility for those under 18 or those over 18 without capacity to consent. This permission may be obtained for a given time e.g. a term.

100098640. Parents should always be informed if the member for whom they are responsible are to be transported in a car or other vehicle. Persons transporting children/young people on this basis need to be aware of insurance & license implications and make sure the correct level of cover is available for the vehicle being used. Drivers should also make sure that seat belts are used at all times.

100098688. There should always be a copy of all consent forms with information about next of kin of all children/ young people, and staff and volunteers; left with an identified emergency contact person from the organisation.

100098728. An information sheet detailing what to do in the event of an emergency should be provided for parents & members, for any significant off site activity.

Appendix 4

Safeguarding The Welfare Of Young People - External Communication

Overview

Work at CGDHT is underpinned by humanistic youth work, norms, values and practices, where every young person has the right to be included, have a voice and make decisions for themselves. And the primary duty for anyone delivering this work is to ensure that CGDHT is a safe, secure and welcoming environment for all young people.

This document is a living guide for all staff, volunteers and external third parties on the expectations that CGDHT has around external communication and/ or interaction which takes place with young people. For clarity, by external communication, we are referring to any form of contact between anyone working for, at or with CGDHT and young people.

It's Complicated

Before going on to outline these requirements, we acknowledge that this document is concerned with complicated and complex territory, with potential grey areas (although we hope to address those here). We understand that the expectations we are placing on all of you do create the possibility of extra work and also present challenges in meeting one of our key goals as youth workers, providing young people with access to connections that expand their networks, horizons and opportunities.

However, of significantly greater importance is the power that we all have over potentially vulnerable young people due to our roles and how we ensure that we do not take advantage or abuse that position. Our primary responsibility is to safeguard the welfare of those that we work with and, as such, there are professional boundaries that have to be adhered to.

We realise that for some, in particular those from external organisations and/ or those who are new to working with CGDHT, these conditions may appear draconian. We hope, however, that you will see that they are being put in place to ensure the safety of young people, staff and the charity.

Key communication requirements

This section contains guidance on four key areas of communication with young people:

1. <i>WhatsApp</i>	2. <i>Email</i>	3. <i>Phone calls</i>	4. <i>Zoom</i>
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1. WhatsApp - CGDHT does not use WhatsApp to communicate with young people. There are both practical and ethical reasons for this. No one has reason to be using a private, end-to-end encrypted messaging tool to engage young people. And, from an ethical standpoint, we have questions as to whether adults should be 'invading' a space used for young people to communicate with their peers.

We are aware that some of you have relationships with young people that predate your work with us, which complicates matters. If this applies to you, we are requiring that you get in touch with Nick and James so that we can have a case by case conversation.

But beyond these isolated situations, we are now stating that, if you have previously, you now cease using WhatsApp to engage with any young people from CGDHT .

If any young person tries to communicate with you via WhatsApp, do not reply to them directly. You will need to let DSL or Deputy DSL know this and then either call or email the young person to say that we don't use WhatsApp;

2. Email - if you do need to communicate with young people as part of your role, including if young people request your contact details, we are expecting you to primarily use email. This is the appropriate platform and has the added benefit of getting young people used to the professional communication tool they will need to use in their working lives.

And, to protect all parties, it is best practice to copy in DSL or Deputy DSL, depending on what the email concerns. Hopefully it will be self-evident who is the best person to include.

We realise that young people (and frequently adults) struggle with the concept of cc'ing people back into replies. It is your responsibility to include us back in, in the event of young people forgetting to do that themselves;

3. Phone Calls - if you need to call young people for any reason, you need to inform either the DSL or Deputy DSL prior to that call. You can use email, text, WhatsApp (yes we can still use it between professionals) or in person to communicate with us;
4. Zoom - over the last 18 months, we have all increasingly used Zoom etc to engage young people. Going forward, this is another preferred approach. However, any contact should take place through CGDHT's Zoom and should involve a minimum of 2 staff or volunteers - it is not appropriate nor necessary to engage young people through personal Zoom accounts. Finally, any staff member or volunteer who is using Zoom to meet with young people must notify either the DSL or Deputy DSL in advance.

Additional Expectations

Having addressed the above points, we now want to remind people of a few additional areas that relate to professional boundaries and best practice:

- no one should be arranging to meet a young person from CGDHT in their personal time without prior permission from the DSL or Deputy DSL;

- no one should be offering a young person from CGDHT a lift in their car etc without prior permission from the DSL or Deputy DSL;
- no young person from CGDHT should ever be invited back to your house;
- it is best practice to notify the DSL or Deputy DSL if you have unanticipated contact with young people in your private lives.

Your Signature

We require that everyone who works for, with or at CGDHT reads and signs this document - this applies to contracted staff, freelancers, volunteers or people on work placements.

CGDHT Representative _____ **Your Name**

Signature _____ **Signature**

Date _____ **Date**

Appendix 5

What to do if you suspect abuse?

All children, young people and vulnerable adults must be safeguarded from harm and exploitation whatever their:

- Race, religion, first language or ethnicity;
- Gender or sexuality;
- Age;
- Health, ill-health or disability;
- Location or placement (e.g. living alone in a hostel or residential unit, with their family or a foster family etc);
- Criminal or offensive behaviour;
- Wealth or lack of it; and
- Political or immigration status.

Concern may arise from observations of the child or adult, **or** as a result of something said by the child or adult **or** another child or an adult.

Do not delay:

1. Tell a designated person as soon as possible.

See emergency contact numbers attached to this policy. A flow chart of what to do and who to contact is explained further in a referral flow chart (Appendix 3).

100098944. **Make written notes as soon as you can.**

Write down your concerns and record the facts accurately on the 'Safeguarding Incident Form' (Appendix 4). Be clear and concise when you are expressing an opinion and what your opinion is based on. These notes must be given to the designated person immediately and will help to ensure accuracy in recalling events.

100098984. **Concern about what the child or adult or someone else says.**

1. **Listen** - Do not ask questions or interrogate.
2. **Remain calm** - If you are shocked, upset or angry the person will sense this and this may prevent them from talking further.
3. **Reassure** - The person has done nothing wrong - tell her / him it is alright to talk.
4. **Do not promise to keep it secret** - Tell the person that what they have said cannot be kept secret and that you will tell someone who can help.

100099624. **Remember**

If in doubt, consult with senior staff members or Designated Person. Do not ignore concerns, even if these are vague. **Your first responsibility is to the child or adult.**
You must refer, you must not investigate.

100099664. **Contact with the family**

Before speaking to the member's family, you should talk to the **Designated Person**, who may consult outside the bounds of CGDHT. In cases where a physical injury causes concern, it may be appropriate to discuss this with the parent or carer. If the explanation suggests the injury was non-accidental (or a failure to protect the person from harm), the parent or carer should be informed of the need to refer the matter to Social Services. In cases of possible neglect or emotional abuse, the concern is likely to have built up over a period of time. There may have been a discussion with the family about sources of help (e.g. Social Services, NSPCC), but if concerns persist, there must be an immediate referral to the appropriate Social Services team. Where there are suspicions of sexual abuse, the Designated Person will seek immediate advice from the Social Services Department before discussing the matter with the family. Contact details can be found in Appendix 8.

100099752. Concern about a member of staff

Allegations or concerns about a member of staff or volunteer must immediately be referred to a statutory agency. In such a situation, CGDHT's Complaints Policy should be followed. You can find flowchart for referral in appendix 5.

100099792. Requests for assistance by other agencies.

CGDHT should assist local authority Social Services or the Police when they are making enquiries about the welfare of children. Information about a child must therefore be shared on a 'need to know' basis.

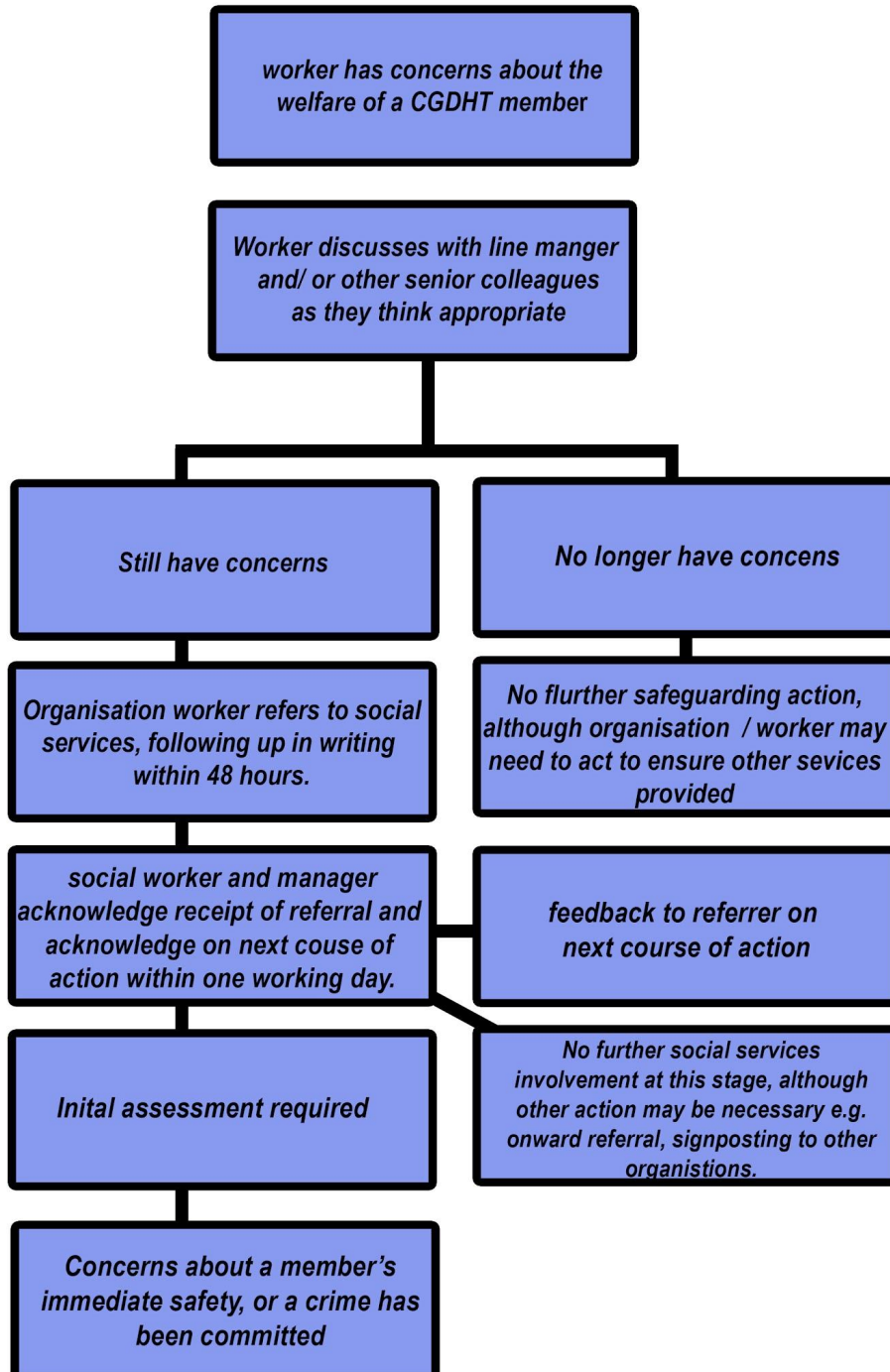
When such requests are received by telephone, **always** maintain security by checking the telephone listing before calling back. Always advise the Designated Safeguarding Lead of this contact.

If the child or adult is in danger or are in need of emergency medical treatment please dial 999.

Appendix 6

What to do - flowchart for referral.

What to do if you are worried a CGDHT member is being abused?



What if there are concerns or allegations about CGDHT staff/ volunteer/ apprentice/ consultant or Trustee?

You are concerned that the behaviour of a member of staff of other person is threatening, or potentially threatening, the well-being of a child, young person or adult at risk.

Report your concerns immediately to your line manager, Director or Safeguarding Officer. where appropriate, relevant HR procedures may be initiated and may result in formal disciplinary action being taken and/or a referral made to an external agency.

In all situations, you must provide an outline of your concerns in writing, If the matter is referred to external authorities, you may be asked to provide a formal statement of your concerns for subsequent extrnal investigations.

NB: If you have immediate concerns that a child or adult at risk is at risk of significant harm, contact your line manager. If you think a criminal offence has been committed contact the Police and the Designated Safeguarding Lead.

Islington Children's Services: request for service form



Islington Children's Services: request for service form
Email this form securely to: csctreferrals@islington.gov.uk, or via GCSX:
CSCT@islington.gcsx.gov.uk;
or DisabledChildren.Team@islington.gov.uk

PART A: CONSENT

Consent must be obtained for referrals/requests for services to proceed except in the following circumstances:

1. Where there are clear child protection concerns. It is good practice to inform the parents/carer that you will be making a referral UNLESS to do so will place the child or adults at increased risk or compromise a criminal or safeguarding investigation. If this is the case then an immediate referral should be made without consent being obtained.
2. When the referrer has sought consent but the parent/carer has refused permission. In this instance, the referrer believes that by not sending the referral to Children's Services Contact Team, the identified concern(s) are likely to escalate and may place the child/ren at further risk of potential harm.

Where referrers are unsure if their concern reaches the threshold for child protection, or unsure of a referral to Children's services, a discussion should take place with the Children's Services Contact Team Social Worker or Disabled Children's Team without providing the child/family details.

Monday – Friday, 9am-5pm 020 7527 7400.

For Disabled Children Monday-Friday 9am -5pm 0207 527 3366

For urgent enquiries out of hours, contact the Emergency Duty Team on 020 7527 0992.

Consent should be sought from either a person who has parental responsibility in respect of the children to whom this consent relates or the child or young person, if of sufficient age and understanding. Sufficient age and understanding must be considered for all young people who are over the age of 13 but could be considered earlier if appropriate. Referrers should ensure that parents/carers (or child/young person) are aware that this referral/request for service means that we may obtain and share information with relevant agencies to make sure they receive the help they need quickly from the right services.

**IT IS THE REFERRER'S RESPONSIBILITY TO SEEK / GAIN CONSENT AND RECORD THIS SEPARATELY,
CONSISTENT WITH LOCAL DATA SHARING PROTOCOLS**

This is a mandatory field. Please either select either Yes or No to confirm consent has been given:
YES: NO:
Date consent was requested:
Requested from child/parent /carer (delete as appropriate)
 If parent/carer (or child/young person) has not consented please state the reason:
 If you have not sought consent from the parent/carer (or child/young person) state why:

Name of social worker in Children’s Services Contact Team or Disabled Children’s Team with whom referral discussed:

Date discussed with social worker in Children’s Services Contact Team or Disabled Children’s Team: [Click here to enter a date.](#)

PART B: ABOUT THE CHILD / YOUNG PERSON

Name of Child/Young Person		
Date of Birth:		Age:
Name of Parent/Carers		

Contact details :	Tel No:	
	Address:	
Preferred method of contact:		
Preferred times to contact:		

Please include details of anything we need to know before contacting parents/carers e.g. need for an interpreter, any sensory communication difficulties, suspected domestic abuse or violence:

Childcare/School setting(where relevant):

Referrer’s contact details (person making request/referral)	Tel No:	
	Email address:	

Is there another ‘Lead Professional’ working with the child/family? Yes/No Please provide details: Name:
Tel / email:

Does child have EHC Plan? Yes/No **Details of Disability:**.....
Does child have a diagnosis of a disability? Yes/No

PART C: THE SERVICE REQUEST/REFERRAL

Targeted Service being requested if known (please tick)	<input type="checkbox"/>	Children’s Social Care (including child protection
Refer to the Islington Family Directory for information about services		

and disabled children)
Children's Centre Targeted Family Support
Families First
Islington Families Intensive Team
Targeted Youth Support
Other, e.g. Short Breaks – children with a disability (**please state**):

Reason for referral/request for service: including presenting needs and context:

Describe any current/previous interventions you have planned/implemented with this child/young person/family and their outcomes (you may attach your current assessment and plan with consent if there is one):

What support and outcomes are you seeking for this child/young person/family?

Parent/carer/young person views and feelings about this request for service/referral (if known):

Signed:

Print name:

Date: [Click here to enter a date.](#)

Email this form securely to: csctreferrals@islington.gov.uk or via GCSX:
CSCT@islington.gcsx.gov.uk DisabledChildren.Team@islington.gov.uk

Appendix 8

Whenever a child or adult makes a disclosure, allegation or there are concerns about the welfare and safety of a child or adult at risk, the following steps will be applied in order to report an incident:

1. The person making the disclosure or allegation will be informed at the time that a written record will be made and also explained the importance of doing so;
2. The person making the disclosure will be informed that they can have access to the record made in respect of their own information;
3. Whenever possible notes will be taken during the conversation;
4. Where the above is not possible a written record will be made as soon as possible afterwards and always before the end of the day, using the form below;
5. As much information as possible will be recorded and fact, hearsay and opinion will be distinguished in the record. Assumptions and speculation will be avoided; The context and background of the disclosure will be recorded;
6. The time, date, location, format of information e.g. telephone call or direct contact will be recorded and records will be signed and dated by the person receiving the information;
7. A log of the incident will be maintained, normally by the safeguarding officer who will be responsible in most cases for managing Safeguarding incidents.
8. The log will include full details of referrals to the local authorities where applicable;
9. All original records, including rough notes, will be provided to the Designated Safeguarding Lead;
10. All records will be kept in a confidential and secure place and shared only in order to safeguard a child, young person or adult at risk, in line with the requirements of the Data Protection legislation and CGDHT's Data Protection Policy.

CGDHT Safeguarding Incident Report Form

Your Name:

Your Position:

Member's Name:

Member's date of birth: DD/MM/YYYY

Date and Time of incident: DD/MM/YYYY

Your observations:

Does this indicate the person subject of the concern or allegation has:

- Behaved in a way that has harmed a child or adult at risk, or may have harmed a child or adult at risk,
- Possibly committed a criminal offence against or related to a child or adult at risk;
- Behaved towards a child or adult at risk in a way that indicates they may pose a risk of harm to children or adults at risk; or
- Behaved in a way that may compromise CGDHT's reputation regarding safeguarding the young and the vulnerable.

YES _____ NO _____

Subject of Concern/allegation:

Name:

Position:

D.O.B: Tel No:

Address:

Post Code:

Other:

Any previous concern(s):

Exactly what the member said and what you said (Remember: do not lead the member, record actual details. Continue on separate sheet if necessary).

Action taken so far:

--

**This section to be filled in by dedicated worker
External Agencies Contacted (Date and Time).**

POLICE

If yes – Which station and officer

Yes/No

Contact number:

Details of advice received:

This section to be filled in by dedicated worker External Agencies Contacted (Date and Time).	
POLICE	If yes – Which station and officer
Yes/No	Contact number:
	Details of advice received:

<p>SOCIAL SERVICES</p> <p>Yes/No</p>	<p>If yes - which team:</p> <p>Name:</p> <p>Contact Number:</p> <p>Details of advice received:</p>
<p>OTHER (e.g. other statutory agency)</p> <p>Yes/No</p>	<p>If yes - which organisation:</p> <p>Name:</p> <p>Contact Number:</p> <p>Details of advice received:</p>
<p>OTHER (e.g. NSPCC)</p>	<p>Which:</p> <p>Name:</p> <p>Contact Number:</p> <p>Details of advice received:</p>

CGDHT Senior Management contacted (name(s), contact number, details of advice received):

Designated Safeguarding Lead Informed: Yes/No

Date & Time: _____

Have the parents been informed that contact is going to be made with Children's Social Care

Yes/No

NB: parents/carers should be informed unless to do so could place the child at risk of further harm, please seek advice of this point from the Safeguarding Officer if you are uncertain.

Reporting Person: _____

Signature: _____

Print Name: _____

Date: DD/MM/YYYY

- Remember to maintain confidentiality on a need to know basis only if it will protect the child.
- Do not discuss this incident with anyone other than your manager those who need to know. Please take advice on this point from your manager if you are uncertain.
- A copy of this form should be sent to CGDHT Designated Safeguarding Lead, Director and appropriate Camden and Islington social services team after the telephone report.

Appendix 9

Contact details for external agencies

Safeguarding Children:

Camden

Camden MASH (Multi-Agency Safeguarding Hub)
(Social Services) Office Hours

020 7974 3317
or 020 7974 6600
020 7974 4094
Out of hours: 020 7974 4444

Camden

Camden Access and Response Team

020 7974 4000
Out of hours: 020 7974 4444

Islington

Service

Contact number

Children's Services Contact Team

020 7527 7400

Tim Djavit - Local Authority Designated
Officer (LADO)

020 7527 8102

Information about services for children can
be found on the Islington Family Directory
www.islington.gov.uk/familydirectory

Police

Service

Contact number

Police Referrals - Child Abuse Investigation
Team (CAIT)

020 8733 6495 or 020 8733 6500

For Emergencies

IF YOU ARE CONCERNED ABOUT
SOMEONE'S IMMEDIATE SAFETY OR
WELLBEING, OR YOU SUSPECT A CRIME

HAS BEEN COMMITTED YOU MUST CALL **999**
THE POLICE ON 999.

Non-emergency Police

101

Early Years and Young People's Services

Service	Contact number
Access and Engagement Service	020 7527 3747
Principal Officer, Safeguarding in Education	020 7527 5845
Early Years and Childcare Service	020 7527 5932/5921
Early Years and Childcare Service – Senior Designated Officer	020 7527 5629
Families First	020 7527 4343
Young People Services - Senior Designated Officer	020 7527 5880

Other useful numbers/information:

NSPCC Child Protection helpline	0808 800 5000
Victim Support	020 7268 0210
Mencap	0808 808 1111
Care Quality Commission (investigates incidents of alleged abuse in care homes etc)	03000 616161

Appendix 10

Activity Risk Assessment

Activity:
RA__

Last Updated:

There is a risk of...	...toby ...	What needs to be done to control risk?	Who needs to do control measure?	When do they need to do it?	Comments/ Further Action

Lessons learned. Record any further risks and control measures identified during the activity:

Risk Assessment Lead by:

Signed: _____

Spot Checked by (Youth & Community Manager):

Signed: _____

Review Date (MMM-YY): _____

Appendix 11

Photography and Filming Consent Form

Dear Parent/Guardian/Carer,

Occasionally, we may take photographs or videos of the young people and users at Covent Garden Dragon Hall Trust. We may use these images in our Newsletter, in other printed publications that we produce, and on our website. We may also take video and audio recording that we use for monitoring or other educational uses. In addition from time to time, we may be visited by media or external agencies and partners who will take photographs or film of our work or events. Young people will often appear in these images and videos, which may appear in local or national newspapers, or on televised news programmes, social media and other media outlets.

To comply with the Data Protection Act 1988, we need your permission before we can photograph or make any recordings of your child. Please answer the questions below, then sign and date the form where shown and return the completed form to Dragon Hall.

Please note that this form is used in accordance with our Privacy Policy.

Photography and filming consent form

Name of the member of staff of CGDHT person that gave form:	
---	--

CGDHT will take all steps to ensure these images and videos are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately you should inform [CGDHT](#) immediately.

Consent information:	
<i>To be completed by child:</i>	
<ul style="list-style-type: none">• I give permission for my photograph to be used within the club for display purposes• I give permission for my photograph to be used within other printed publications• I give permission for my photograph to be used on the club's website• I give permission for videos of me to be used on the clubs website• I give permission for my photograph to be used on the club's social media pages• I give permission for videos of me to be used on the clubs social media pages	
Signature of child:	Print name child:
Date:	

If the child is under 16, consent must be obtained from parents.

If over 16, it's still good practice to inform parents that photographs/videos of their child may be used if the child has given consent.

To be completed by the parent:

- I give permission for my child's photograph to be used within the club for display purposes
- I give permission for my child's photograph to be used within other printed publications
- I give permission for my child's photograph to be used on the club's website
- I give permission for my child to be videoed for use on the clubs website
- I give permission for my child's photograph to be used on the club's social media pages
- I give permission for my child to be videoed for use on the clubs social media pages
- I can confirm that I have read, or been made aware of how these images or videos will be stored within the organisation.

Signature of parent:

Print name of parent:

Date:

Conditions of use

This form is valid for five years from the date you sign it, or for a period of time your child attends our services and premisses. The consent will automatically expire after this time. We will not include personal email or postal addresses, or telephone or fax numbers on video, on our website or in other printed publications. If we use photographs or videos of individual young people, we will not use the full name of that child in the accompanying text or photo caption. We may include pictures of young people and youth workers that have been drawn by the attendees. We may use group photographs or footage with very general labels, such as 'after school club' or 'summer Scheme'