

Freelearners Community Interest Company

Safeguarding and Child Protection Policy

October 2020

Freelearners CIC acknowledges the duty of care to safeguard and promote the welfare of children (def. any person under the age of 18) and is committed to ensuring that the organisation's safeguarding practice reflects statutory responsibilities (Children's Acts 1989 & 2004), government guidance (Oxfordshire Safeguarding Children Board Guidelines) and that it complies with best practice (Working Together to Safeguard Children 2015). This policy is written with Freelearners CIC's current activities in mind and is therefore fit for purpose.

The policy recognises that the welfare and interests of children 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, all children:

- feel comfortable and secure at all Freelearners CIC activities and services
- are protected from abuse whilst participating in activities organised under Freelearners CIC name
- feel able to talk to any Freelearners CIC staff or volunteers about harm of abuse they have experienced or fear they are in danger of experiencing elsewhere

Freelearners Co-operative Learning Resource Centre acknowledges that some children, including disabled children and young people or those from minority communities, or those with previous experiences, elevated dependency or special communication needs can be particularly vulnerable to abuse and we accept the responsibility to take reasonable and appropriate steps to ensure their welfare.

As part of our safeguarding policy Freelearners Co-operative Learning Resource Centre will:

- promote and prioritise the safety and wellbeing of children and young people
- work in partnership with children, their parents/carers and other agencies to ensure child welfare
- ensure everyone understands their roles and responsibilities in respect of safeguarding and is provided with appropriate learning opportunities to recognise, identify and respond to signs of abuse, neglect and other safeguarding concerns relating to children and young people

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- encourage a culture of listening where children can engage in dialogue with any staff member or volunteer and where their disclosures are believed and acted upon immediately
- ensure appropriate action is taken in the event of incidents/concerns of abuse and support provided to the individual/s who raise or disclose the concern
- ensure that confidential, detailed and accurate records of all safeguarding concerns are maintained and securely stored
- prevent the employment/deployment of unsuitable individuals
- ensure robust safeguarding arrangements and procedures are in operation.

The policy and procedures will be widely promoted and are mandatory for everyone involved in Freelearners CIC. Failure to comply with the policy and procedures will be addressed without delay and may ultimately result in dismissal/exclusion from the organisation.

Responsibilities

Freeleaners CIC delegates overall responsibility for safeguarding to Katie Palmer-Stevens as the Designated Safeguarding Lead.

The Designated Safeguarding Lead should ensure the board of directors receives necessary reports on safeguarding issues and may call a special meeting of the board where a safeguarding matter requires the board's urgent attention.

The Designated Safeguarding Lead is responsible for implementing arrangements for safeguarding the welfare of vulnerable individuals throughout the organisation.

The Designated Safeguarding Lead is responsible for dealing with all instances relating to safeguarding vulnerable individuals that arise at Freeleaners CIC activities or services. The safeguarding officer will respond to all safeguarding concerns and make appropriate referrals.

All staff and volunteers are responsible for taking the steps outlined in the following section, for reading and following the guidance and information provided in this document and its appendices, and for keeping the Designated Safeguarding Lead fully informed about any safeguarding concerns that arise during the course of their work with Freelearners CIC.

Guidelines for staff and volunteers

Introduction

All professionals have a responsibility to report concerns to Children's Social Care under Section 11 of the Children's Act 2004, if they believe or suspect that the child:

- Has suffered significant harm, or
- Is likely to suffer significant harm, or
- Has a disability, developmental and welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent) under the Children Act 1989, or
- Is a Child in Need whose development would be likely to be impaired without provision of service

Staff and volunteers must at all times show respect and understanding for individual's rights, safety and welfare, and conduct themselves in a way that reflects the ethos and principles of Freelearners CIC:

- Respect – Staff and volunteers are committed to treating all people they encounter in their role as a member of Freelearners CIC workforce with respect and dignity.
- Example – Staff and volunteers will behave in a manner in which we would wish others to follow, using appropriate language and respecting others' privacy.
- One-to-one contact – Staff and volunteers will not spend excessive amounts of time alone with children, away from other adults. Staff and volunteers should try to always be visible to others in their contact with children.
- Physical contact – Staff and volunteers should never engage in provocative or rough physical games, including horseplay, do things of a personal nature for a child capable of doing them for themselves, or allow or engage in inappropriate touching of any kind.

Confidentiality and information sharing

Any sharing of information should be necessary, proportionate, relevant, adequate, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.

Children have a right to confidentiality under Article 8 of the European Convention on Human Rights. It's important to respect the wishes of a child or any person who doesn't consent to share confidential information.

In those cases where a child is experiencing, or at risk of significant harm, sharing information is lawful even without consent.

All children in frequent contact with Freelearners services must be made aware of the above issues relating to information sharing and confidentiality.

Procedure if abuse is suspected:

- Observations, conversations or concerns must be recorded, signed and dated.
- The staff member/volunteer concerned about a child must contact the Designated Safeguarding Lead.
- The Designated Safeguarding Lead will assess the information and contact the Locality and Community Support Service (LCSS, Tel. 0345 241 2705) for advice.

Procedure if abuse is reported or alleged:

- 1) If a child/young person asks to speak to you about a problem, DO NOT promise confidentiality, but explain that it may be necessary to consult a senior colleague. Explain this as soon as possible to the child/young person.
- 2) RECEIVE – Stop and listen if someone wants to tell you about suspicions of abuse. Listen quietly and actively, giving your undivided attention. Allow silences when needed. Do not show shock or disbelief and take what is said seriously.
- 3) REASSURE – Stay calm and give reassurance to the child/young person. Explain to the child/young person that they have done the right thing by telling you and that what has happened is not their fault.
- 4) REACT – Establish the facts of what has happened but do not ask leading questions. Keep questioning open, e.g. 'Is there anything else you want to say?' or 'Can you tell me more about that?' Do not criticise the perpetrator. Explain to the child what you will do next, e.g. you will need to pass this information to your Designated Safeguarding Lead.
- 5) RECORD – If possible, make brief notes about what the child/young person is telling you as they are speaking. If this is not appropriate, write down what was said, as soon as the child has left. Record the date, time, place, your name and role and what was said, (rather than your interpretation of it). Use the child's/young person's language wherever possible. Note - In most cases it is more appropriate to listen and record immediately afterwards.
- 6) REPORT – Report the incident to your Designated Safeguarding Lead as soon as possible and do not tell any other adults or children/young people about it. Ensure that the lead person has your notes of what was said so that they can keep them in a safe place. If in any doubt what action should be taken, contact your Designated Safeguarding Lead. **If the matter is regarded as critical it should be referred to the Multi-agency Safeguarding Hub (MASH) immediately – Tel 0845 050 7666 / 0333 014 3325**

Take any immediate action to ensure security. If emergency medical attention is required, then either phone 999 or take the child to the nearest A&E. If a child is in immediate danger, contact the police, as they alone have the power to remove a child immediately if protection is necessary.

The matter must not be investigated or discussed with anyone outside of the organisation.

- Upon receiving the report of abuse, the Designated Safeguarding Lead will notify the board of directors immediately.
- The board of directors together with the Designated Safeguarding Lead will make a decision about whether to and which authorities to inform.
- In the event of a decision to inform authorities, the board of directors and Designated Safeguarding Lead will make every effort to get informed consent from the person who made the disclosure before informing authorities. The person who made the disclosure will also be made aware of who else the sensitive information has been shared with (board of directors & Designated Safeguarding Lead).

Protecting staff and volunteers

Freelearners CIC recognises the importance of protecting its leaders from possible allegations of abuse and recommends the following guidelines:

Staff/volunteers **should not:**

- Be alone with a child
- Transport children in a car/minibus or other vehicle without another adult present, unless agreed in advance safety measures are put in place
- Take children to their homes unless agreed in advance and safety measures are put in place
- Make inappropriate contact with children, i.e. develop relationships outside the organisation/organisation setting, including via personal social media websites such as Facebook
- Leave children unattended
- Leave adults who are not suitably trained; or adults not known to Freelearners Directors; or adults who have not had relevant DBS checks in sole charge of children
- Show favouritism to children within the organisation/group

Freelearners CIC recognises its duty of care to keep its employees and volunteers emotionally “safe”. It is important that all members of staff supporting children are able to discuss safeguarding concerns with the Designated Safeguarding Lead and with their line manager in regular supervision.

Allegations against staff/volunteers

If any allegation of harming a child is made or suspicions emerge regarding any member of staff/volunteer of the organisation, this should be reported to the Designated Safeguarding Lead.

The Designated Safeguarding Lead will contact the Local Authority Designated Officer (LADO) at Oxfordshire County Council on 01865 810603 or email LADO.safeguardingchildren@oxfordshire.gov.uk within 24 hours.

If an allegation concerns the Designated Safeguarding Lead, the report should be made to the first available director not implicated in the allegation, who will then contact (LADO).

If further action is required, the following procedure will apply during which all information relating to the allegation will remain confidential:

- A detailed factual record of the allegation and action taken to be written
- Information will be passed to the Board of Directors.
- Consideration will be given to the suspension of the person involved, taking account of the risks to other children and the member of staff/volunteer concerned

If the allegation involves a young person, contact will be made with the young person's parent/guardian to advise them of the process.

Whistleblowing

We recognise that children cannot be expected to raise concerns in an environment where members of staff fail to do so. All staff should be aware of their duty to raise concerns about dangerous or illegal activity, or any wrongdoing within their organisation.

Record keeping

Any records, information or confidential notes will be kept in separate files in a locked drawer or filing cabinet. Only designated persons will have access to these files.

Monitoring

The policy will be reviewed one year after development and then every three years, or in the following circumstances:

- changes in legislation and/or government guidance
- as required by the board.
- as a result of any other significant change or event.

This policy was agreed to by the Freelearners Board of Directors on: October 18, 2020

Next review date will be: October 2023

Appendices

- A. Further guidance on gathering information prior to referral to the Designated Safeguarding Lead**
- B. Guidance for Staff: How to identify potential abuse or risk of harm to a child**

APPENDIX A

Further guidance on gathering information prior to referral to the Designated Safeguarding Lead

The referrer should provide information about their concerns and any information they may have gathered prior to referral. They will be asked for the following:

- Full names, dates of birth and gender of all child/ren in the household;
- Family address and (where relevant) school / nursery attended;
- Identity of those with parental responsibility and any other significant adults who may be involved in caring for the child such as grandparents;
- Names and date of birth of all household members, if available;
- Ethnicity, first language and religion of children and parents;
- Any special needs of children or parents;
- Any significant/important recent or historical events/incidents;
- Cause for concern including details of any allegations, their sources, timing and location;
- Child's current location and emotional and physical condition;
- Whether the child needs immediate protection;
- Details of alleged perpetrator, if relevant;
- Referrer's relationship and knowledge of child and parents;
- Known involvement of other agencies / professionals (e.g. GP);
- Information regarding parental knowledge of, and agreement to, the referral;
- The child's views and wishes, if known.

Other information may be relevant and some information may not be available at the time of making the referral. However, the report should not be delayed, in order to collect information, if the delay may place the child at risk of significant harm.

Parents/carers must be informed about any referral unless to do so would place the child at an increased risk of harm.

APPENDIX B

Guidance for Staff: How to identify potential abuse or risk of harm to a child

The table below outlines the main categories of abuse as defined by the Department of Health 'Working Together to Safeguard Children' document 2015. (Full definitions can be found in this document). All staff should be aware that the possible indicators are not definitive and that some children may present these behaviours for reasons other than abuse.

Type of Abuse	Possible Indicators
<p>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:</p> <ul style="list-style-type: none"> • provide adequate food, clothing and shelter (including exclusion from home or abandonment); • protect a child from physical and emotional harm or danger; • ensure adequate supervision (including the use of inadequate care-givers); or • ensure access to appropriate medical care or treatment. <p>It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.</p>	<p>Signs that may indicate a child is living in a neglectful situation:</p> <ul style="list-style-type: none"> • excessive hunger • poor personal hygiene • frequent tiredness • inadequate clothing • frequent lateness or non-attendance at school • untreated medical problems • not brought • poor relationships with peers • compulsive stealing and scavenging • rocking, hair twisting and thumb sucking • running away • loss of weight or being constantly underweight (the same applies to weight gain, or being excessively overweight) • low self esteem • poor dental hygiene
<p>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 or carer fabricates the symptoms of, or deliberately induces illness in a child.</p>	<p>Signs that may indicate physical abuse:</p> <ul style="list-style-type: none"> • Physical signs that do not tally with the given account of occurrence, • conflicting or unrealistic explanations of causer • repeated injuries • delay in reporting or seeking medical advice.
<p>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.</p>	<p>Signs that may indicate sexual abuse:</p> <p>Changes in:</p> <ul style="list-style-type: none"> • Behaviour • Language • Social interaction • Physical wellbeing <p>It is almost important to recognise there may be no signs.</p>

<p>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.</p>	
<p>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.</p> <p>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.</p> <p>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.</p> <p>Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.</p>	<p>Signs that may indicate emotional abuse:</p> <ul style="list-style-type: none"> • Lack of self-confidence/esteem • Sudden speech disorders • Self-harming (including eating disorders) • Drug, alcohol, solvent abuse • Lack of empathy (including cruelty to animals) • Concerning interactions between parent/carer and the child (e.g. excessive criticism of the child or a lack of boundaries)
<p>Child Sexual Exploitation (CSE) Child sexual exploitation is a form of child sexual abuse.</p> <p>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,</p>	<p>Signs that may indicate CSE:</p> <ul style="list-style-type: none"> • Going missing from school/home/care placement • Associating with older people/adults • Isolation from family/friends/peer group • Physical symptoms including bruising/STI's • Substance misuse • Mental health

<p>and/or (b) for the financial advantage or increased status of the perpetrator or facilitator.</p> <p>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.</p>	<ul style="list-style-type: none"> • Unexplained possessions, goods and/or money <p>The indicators can be spotted when speaking to the young person themselves or family/friends. If a child or young person has made a disclosure regarding sexual exploitation, or if you think a child may be at risk of being sexually exploited please contact the Kingfisher Team on 01865 309196. Out of hours calls will divert to Thames Valley Police Referral Centre.</p>
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Other type of abuse you should be aware of

County Lines

County lines exploitation describes how gangs from large urban areas supply drugs to suburban and rural locations; using vulnerable children and young people to courier drugs and money.

Typically, gangs use mobile phone lines to facilitate drug orders and supply to users. They also use local property as a base; these often belong to a vulnerable adult and are obtained through force or coercion (this exploitation is sometimes referred to as ‘cuckooing’).

It also finds that the age of those involved is getting younger, with children as young as 12 being targeted. Gangs ‘recruit’ through deception, intimidation, violence, debt bondage and/or grooming into drug use and/or child sexual exploitation.

While there has been an increased awareness of the use of children and young people in county line markets, more needs to be done as it cuts across a number of issues such as drug dealing, violence, gangs, child sexual exploitation, safeguarding, modern slavery and missing persons.

Domestic Abuse

Defined as, “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 or emotional”.

Forced marriage

A forced marriage (FM) is a marriage conducted without the valid consent of one or both parties and where duress is a factor. Forced marriage is now a specific offence under s121 of the Anti-Social Behaviour, Crime and Policing Act 2014 that came into force on 16 June 2014.

FM is very different to an arranged marriage where both parties give consent.

Modern Slavery and Human Trafficking

Modern slavery can take many forms including the trafficking of people, forced labour, servitude and slavery. Victims can include adults and children and come from all walks of life and backgrounds. A quarter of all victims are children.

The Modern Slavery Act 2015 places a duty on specified public authorities to report details of suspected cases of modern slavery to the National Crime Agency.

Indicators of Modern Slavery can include:

- Lack of access to legal documents (e.g. passports)
- Appearance (malnourished, unkempt, etc)
- Untreated or unexplained injuries
- Attitude (withdrawn, frightened, unable to speak for themselves)
- Indebtedness or in a situation of dependence
- Frequent changes of location or restrictions on movement

Female Genital Mutilation

Female genital mutilation (FGM), sometimes referred to as female circumcision, refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK.

There are no health benefits to FGM, it is carried out for cultural and social reasons within families and communities. The procedure is traditionally carried out by an older woman with no medical training. Anaesthetics and antiseptic treatment are not generally used and the practice is usually carried out using basic tools such as knives, scissors, scalpels, pieces of glass and razor blades.

The Oxford Rose Clinic is a specialised clinic run at the John Radcliffe Hospital to address the health and safeguarding issues associated with FGM. Women should be referred to this clinic by emailing oxfordrose.clinic@nhs.net or calling 01865 222969.

Healthcare professionals have a duty to safeguard any children who may be at risk of FGM. Information about how to identify children at risk of FGM, including a screening tool and pathways are available on the Oxfordshire Safeguarding Children Board website

Self-Harm

Deliberate self-harm is intentional self-poisoning or injury, irrespective of the apparent purpose of the act, (www.nice.org.uk). Self-harm is an expression of personal distress, not an illness.

Self-harm can involve:

- Cutting, burning, biting
- Head banging and hitting
- Picking and scratching
- Pulling our hair
- Overdosing and self-poisoning
- Substance misuse
- Taking personal risk
- Self-neglect
- Disordered eating

Indicators of self-harm may include:

- Changes in eating/sleeping habits
- Increased isolation from

Prevent - Extremism

The Counter-Terrorism and Security Act 2015 places a safeguarding duty on settings to have “due regard to the need to prevent people from being drawn into terrorism”.

Settings subject to the Prevent Duty will be expected to demonstrate activity in the following areas:

- Assessing the risk of children being drawn into terrorism
- Demonstrate that they are protecting children and young people from being drawn into terrorism by having robust safeguarding policies.
- Ensure that their safeguarding arrangements take into account the policies and procedures of the Local Safeguarding Children Board.
- Make sure that staff have training that gives them the knowledge and confidence to identify children at risk of being drawn into terrorism, and to challenge extremist ideas which can be used to legitimise terrorism
- Ensure children are safe from terrorist and extremist material when accessing the internet in the setting

Preventing vulnerable adults and children from being drawn into extremism is a safeguarding concern. It is essential that frontline staff members are able to spot the signs and make a safeguarding referral.

Indicators may include:

- Withdrawing from usual activities
- Accessing extremist literature/websites
- Expressing ‘us and them’ thinking
- Expressing feelings of anger, grievance or injustice

To report concerns about child radicalisation:

1. Make safe – If emergency services are required – call 999. Take reasonable steps to ensure that there is no immediate danger.
2. Refer concern identified by member of the public or professional
3. Call MASH on 0333 014 3325