**[Name of club/group]’s Staff Guide to Safeguarding Procedures**

**[This template is provided as an example policy and provides suggestions for what to include. Dorset Youth Association recommend that clubs and groups thoroughly read the policy and procedures and amend them according to their own working practices. Whilst Dorset Youth Association make every effort to keep these policies updated and current, it is the responsibility of clubs and groups to ensure their policies meet legal requirements and current legislation.]**

**\*\*The National Youth Agency** have published a new support resource on the Safeguarding and Risk Management Hub. It is a freely accessible online resource providing guidance, support, advice, and access to training resources in relation to safeguarding and risk management for organisations and individuals working with young people. <https://www.nya.org.uk/skills/safeguarding-and-risk-management-hub/#search-filter-form-17465>

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**This Staff Guide to Safeguarding Procedures is to be read alongside [name of club/group]’s Safeguarding Policy Statement, and any other policies referenced within both documents. This staff guide outlines in detail key pieces of advice or guidance alongside practical procedures to follow and essential contact numbers. Staff and volunteers are expected to read all policies before commencing work at [name of club/group].**

# Key Safeguarding Definitions

|  |  |
| --- | --- |
| **Term** | **Descriptor** |
| A child | Anyone who has not yet reached their 18th birthday. ‘Children’ therefore means ‘children and young people’. |
| Safeguarding & promoting the welfare of children | * 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 |
| ChAD | Children’s Advice and Duty Service – formerly the MASH (Multi Agency Safeguarding Hub) – a single point in Dorset for safeguarding concerns |
| BCP CFH | Bournemouth, Chirstchurch & Poole – Children’s First Response Hub (the BCP equivalent of ChAD) |
| LADO | Local Authority Designated Officer for Safeguarding who deals with safeguarding allegations about members of staff |
| Child protection | The activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm. |
| Child abuse | A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children. |
| Child in Need | A child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled. Children in need may be assessed under section 17 of the Children Act 1989 by a social worker. |
| Significant harm | The threshold that justifies compulsory intervention in family life in the best interests of children. The harm or likelihood of harm is attributable to a lack of adequate parental care or control. |
| Physical abuse | “A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child”. (Working Together to Safeguard Children, 2018). |
| Emotional abuse | “The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ‘making fun’ of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone”. (Working Together to Safeguard Children, 2018). |
| 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 (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children”. (Working Together to Safeguard Children, 2018). |
| 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:   * 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 caregivers); or * ensure access to appropriate medical care or treatment. * It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.   (Working Together to Safeguard Children, 2018). |
| Child Sexual Exploitation | A form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. (Department for Education, 2017). |
| Bullying | Bullying is defined as 'behaviour by an individual or group, usually repeated over time, which intentionally hurts another individual or group either physically or emotionally' (DfE definition). Repeated bullying usually has a significant emotional component, where the anticipation and fear of being bullied seriously affects the behaviour of the victim.  It can be inflicted on a child by another child or an adult. Bullying can take many forms (for instance, cyber-bullying or online bullying via text messages or the internet), and is often motivated by prejudice against particular groups, for example on grounds of race, religion, gender, sexual orientation, or can be because a child is adopted or has caring responsibilities. It might be motivated by actual differences between children, or perceived differences.  It can take many forms, but the three main types are:   * Physical - for example, hitting, kicking, shoving, theft; * Verbal - for example, threats, name calling, racist or homophobic remarks; * Emotional - for example, isolating an individual from activities/games and the social acceptance of their peer group.   Cyberbullying is bullying that takes place using technology. |
| County lines | • Urban gangs supplying drugs to suburban areas, market and coastal towns using dedicated mobile phone lines or “deal lines”  •It involves criminal exploitation, as gangs use children and vulnerable people to move drugs and money  •Gangs establish a base in the market location, taking over the homes of local vulnerable adults by force or coercion in a practice referred to as ‘cuckooing’ |
| Prevent | Prevent is part of the UK’s Counter Terrorism Strategy known as CONTEST. Prevent works to stop individuals from getting involved or supporting terrorism or extremist activity. Radicalisation is a psychological process where vulnerable and/or susceptible individuals are groomed to engage into criminal, terrorist activity. Prevent is part of existing safeguarding responsibilities for professionals, not an additional job. Vulnerable individuals can be referred to Prevent for support in a pre-criminal space. (The Counter-Terrorism and Security Act, 2015) |
| Domestic abuse | Any incident or pattern of incidents of controlling, coercive or 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. This can encompass but is not limited to the following types of abuse:   * psychological * physical * sexual * financial * emotional   Includes honour-based violence, Female Genital Mutilation (FGM) and forced marriage. Victims are not confined to one gender or ethnic group. |
| Human trafficking | Human trafficking is the recruitment, movement, harbouring or receiving of children, women or men through the use of force, coercion, abuse of vulnerability, deception or other means for the purpose of exploitation. British and foreign nationals can be trafficked into, around and out of the UK. |
| Modern slavery | Encompasses slavery, servitude, forced and compulsory labour and human trafficking. Traffickers and slave drivers coerce, deceive and force individuals against their will into a life of abuse, servitude and inhumane treatment. A large number of active organised crime groups are involved in modern slavery, but it is also committed by individual opportunistic perpetrators.  Can present in the form of young people being bought phones/trainers/goods in exchange for ‘labour’. Young people are manipulated by the bribe. |

# Recommended Staff to Young People Ratios

[Name of club/group] follows the recommended ratios from the NSPCC as outlined here <https://learning.nspcc.org.uk/research-resources/briefings/recommended-adult-child-ratios-working-with-children#article-top>

This is dependent on the age of the young people in attendance as follows:

4 – 8 years – one adult to six children

9 – 12 years – one adult to eight children

13 – 18 years – one adult to ten children

However ratios need to be taken in consideration alongside venue capacity and number of areas being used in a session and the needs of the young people who attend. Ratio’s need to be adjusted to meet these needs.

This recommendation also highlights that if young people are helping, they should only be included in these ratios if they are over the age of 18. If there are any adults who do not meet criteria for a vetting and barring check**, they will be supervised at all times which may require additional staff**.

Parents who attend activities with their children will **not** be used to supervise other children unless they have been recruited into the role, having undergone the necessary checks and had the relevant child protection training.

# The Role of the Designated Safeguarding Officer (DSO)

[Name of club/group] has an appointed Designated Safeguarding Officer (DSO) who takes the lead on safeguarding and child protection. They also promote the safety and welfare of children and young people involved in [name of club/group]’s activities at all times, which includes but is not limited to;

* Taking a lead in developing and reviewing [name of club/group]’s safeguarding and child protection policies and procedures
* Taking a lead role in implementing [name of club/group]’s safeguarding policies and procedures: ensuring all issues concerning children and young people attending the setting are responded to appropriately
* Ensure everyone working or volunteering with or for [name of club/group], including the board of trustees/management committee understands the policies and procedures and knows how to respond appropriately if they have a concern about a child’s welfare
* Make sure children, young people, and the parents of those who attend [name of club/group] know who they can talk to if they have a welfare concern and understand how the organisation will respond
* Receive and record information from anyone who has concerns about a child who attends [name of club/group].
* Take the lead on responding to information that may constitute a child protection concern, once the appropriate agencies have been consulted (Dorset Children’s Advice & Duty or BCP’s Children’s First Response Hub, LADO)
* Liaise and work with the family of the child there is a concern about, where it is safe to do so
* Store and retain child protection records according to legal requirements
* Work closely with the management committee/board of trustees to ensure they are kept up to date with safeguarding issues and fully informed of any concerns about organisation safeguarding and child protection practice
* Report regularly to the management committee/board of trustees on issues relating to safeguarding and child protection, to ensure child protection is seen as an ongoing priority issue and requirements are being followed at all levels of the organisation
* Be familiar with, and work within, inter-agency child protection procedures developed by local child protection agencies
* Be familiar with issues relating to child protection and abuse, keeping up to date with new developments in this area
* Attend Level 3 safeguarding training at a recommended interval of 2 years
* Attend regular training in issues relevant to child protection and share the knowledge from the training with everyone who works or volunteers at [name of club/group]

Procedures should allow there to be a deputy in instances of holiday/sickness cover if there is not a permanent deputy. If the DSO is not on the management committee/board of trustees, it is recommended as good practice to have a member responsible for safeguarding. This allows consistency is working together between the safeguarding representative and the DSO.

**\*\*For further support - The National Youth Agency have published a new support resource on the Safeguarding and Risk Management Hub and new guidance on Designated Safeguarding Leads in Youth Settings**

<https://www.nya.org.uk/safeguarding-asset/the-role-of-a-designated-safeguarding-lead-in-a-youth-setting/>

# Safeguarding Training Protocol

|  |  |  |
| --- | --- | --- |
| **Role** | Training Course required | Frequency |
| Designated Safeguarding Officer/deputy DSO | Level 3 | Minimum every 3 years  Best practice every 2 years |
| Any member of staff/volunteer who has contact with young people | Level 2 | Minimum every 3 years |
| Any staff/volunteers/ management committee/  board of trustee member with no direct contact with young people | Induction to safeguarding – can be done ‘in house’ | Minimum every 3 years |

Should any member of staff attend specific training with safeguarding elements, for example, substance misuse or child exploitation, a team meeting will be arranged for learning to be shared.

# Current and Emerging Safeguarding Themes

These should be covered in training. As of January 2021, the local themes which [name of club/group] are aware of and using in work where appropriate are:

County Lines Online Bullying Sexual Exploitation Self-harm  
Suicide Ideation Forced Marriage Female Genital Mutilation  
Gang Activity Peer on Peer Abuse Youth Knife Crime  
Trafficked Children Private Fostering Attitudes to Physical Punishment  
Fabricated Induced Illness Violent Extremism – Radicalisation  
Modern Day Slavery

# What to do if you suspect a child/adult is at risk

If you suspect a child is at risk, the procedure for raising this concern depends on where the concern came from; whether it was a direct disclosure from a young person, or an indirect disclosure through observation or in discussion with other professionals working with the young person.

**In any scenario, it is important to remember that safeguarding is everybody’s responsibility – if you have a concern, you must act on it**

Concern raised by other agency staff

**INDIRECT DISCLOSURE**

Observation by member of staff

***See Standard 4, page 13***

**DIRECT DISCLOSURE BY A YOUNG PERSON**

Is there a risk of significant harm to that young person, or to any other identified young person?

Record your initial reasons for concern, and continue to monitor the situation, noting any new concerns as they arise. Discuss with [name of club/group]’s Designated Safeguarding Officer

**NO**

Has the concern arisen from work in a partner organisation?

**YES**

**NO**

**YES**

Alert the Designated Safeguarding Officer (or equivalent) of that organisation. Notify [name of club/group]’s DSO of your action

Discuss your concerns with [name of club/group]’s DSO and with the ChAD/

First Response Hub

\*NB: in the diagram the same actions apply to adults at risk – see ‘Safeguarding adults at risk’

**Guideline Summary on the Procedures appropriate to the circumstances you are facing**

The full Department for Schools, Children & Families guidance “What to do if you’re worried that a child is being abused” can be found at <https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf>

**The Procedures to Follow**

The way in which a disclosure or concern presents will determine which procedure to follow. All procedures should follow the guidance set out in ‘Record keeping’ to ensure that [Name of club/group]’s records are accurate, stored appropriately, contain enough information and are free from bias. [Name of club/group] ask its staff and volunteers to approach record keeping with the view that any of our records may be required in a court of law, and it is down to staff members and volunteers to ensure that we as an organisation are upholding our duty of care to our young people. The Designated Safeguarding Officer will discuss with individuals if they feel that standards are not being met.

If the first presentation of concern is **a young person’s** **disclosure**, staff and volunteers must follow Procedure 1

If staff or volunteers have an **initial concern** about the welfare of a young person (or the child/sibling of the young person), they should follow Procedure 2

If **concerns are raised by someone other than the individual**, staff and volunteers should follow Procedure 3

To understand how to **chase referrals or what to do if you wish to escalate** a referral, you must follow Procedure 4

**Other circumstances**

In cases in which an adult at risk is involved, the procedure in ‘Safeguarding adults at risk’ below must be followed.

If an allegation of abuse is made against a member of staff, the procedure in ‘Managing Allegations’ must be followed.

**Procedure 1**

What to do if a young person makes a disclosure:

If you suspect a young person might be about to disclose (or if it is a surprise, before a young person reveals too much of their disclosure), remind them of [Name of club]’s confidentiality policy and that you cannot keep anything a secret if they or someone else are at risk of harm. Reassure the young person that you will only tell people who need to know, and they will be informed every step of the way.

Make notes if possible, to capture phrases and exact wording. Again, reassure the young person that it is not to test them but to appropriately support them. This sheet should be signed, dated, and filed with any paperwork relating to the disclosure in a confidential file.

Follow the ‘Procedures for responding to a child/young person’ guidance in this policy for listening to the young person; not judging what they are telling you, giving the young person time to speak etc. Be gentle, patient and try to not ask questions, rather let the young person speak in their own time.

Do not ask leading questions – use TED: “tell me…” “explain to me…” “describe…”

Stay calm and do not show shock wherever possible.

Encourage them to talk, offer the chance to write things down or draw pictures if it helps (again, sign, date and store confidentially with any other paperwork).

Reassure the individual that they are doing the right thing by telling you and that they are not to blame. Tell them that you treat this seriously and it is not their fault.

Be clear about your own position and the steps you must now take. Ask for their consent for information to be shared with other agencies on a ‘need-to-know’ basis. If you know the young person is subject to a Child Protection Plan, you should tell the young person you will have to contact the other key professionals involved.

If note taking was not possible during the disclosure, write everything down as soon after the disclosure as possible – date, time, place, people present and exact words wherever possible. Sign and date this sheet. **Ideally this should be on a [Name of club/group] Child Concern Incident Form.**

If there is any potential ‘evidence’, preserve and keep it safe (e.g. no washing of clothes or showering) and as uncontaminated as possible.

**DO NOT**:

* Judge them
* Prompt them or ask detailed/leading questions
* Make assumptions or put words in their mouth
* Promise it will never happen again
* Interrupt them, or stop them from freely recalling events
* Make them repeat anything unnecessarily
* Contact or confront the alleged abuser
* Expose the individual to an examination to verify injuries
* Discuss individual cases or give information about the disclosure to anyone who doesn’t need to know

Next steps:

If the allegation of abuse is against any member of staff or volunteer at [Name of club/group], follow the ‘Managing allegations against staff and volunteers’ section in this handbook.

Talk to your Designated Safeguarding Officer – or the deputy if the DSO is unavailable. This conversation should include a decision on how much information parents are being given and whether a referral to the Dorset ChAD or BCPs Children’s First Response Hub will be made - as well as any other key decisions for the circumstances surrounding the young person and their disclosure. Notes should be made about this discussion, including what decisions were made with the reasoning for or against, and these notes should be signed and dated by all involved in discussions.

Line Managers can be informed that a disclosure has been made to enable appropriate support for the staff member. Instructions given by the named Designated Safeguarding Officer should be strictly adhered to with regards to how much information can be shared.

If both the Designated Safeguarding Officer and Deputy are unavailable, contact the Dorset ChAD (01305 228558) or BCP’s Children’s First Response Hub (01202 735046) for advice.

At all stages of the process, the Dorset ChAD or BCP’s Children’s First Response Hub can be consulted. Young people can remain anonymous unless it is evident there is a Child Protection issue. Discussions can be for information to make a referral or an ‘in principle’ discussion.

All paperwork/forms/notes relevant to the disclosure should be filed in a confidential file separate from other club records and kept securely, following [Name of Club/Group]’s Data Protection policy, by the Designated Safeguarding Officer. Other staff should not have unrestricted access to these files. These notes may be required as part of the referral process.

**If a young person is known to be subject to a Child Protection Plan, you should tell the young person you will seek contact with the other key professionals involved. You should discuss with the young person, social worker and/or designated teacher, whether there is a role for [name of club/group] and what this role will be.**

**Procedure 2**

What to do if you have an initial concern about a young person (or their child/sibling)

Take an informal approach initially. Discuss your concern with the Designated Safeguarding Officer only. Make notes and observations on the Child Concern Incident Form, signed and dated and stored in a confidential file kept by the Designated Safeguarding Officer, separate from any other club documents in line with [Name of club/group]’s Data Protection policy.

Talk to the young person involved, to see what reasoning they give for anything that may have concerned you. Keep a signed and dated record of this conversation.

If any other organisations are known to be involved with the individual or the family, discuss your concerns with the organisation’s Designated Safeguarding Officer/Lead.

The Designated Safeguarding Officer can ask for an ‘in principle’ discussion with Dorset ChAD or BCP Children’s First Response Hub where a young person need not be named (unless it is evident there is a Child Protection issue). In exceptional circumstances where the DSO or the deputy are unavailable, the member of staff with the initial concern can contact directly for advice.

Keep in mind that when checking your concerns, you should not make assumptions and must approach conversations in a non-biased way.

Decide on a course of action. No action may be a suitable response with the information available at this time. Update the Child Concern Incident Form with what action was taken **and why (or why not)**.

If it is agreed that there should be any follow up action, the person responsible for this, by when and with whom should be recorded. It is down to that member of staff/volunteer to ensure they carry out these actions.

The situation must be monitored and if further concerns are noted through observation, this process starts again. If at any point through this process information is found that gives staff or volunteers involved reason to believe that a young person is at risk of significant harm, Dorset ChAD or BCP First Response Hub should be contacted to make a referral.

**Procedure 3**

What to do if someone raises concern other than the individual involved

Do not discuss issues about a named individual and ensure any discussions take place in a private area. Staff must safeguard themselves and be in view of other staff wherever possible, but these conversations are not to happen where others can overhear what is being said.

If the person raising concerns is a colleague within [name of club/group], refer them to these procedures and the Designated Safeguarding Officer.

If the person concerned is a colleague within another agency, refer them to their own Line Manager and Child Protection procedures.

If the person concerned is a parent/carer or member of the public refer them to Dorset ChAD or BCP Children’s First Response Hub to report any concerns. Contact details for members of the public are given in ‘Useful Contacts’

If the issues raised are about a young person known to [name of club/group], follow procedures for initial concerns, outlined in Procedure 2.

If an allegation is made against a [name of club/group] member of staff, refer to and follow the procedure in ‘Managing allegations against staff or volunteers’

**Procedure 4**

What to do following a Child Protection Referral

At the point of referral, any actions required must be documented on the Child Concern Incident Form. Staff or volunteers at [Name of club/group] who are given actions following a referral are responsible for ensuring these actions are met by their deadlines.

Where a referral has been made to Dorset ChAD or BCP Children’s First Response Hub, follow this up within 5 working days to check outcomes and document these on the Child Concern Incident Form. If concerns have been raised with other agencies, the same follow up procedures apply. Any phone call referral should be followed up in writing within 24 hours.

Professionals and agencies who are most involved with the child and family, including those who have taken part in enquiries, have the right to request that Children’s Social Care convene a child protection conference if they have serious concerns that a young person may not otherwise be adequately safeguarded.

Where enquiries have not resulted from a referral, you must follow advice from the Dorset ChAD or BCP Children’s First Response Hub whether you need to monitor the situation or not. You should feedback as agreed and may be asked to inform other agencies that you are no longer monitoring the situation for this referral.

Actions that may result from a referral include a Section 47 strategy meeting comprising representatives of key agencies and a Child Protection conference. The Designated Safeguarding Officer may be required to participate in these meetings or to delegate participation to the referring [name of club/group] staff member. In either event, the member of staff should have access to all known relevant information and be supported to participate.

At any point, should you feel the case needs escalating, the Pan Dorset Safeguarding Children’s Partnership has an escalation policy to follow, which can be found here <https://proceduresonline.com/trixcms/media/4796/pan-dorset-escalation-policy-v10-jun-2019.pdf>

In the first instance, concerns should be raised with the named individual that you are dealing with. If you feel the situation is still not resolved, it may be appropriate for your manager to challenge the other person’s manager. If this still doesn’t resolve the situation, this may be taken a step further by involving senior management in both organisations. The process for initiating these steps and a timeline, including expectations at each level as well as example scenarios and suggested wording for escalation are all clearly outlined in the Escalation Policy.

Children’s Social Care have made it clear in training that they are happy to be challenged but have found through experience that sometimes it is due to a misunderstanding of the other person’s role and a conversation between practitioners (or their line managers) is usually enough to resolve frustrations. They are keen to set a precedence of professionals discussing their concerns with each other to ensure cohesive working together practices that act in the best interests of the child/young person/family.

# Record keeping

If any member of staff or volunteer has a concern about a child or young person’s welfare or safety, details will be recorded regardless of whether this information is shared with any external agency. Details we would expect to be recorded includes:

* The date and time of the incident/disclosure or observation
* The date and time of the report
* The name and role of the person to whom the concern was originally reported and their contact details
* The name and role of the person making the report (if different to above) and their contact details
* The name of all parties who were involved in the incident, including any witnesses
* The name, age and any other relevant information about the child who is the subject of the concern (including information about their parents or carers and any siblings)
* What was said or done and by whom
* Any action taken to look into the matter
* Any further action taken (such as any referral being made)
* The reasons why the organisation decided not to refer those concerns to a statutory agency (if relevant).

Reports will be factual and where interpretation or inference is recorded from what was observed, said, or alleged it will be clearly marked. Reports should be clear, use straightforward language, concise, accessible, comprehensive and include evidence where possible (e.g., the young person’s comments in their own words wherever possible). Reports should take account of the young person’s observed behaviour, body language and emotional demeanour. Where decisions have been made with other agencies, this should be made clear with whom (the agency and the individual on behalf of the agency). If there are differences in viewpoint between staff members, whether internally or with external partners, members of staff and volunteers for [Name of club/group] should consult our Designated Safeguarding Officer who will resolve these issues with the parties concerned and may consult Dorset ChAD or BCP First Response Hub to do so. The outcome should be recorded on the Child Concern Incident Form, including the decision reached and the reasons for it. If anything requires escalation, please see Procedure 4 in ‘What to do if you suspect a child/adult is at risk’.

We recommend that staff and volunteers use our ‘Child Concern Incident Form’ where possible, though recognise that in practice it may not always be possible to pause a young person from disclosing information in the moment. If notes are made during the disclosure, these should be used to inform the Child Concern Incident Form and these notes should be attached as part of the file.

These records will be kept separately from club information and filed confidentially in a personnel file by individual child rather than in one file or concern log. Files on individual children will be started as soon as there is a concern.

If [name of club/group] have any concerns about an adult’s behaviour, a file will be made for the person in a confidential personnel file in the same way outlined for young people.

# Useful/Essential contact numbers

As an affiliated member of Dorset Youth Association, any volunteer, member of staff, member of the management committee or board of trustees has access to help from staff at DYA. This can be accessed in a variety of ways:

[clubsupport@dorsetyouth.com](mailto:clubsupport@dorsetyouth.com) or [info@dorsetyouth.com](mailto:info@dorsetyouth.com) (with FAO Club Support in the subject line). During office hours, Mon – Fri, DYA can be reached on the following number – 01305 262440.

Police Non-Emergency – 101

Police Emergency - 999

For those in the Dorset Council area of Dorset the contact numbers are:

Dorset ChAD – 01305 228866 (for families/members of the public)  
Dorset ChAD – 01305 228558 (for professionals – same for Out of Hours)

If you know the child already has a social worker, you can contact them directly:

If the child lives in the east or north of Dorset – 01202 868224 or [eastdistrictchildcare@dorsetcouncil.gov.uk](mailto:eastdistrictchildcare@dorsetcouncil.gov.uk)

If the child lives in the west of Dorset – 01305 221450 or [westdistrictchildcare@dorsetcouncil.gov.uk](mailto:westdistrictchildcare@dorsetcouncil.gov.uk)

For those in Bournemouth, Christchurch or Poole the contact numbers are:

Children’s First Response Hub - 01202 735046 or [childrensfirstresponse@bpccouncil.gov.uk](mailto:childrensfirstresponse@bpccouncil.gov.uk)

CFRH Out of Hours – 01202 738256 or [childrensOOHS@bcpcouncil.gov.uk](mailto:childrensOOHS@bcpcouncil.gov.uk)

# Procedures for responding to a child/young person

Young people have been asked what they consider to be good professional practice and have identified the following. Individuals who: -

* **Listen** – carefully and without trivialising or being dismissive of the issues raised; (without exploring and probing – to ensure the young person does not have to relive too many times the experience and to ensure that evidence is not contaminated);
* Are **available and accessible** – regular and predictable contact
* Are **non-judgemental and non-directive** – accepting, explaining, and suggesting options and choices
* Have a sense of **humour** – it helps to build a rapport
* Are **straight talking** – with realism and reliability; no “false-promises”
* Can be **trusted** – maintain **confidentiality** and consult with children before taking matters forward

(Butler and Williamson 1994)

Good practice in talking to the young person could include: -

* Always listen and take the young person seriously. Do not promise confidentiality
* Accept your own limitations and explain honestly that you may need to talk to someone else about this
* Reassure the young person that it is not their fault
* Avoid showing personal feelings of anger, embarrassment, disgust, or undue anxiety
* Make sure that you are aware of agency procedures. Avoid making promises which are impossible to keep
* Make it clear that, whatever happens, staff will be there to offer support
* Using TED questions – “tell me…” “explain to me…” “describe…”

The NSPCC carried out research to find out how adults can better respond to a child who is disclosing abuse (Baker et al, 2019). They found three key interpersonal skills that help a child feel they are being listened to and taken seriously:

* Show you care, help them open up: give your full attention to the child or young person and keep your body language open and encouraging. Be compassionate, be understanding and reassure them their feelings are important. Phrases such as ‘you’ve shown such courage today’ help.
* Take your time, slow down: respect pauses and don’t interrupt the child – let them go at their own pace. Recognise and respond to their body language. And remember that it may take several conversations for them to share what has happened to them.
* Show you understand, reflect back: make it clear you’re interested in what the child is telling you. Reflect back what they’ve said to check your understanding – and use their language to show it’s their experience.

If a child tells you they are experiencing abuse, it’s important to reassure them that they’ve done the right thing in telling you. Make sure they know that abuse is never their fault. Never talk to the alleged perpetrator about the child’s disclosure. This could make things a lot worse for the child.

**Non-biased approach**

It is vital that any child who is trying to disclose abuse feels that they are being listened to and taken seriously.

This means it is important to maintain an unbiased approach when responding to disclosures and follow your organisation’s procedures to ensure each case is treated in a fair and transparent manner and that the child gets the protection and support that they need.

# Managing allegations of abuse against a child or young person

There are many ways that a child may be abusive towards others. A child who is displaying abusive behaviour may not realise they are doing so.

When a child abuses another child, it is sometimes called 'peer on peer abuse' or 'peer abuse' (Department for Education, 2018; Department of Health, 2017).

**Allegations may involve:**

* bullying or cyberbullying
* emotional abuse
* online abuse
* physical abuse
* sexting
* harmful sexual behaviour
* sexual abuse

**Identifying concerns**

There are a range of ways concerns might be raised:

* A child or adult might make a direct allegation of abuse by a child or young person
* A child or adult might tell you they are uncomfortable with a child or young person's behaviour. They may not realise the behaviour is abusive
* A member of staff or volunteer might observe behaviour that gives cause for concern and make a report following your organisation’s safeguarding procedures
* Your organisation may be informed that a child or young person is the subject of an investigation
* A child or young person might tell you they have harmed someone else or are at risk of doing so.

**Talking to a child who tells you they have behaved abusively**

Sometimes a child may disclose that they have behaved abusively towards someone else. If this happens, staff/volunteers at [name of club/group] will:

* reassure the child that they have done the right thing by telling someone about it
* listen carefully to the child and let them tell their whole story. Staff/volunteers will not try to investigate or quiz the child, but make sure they understand what the child/young person is saying
* use non-judgmental language
* remember that a child who is disclosing that they have abused someone else is a child in need of support
* tell them that the staff member/volunteer now must do what they can to keep them and the other children involved safe
* explain what the staff member/volunteer is going to do next and that they will need to speak to other people who can help
* reassure the child that they can get help to change their behaviour and move forward with their life
* the staff member will suggest the child contacts Childline for support

Staff/volunteers at [name of club/group] will never promise to keep what a child tells them a secret. They will explain that they need to talk to other people who can help keep them and the other children involved safe.

**Talking to a child who may be behaving abusively**

If allegations have been made against a child you should speak to your nominated child protection lead, who can advise you on the best way to proceed. If you confront the child about the allegations before taking advice, it may make the situation worse.

For more advice about speaking to a child who may be behaving abusively, contact the ChAD (for Dorset – 01305 228558), BCP Children’s First Response (01202 735046) or the NSPCC Helpline on 0808 800 5000 or by emailing help@nspcc.org.uk.

Sometimes you may have noticed a child behaving inappropriately and you may need to talk to them about this immediately, to manage the behaviour. Remember that they may not realise their behaviour is unacceptable. Talk to them calmly and explain why their behaviour is unsuitable and what they can do to improve it.

It is helpful to have a code of conduct which everyone in your organisations agrees to, and which you can refer to when managing behaviour.

Be aware that a child who displays challenging behaviour may be doing so because they have experienced abuse or neglect. If you think this may be the case, follow your organisation's child protection procedures.

**Deciding if a concern is a child protection issue**

When a child or young person behaves inappropriately towards another child, a decision needs to be made about whether there may be a child protection concern. This decision will be made by the Designated Safeguarding Officer, who will consult;

* the volunteer or staff member who is responsible for the supervision of the children involved
* the senior manager or trustee responsible for safeguarding
* any other agencies you know are working with the child
* the local child protection services if necessary

**When an allegation is a child protection concern**

An allegation becomes a child protection concern when:

* the behaviour involves sexual assault or physical assault
* the child who has experienced the abusive behaviour has suffered significant harm
* the behaviour forms part of a pattern of concerning behaviour by the child or young person who is being abusive
* the child carrying out the abuse is displaying harmful sexual behaviour
* you are concerned that the child carrying out the abuse may be doing so because they have experienced abuse or other upsetting experiences themselves

It is also a child protection concern when there is a significant difference of power between the child who is displaying abusive behaviour and the person being abused, for example when:

* there is an age difference of more than two years
* there is a significant difference in terms of size or level of ability
* the child displaying abusive behaviour holds a position of power (such as being a helper, volunteer, or senior member)
* the child being abused is significantly more vulnerable than the other child or young person

**When it is not clear**

If [name of club/group] is not sure whether a child or young person's behaviour is abusive, we will seek guidance from the ChAD (for Dorset) or BPC Children’s First Response.

**Telling parents that their child may have abused someone else**

[Name of club/group] will inform the child's parents or carers what has happened, as long as it doesn't increase the risk to the child. The child will be consulted first and could involve staff/volunteers speaking to the parents first, without the child, then summarising everything with the child present. Staff/volunteers will also help the child tell their parents in their own words, being present for support.

**Taking action to keep all children and young people safe**

Depending on the nature of the allegation or concern, [name of club/group] may need to take action to protect and support children who have experienced peer abuse. [Name of club/group] will also consider how best to support the child against whom the allegation was made.

This may include but is not limited to providing sanctions in line with the behaviour policy.

**Emotional support**

[Name of club/goup] recognises that if peer abuse has taken place, this may have an emotional impact on everyone in the group. We are committed to ensuring children, young people and adult supervisors have access to the emotional support they need and know who they can talk to if they are worried about anything. Staff/volunteers will have access to support through supervision and young people will be signposted to Childline whilst [name of club/group] decides whether any long term support is required and what shape that will take.

**Risk assessment**

A risk assessment will be undertaken to ensure [name of club/group] has an effective risk management plan to make sure all children and young people attending are safe.

This risk assessment will include things like;

* any relevant information from other agencies, such as care plans or multi-agency assessments
* making sure the child who is alleged to have carried out the abuse is separated from the children who experienced the abuse
* separating the child who is alleged to have carried out the abuse from other children where there is a risk of further abuse
* whether the children who experienced the abuse are at risk of bullying or victimisation from others and what prevention measures are needed
* whether the child who is alleged to have carried out the abuse is at risk of any retaliation and what action can be taken to keep them safe

[Name of club/group] will work with and support any external agencies that may be investigating or providing ongoing support to any party involved in the allegation.

# Managing allegations against staff and volunteers

**(Procedure provided by Pan-Dorset Local Safeguarding Partnership)**

**Responsibility for dealing with allegations/ concerns**

Should a concern or allegation be identified regarding the behaviour of an adult member of staff/volunteer at [name of club/group], advice will be sought as soon as possible. This would most appropriately be obtained from the local authority or Police but could be sought from a national organisation if such an affiliation is in place. If a young person makes an allegation, this will be reported immediately to the **ChAD/BCP Children’s First Response Hub**.

*To do nothing is not an option*

**Page Content**

**​The allegation**

This guidance refers to any allegation that an employee or volunteer has or may have:

* behaved in a way that has harmed, or may have harmed a child or an adult at risk;
* possibly committed a criminal offence against, or related to, a child or an adult at risk;
* behaved towards a child/children or adult(s) at risk in a way that indicates s/he may pose a risk of harm to children

All allegations will be taken seriously. However, some allegations may be:

* unfounded (misinterpreted);
* unsubstantiated (insufficient evidence);
* false (untrue)
* malicious

An allegation may come via various sources. The management of an allegation of abuse may involve one or all of the following:

* a police investigation of a possible criminal offence;
* enquiries and assessment by children's or adult services about whether a child or vulnerable adult is need of their services;
* consideration by [name of club/group] of the position of a member of staff/volunteer within its structure.

**Responsibility for managing allegations**

Dorset Council and Bournemouth, Christchurch & Poole Council work in partnership

with others to safeguard children.

**The Pan-Dorset Safeguarding Children’s Partnership**

A new partnership for children’s safeguarding arrangements was launched on 1

August 2019, replacing the existing Local Safeguarding Children Boards.

The changes have come about as a result of the Children and Social Work Act 2017

and will see the Bournemouth and Poole Local Safeguarding Children Board (LSCB)

and Dorset Safeguarding Children Board (SCB) replaced by a new Pan Dorset

Safeguarding Children Partnership.

The Pan-Dorset Safeguarding Children Partnership will be led by the four

organisations:

• Bournemouth, Christchurch and Poole Council

• Dorset Council

• NHS Dorset Clinical Commissioning Group (CCG)

• Dorset Police

The new arrangements will see partners working more closely together to strengthen

the safeguarding of children and young people across the county.

Each partner has a statutory leadership responsibility within the new arrangements,

but all other agencies that work with children will continue to have a critical role in

effective partnership working.

Importantly, the way in front line professionals can access support and advice to

safeguard children will not be changing including contact details to report a concern,

access to policies and procedures and training.

When an allegation is made against a member of staff or a volunteer who has

contact with children and young people, the Pan-Dorset Multi Agency Safeguarding

Procedures for managing allegations will be followed. The Local Authority

Designated Officer (LADO) has overall responsibility for ensuring that this procedure

is followed and for resolving any inter-agency issues. The LADO will also provide

advice and guidance to the employer.

**The employer/service/line manager**

As an employer, [name of club/group] has a duty of support to those working for our organisation. [Name of club/group] has some responsibility to support the individual whilst any investigation is taking place. This guidance is concerned with this role, which is led by the individual's ‘manager’.

**The role of the designated person in managing allegations against an employee**

Allegations will be taken seriously and dealt with sensitively and promptly. [Name of club/group] will provide appropriate support to any member of staff/volunteer who is the subject of an allegation and will consider the appropriate action to be taken.

The allegation may have a potential impact on the individual's contract of current or future employment or their position as a volunteer. How [name of club/group] responds to the allegation is a matter for the designated person to decide with advice from HR and the relevant LADO/Safeguarding Partnership where available and appropriate.

**Taking action**

The manager of the individual who is the subject of the allegation will work with the appropriate professionals (routinely the Local Authority Designated Officer) to determine the appropriate course of action.

The individual's line manager has responsibility to follow the appropriate procedure in a fair manner and to decide on the appropriate course of action. The individual circumstances of the case may have an impact, for example whether it is possible to conduct an internal inquiry in parallel with a police investigation, if the police are involved.

Before taking/recommending any action advice should be sought from the appropriate agency/professionals. The Safeguarding Partnership, Local Authority or police, if involved, cannot require [name of club/group] to suspend the member of staff. This is the role and responsibility of [name of club/group]. However, the views of the relevant agencies involved will always be considered in relation to continuing contact with young people.

In each individual case, the designated person must ensure that:

* the level of risk to service users is properly considered and managed;
* all alternative options and the consequences of any immediate action taken (for example, suspension) are appropriately considered;
* any action is taken in the best interests of all concerned and is based on assessment of risk, with a clear rationale;
* any relevant employment procedures (for example a disciplinary investigation) are appropriately followed;
* appropriate advice is sought;
* the person who is subject of the allegation receives appropriate support, understands the procedures that will be followed and is kept informed of the progress of the case.

**Concluding the case**

Once all appropriate procedures have been concluded, the designated person will need to manage the outcomes. This may include:

* management of the return to ‘work’ where an individual has been asked to remain away;
* referral to the DBS <https://www.gov.uk/government/collections/dbs-referrals-guidance--2> and/or
* a referral to the relevant regulatory body;
* improvements to procedures or practice;
* depending on the circumstances of the alleged abuse, support for others at the workplace, including other members of staff or other children or adults at risk.

**Who to contact regarding an allegation**

All adults have a responsibility to report any concerns. All allegations should be reported to the Designated Safeguarding Officer immediately.

If the employee feels unable to report an incident to the DSO, or the concern relates to the DSO, the following services may also be contacted:

* the police
* Local Authority Designated Officer (LADO)

(Dorset - 01305 221122 / Bournemouth, Christchurch & Poole - 01202 456744)

Alternatively, the [whistleblowing policy](https://dorsetcc.sharepoint.com/sites/documents/Policies/Whistleblowing%20policy%20and%20anti%20fraud%20strategy.pdf)enables any member of staff to express any concerns they may have about any aspect of service provision or the conduct of members of staff, or others acting on behalf of [name of club/group].

# Further learning – Child Safeguarding Practice Reviews

Child Safeguarding Practice Reviews were formerly called Serious Case Reviews. These are cases where a child suffers abuse or neglect is known or suspected and the child has died or been seriously harmed.

Working Together to Safeguard Children (2018) states the purpose of these reviews is to:

“identify improvements to be made to safeguard and promote the welfare of children. Learning is relevant locally, but it has a wider importance for all practitioners working with children and families and for the government and policy-makers. Understanding whether there are systemic issues, and whether and how policy and practice need to change, is critical to the system being dynamic and self-improving”

Child Safeguarding Practice Reviews can be found on the Pan Dorset Safeguarding Children Partnership website here - <https://pdscp.co.uk/working-with-children/serious-case-reviews/> and these can be used as tools to reflect on safeguarding practice within [name of club/group] and how we work with partnership agencies within the county.

# Safeguarding adults at risk

Adult safeguarding applies to an adult who:

* has needs for care and support from a Local Authority (whether or not the authority is meeting any of those needs) **and**
* is experiencing, or is at risk of, abuse or neglect, **and**
* as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

The Care Act 2014 <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

The Local Authority is under a duty to make or cause enquiries to be made to enable it to decide whether any action should be taken in the adult's case and, if so, what and by whom.

NB some forms of abuse constitute a criminal offence and police investigations normally take priority and will be coordinated with other investigations.

[Name of club/group] staff and volunteers have a duty of care to adults for whom they are providing a service, who they consider are at risk and who could suffer harm. These procedures should also be used for an adult at risk who is the parent of a child that is receiving a service from [name of club/group].

Staff and volunteers should always stay alert to the possibility of increased vulnerability and changing needs of service users. One off incidents may cause staff concern or equally a pattern may begin to emerge which causes staff concern about an adult’s ability to look after themselves or keep themselves safe.

If an adult, who may be at risk, tells you that they or another adult is being abused, show that you have heard what they are saying, and that you take their allegations seriously;encourage them to talk, but do not prompt or ask leading questions. Avoid interruption when the adult is recalling significant events and do not make them repeat their account. You should inform them that you will discuss what they have said with your manager. If there is a child associated with the incident who may be at risk of significant harm, follow child protection procedures for children.

Share your concerns with the Designated Safeguarding Officer and record these concerns factually using the Adults at Risk Concern Incident form. This should be filed within the Child and Adult Protection file.

Referrals (known as concerns) can be made to Adult Social Care services in each LA and should be done by the Designated Safeguarding Officer by telephone in accordance with the Bournemouth Dorset and Poole Adult Protection Policy and Procedures <https://www.dorsetforyou.gov.uk/care-and-support-for-adults/information-for-professionals/dorset-safeguarding-adults-board/dorset-safeguarding-adults-board-pdfs/multi-agency-safeguarding-adults-policy.pdf>

<https://www.dorsetforyou.gov.uk/care-and-support-for-adults/information-for-professionals/dorset-safeguarding-adults-board/dorset-safeguarding-adults-board-pdfs/multi-agency-safeguarding-adults-procedures.pdf>.

In principle discussions can be held with these teams where further advice or guidance is required before referral. Bournemouth and Dorset have Safeguarding Adult Teams who can be contacted.

The outcome of raising a concern with Adult Social Care may be an investigation or a decision not to proceed further. The referrer will be informed of the action that is to be taken.

If the criteria are met for a Section 42 statutory enquiry, an enquiry planning meeting will be held and the Safeguarding Officer may be asked to contribute to this meeting as the referring agency.

All alerts or requests for help and information should be referred to the relevant LA. Contact information is as follows:

Bournemouth & Christchurch - 01202 454979 or caredirect@bcpcouncil.gov.uk

Poole - 01202 633902 or sshelpdesk@bcpouncil.gov.uk

Dorset - 01305 221016

Out of Hours service – 0300 1239895 (evenings, weekends & bank holidays)

**Adult safeguarding definitions**

|  |  |
| --- | --- |
| **Term** | **Descriptor** |
| An adult at risk | Applies to an adult who:   * Has care and support needs, AND * Is experiencing, or is at risk of, abuse or neglect, AND * Is unable to protect themselves from either the risk of, or the experience of abuse or neglect, because of those needs |
| Making safeguarding personal | * The Care Act 2014 makes this statutory for safeguarding adults * Facilitates a person-centred approach to safeguarding * Establish what the service user wants regarding risk management and the outcomes they want to be achieved * Benefits include service users empowered to protect themselves * Service users gain the outcomes that they want, person put before the process * Quicker resolution to concerns that have been raised * People have the right to make capacitated unwise decisions * Need to ask the service user for their views on raising a concern unless by doing so the risk of harm to them or others would be increased |
| Physical abuse | Non-accidental harm to the body, includes inappropriate restraint or physical interventions |
| Psychological abuse | Actions which adversely affect a person’s emotional wellbeing & causing mental distress. |
| Neglect | Failure to provide the care and treatment that a responsible person could be expected to provide, includes self-neglect & hoarding. |
| Self-neglect | * Neglecting personal hygiene, health, nutrition or surroundings and includes hoarding and refusal of services * An adult who has capacity to make choices may make decisions that others think of as self-neglect. |
| Sexual abuse | * Direct or non-direct involvement of sexual activity without consent/capacity * Offence to have sex with an adult who has a mental disorder impeding choice * Offence for a care worker to have sex with an adult who has a mental disorder impeding choice |
| Financial or material abuse | * Theft * Fraud * Internet scamming * Coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, * Misuse or misappropriation of property, possessions or benefits |
| Discriminatory abuse | * Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation * Known as ‘protected characteristics’ under the Equality Act 2010 * Denying basic rights to healthcare, education, employment and criminal justice * Substandard service provision |
| Organisational/ institutional abuse | * Run-down or overcrowded establishment * Authoritarian management or rigid regimes * Lack of leadership and supervision * Poor quality care * Abusive and disrespectful attitudes * Inappropriate use of restraints * Lack of respect for dignity and privacy * Failure to manage residents with abusive behaviour * Not providing adequate food and drink, or assistance with eating |
| Online abuse | * Any type of abuse that happens on the web, through social networks, online games or using mobile phones * Adults at risk may experience cyberbullying, grooming, sexual abuse, sexual exploitation or emotional abuse |
| Female Genital Mutilation (FGM) | Comprises all procedures involving partial or total removal of the external female genitalia for non-medical reasons. FGM is illegal in England and Wales under the FGM Act 2003. It is a form of child abuse and violence against women. |
| County lines | * Urban gangs supplying drugs to suburban areas, market and coastal towns using dedicated mobile phone lines or “deal lines” * It involves criminal exploitation, as gangs use children and vulnerable people to move drugs and money * Gangs establish a base in the market location, taking over the homes of local vulnerable adults by force or coercion in a practice referred to as ‘cuckooing’ |
| Prevent | Prevent is part of the UK’s Counter Terrorism Strategy known as CONTEST. Prevent works to stop individuals from getting involved or supporting terrorism or extremist activity. Radicalisation is a psychological process where vulnerable and/or susceptible individuals are groomed to engage into criminal, terrorist activity. Prevent is part of existing safeguarding responsibilities for professionals, not an additional job. Vulnerable individuals can be referred to Prevent for support in a pre-criminal space. (The Counter-Terrorism and Security Act, 2015) |
| Domestic abuse | Any incident or pattern of incidents of controlling, coercive or 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. This can encompass but is not limited to the following types of abuse:   * psychological * physical * sexual * financial * emotional   Includes honour-based violence, Female Genital Mutilation (FGM) and forced marriage. Victims are not confined to one gender or ethnic group. |
| Human trafficking | Human trafficking is the recruitment, movement, harbouring or receiving of children, women or men through the use of force, coercion, abuse of vulnerability, deception or other means for the purpose of exploitation. British and foreign nationals can be trafficked into, around and out of the UK. |
| Modern slavery | Encompasses slavery, servitude, forced and compulsory labour and human trafficking. Traffickers and slave drivers coerce, deceive and force individuals against their will into a life of abuse, servitude and inhumane treatment. A large number of active organised crime groups are involved in modern slavery, but it is also committed by individual opportunistic perpetrators. |

# Declaration

[Name of club/group] is committed to reviewing policies and procedures regularly. We will review this guidance document **annually – or more frequently with significant updates to any laws/legislation that impacts this policy**

Signed: …………………………………………………………………………….

Name and position in group: …………………………………………………….

*(ideally Chairman – policy dependent)*

Date: ……………………………………………………………………………….

Date for Review: …………………………………………………………………..