



# The BCHA Group

## Safeguarding Children and Young People

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## 1.0 Scope

- 1.1 This policy applies to
- All workers, volunteers, agents (e.g. contractors), board members and anyone working on BCHA's behalf
  - Applicants for employment or placement within the organisation
  - All children - anyone who has not yet reached their 18<sup>th</sup> birthday (and 'children' should be taken to mean 'children and young people' throughout)

BCHA provides services directly to children and families and therefore this policy has particular relevance within the following service areas:

Young Person's supported accommodation  
Women's Refuges  
Floating support to families or children  
Learning services  
Modern-Day Slavery Services

- 1.2 For the purposes of this policy "BCHA" will be taken to mean BCHA and any of its subsidiaries.
- 1.3 It outlines BCHA's **zero tolerance of abuse, neglect and radicalisation** and where individuals are able to bring complaints without fear or embarrassment

## 2.0 Policy Statement

- 2.1 This policy and procedure aims to ensure that all our colleagues are able to respond to any concerns in a consistent manner.
- 2.2 BCHA recognises that children and young people may be the victims of neglect or physical, sexual, emotional, financial abuse or discriminatory abuse or radicalisation. Accordingly, this policy sets out guidelines particularly relating to the following areas:
- Concerns about welfare
  - Recognising and Responding to abuse
  - Recognising and responding to radicalisation with reference to the Prevent strategy
  - Appointment of staff and volunteers
  - Support and Supervision of Staff
  - Helping victims of abuse
  - Dealing with perpetrators of abuse
- 2.3 In meeting the standards that our regulators, commissioners and customers expect this policy is developed in line with:
- Working Together to Safeguard Children (2018)

- The Children and Social Work Act (2017)
- The Children’s Act (1989) & (2004)
- Protecting Children from Radicalisation – The Prevent Duty
- Serious Violence Strategy (April 2018 Home Office)

## 3.0 Definitions

- 3.1 **Children** - Anyone who has not yet reached their 18<sup>th</sup> birthday. Reference will also be made to “**young people**” which for the purposes of this policy includes those aged between 16 and 18. A separate policy - Safeguarding ‘at risk’ adults (313) - relates to persons over the age of 18. The fact that a child is 16, living independently or in the armed forces does not change their status or entitlement to protection
- 3.2 **Safeguarding and Promoting the Welfare of Children** is defined as
- protecting children from maltreatment
  - preventing impairment to their health or development
  - ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
  - taking action to enable all children to have the best outcomes
- 3.3 **Child Protection** - part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.
- 3.4 **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
- 3.5 **Types of Abuse** - and the context in which they occur are laid out in Appendix 1 and, for the purposes of this policy covers physical, emotional, financial, discriminatory, sexual abuse, child sexual exploitation and neglect and extremism.
- 3.6 **“Significant Harm”** - in this context includes ill treatment, an avoidable deterioration of health or an impairment of social, emotional, physical, intellectual or behavioural development. Significant harm is the threshold for external intervention.

## 4.0 Statutory Child Protection Frameworks

- 4.1 The Children’s Act 2004 strengthens the 1989 Act (which provides the legal framework for child protection in England), and encourages partnerships between agencies and creates more accountability. It places a duty on local authorities and their partners (including the police, health service providers, and the youth justice system) to cooperate in promoting the wellbeing of children and young people and to make arrangements to safeguard and promote the welfare of children.

- 4.2 As a provider of services to children and young people, BCHA is responsible for implementing the Inter-agency Child Protection procedures for areas in which we work. These procedures lay down the statutory responsibilities of local authorities and other agencies to ensure the protection of children from abuse. BCHA policy will be compliant with the local Inter-agency procedures.
- 4.3 BCHA will work with local statutory agencies to respond to individual cases of abuse or neglect which may include attendance at Child Protection Planning Meetings or Multi-Agency Risk Assessment Conferences (MARAC's) for households affected by domestic violence. Attendance at such meetings or the submission of written reports by BCHA staff will be compulsory, if required by the convening agency.
- 4.4 BCHA will aim to work strategically with Local Safeguarding Children Partnerships (LSCPs), their working groups and relevant statutory agencies to develop systems to strengthen the protection of children from abuse and neglect.
- 4.5 All teams working with children will have a copy of their local child Protection/ safeguarding children procedures for reference by staff either in hard copy or electronic format.
- 4.6 **Prevent** is part of the current UK Government's counter terrorism strategy. Its aim is to stop people becoming terrorists, supporting terrorism or getting drawn towards violent extremism.
- All organisations providing health funded, local authority funded, education, prisons, police and probation services are required, through the national contract, to adhere to the requirements of the Prevent strategy.**
- 4.7 This includes the training of all relevant front line staff in the responsibilities of Prevent as well as introducing and embedding processes to identify and protect those who may be at risk of radicalisation as well as escalating concerns regarding potential terrorist events to the Police.
- 4.8 BCHA will follow the guidelines of Prevent through raising staff awareness of the Prevent agenda through training and identifying and responding to potential cases of radicalisation.

## 5.0 Risk Assessments

- 5.1 Managers will assess their services annually with a view to ensuring that any general risks of abuse or radicalisation to customers are identified and managed
- 5.2 The potential for committing or being vulnerable to abuse or radicalisation will be considered in each assessment or review of every customer's needs.
- 5.3 Risk assessments must be clearly signed and dated and kept on file at the scheme and also shared with the Head of Quality and Safeguarding.

## 6.0 Concerns about welfare

- 6.1 In some cases, staff may be concerned about the vulnerability, welfare or well-being of children they work with which is not connected to suspected abuse or neglect. In this instance, the worker should report the concern to their **line manager** straight away in accordance with the procedure in appendix 6.
- 6.2 BCHA will participate in supporting the assessment activity undertaken by the local authority to address concerns as identified above i.e. Early Help Assessment or Common Assessment Framework
- 6.3 Staff should be particularly alert to the following circumstances where a child is likely to need help from agencies:
- A child has a disability
  - A child has additional educational needs
  - A child is a carer
  - A child is engaged in anti-social behaviour or criminal activity
  - The child's family presents with substance misuse, child or adult mental health issues, or domestic violence
  - The child is showing early signs of abuse or neglect in their family setting

## 7.0 Recognising & responding to abuse & radicalisation

- 7.1 All staff who come into contact with children in the course of their work activities or as a result of them, have a duty to:
- Respect professional boundaries at all times
  - Be alert to the risk of abuse or neglect by others (Appendix 5 lists potential indicators of abuse and radicalisation)
  - **Act immediately and in accordance with this policy** if they suspect or become aware of or are told about colleagues or others engaging in or being complicit in abuse or neglect, or radicalisation.
  - **Act immediately and in accordance with this policy** if a child or young person discloses abuse or radicalisation
  - **Use the Whistleblowing Policy** if they believe there would be a failure to act or cover up if concerns were dealt with through line management.
- 7.2 The procedures to follow once staff become aware of or suspect abuse or radicalisation are to be found in Appendix 6a, 7 (reporting), Appendix 8 (supporting children and young people who have been abused) and Appendix 9 (dealing with perpetrators).

### 7.3 Informing Customers

Customers (whether they are children or parents) will be informed of their right to report things they are not happy with. They will also be informed that they may contact other agencies such as Social Care Services. Such information will be included in the induction pack for new customers and in leaflet and other forms.

## 8.0 Appointment of staff and volunteers

- 8.1 The recruitment of staff/volunteers will, in all cases, comply with the Recruitment & Selection Policy (601).
- 8.2 As a provider of services to children, certain roles within BCHA are exempt from the Rehabilitation of Offenders Act 1974, as amended, to the effect that all convictions, whether spent or unspent, must be disclosed at the time of application for employment
- 8.3 Wherever possible the Interview and selection processes for work with children must involve an experienced worker from the service concerned.
- 8.4 Interviews should particularly cover discussion of all previous work with children (however indirect) and specific questions will be asked about the candidate's attitudes towards boundaries and safeguarding. The interviewer will ensure gaps in employment history are clearly explained by the candidate. (including, for example, if a candidate had more than one role at the same period of time).
- 8.5 The Safeguarding Vulnerable Groups Act 2006 provides the legislative framework for the Disclosure and Barring scheme, which applies to any individual working with children and adults at risk in a regulated or controlled activity. Volunteers are classified as 'workers' in this context.
- 8.6 All prospective employees who work with children as above will be required to undergo a Disclosure and Barring Service (DBS) check once an offer of employment has been made.
- 8.7 Owing to delays in obtaining DBS checks, new staff may commence their duties pending the check coming through. However, staff employed in this way **MUST** only work **shadow shifts** although in some circumstances this may be waived (see s.8: Employing People with Criminal Records Policy).
- 8.8 Where a criminal record comes to light, Human Resources will discuss the issue with the Line Manager or a more senior manager, as appropriate, with a view to risk assessing the person for the duties in question. Applicants who are deemed to pose an unacceptable risk to customers in the light of a risk assessment OR DBS check will not be employed and will be advised of the reasons for this decision.
- 8.9 Requests for references must clearly state that the organisation is considering an individual for work with children and at least one referee should be sought regarding previous work with children/young people.

**8.10 Recruiting Workers from abroad** - workers spending over 3 months working abroad during the last 5 years

Workers from abroad or candidates who have spent over 3 months working abroad during the last 5 years should not be recruited to work with children without a police check and/or formal enquiries with relevant foreign agencies. However, as such checks may not always be practicable, verifiable or as thorough as in the UK, extra supervisory arrangements for the duration of the probationary period must be considered if it is decided to appoint.

## **9.0 Support & supervision of staff and volunteers**

- 9.1 All staff and volunteers will be given a clear, written description of the duties they are expected to undertake, especially with customers and/or their children.
- 9.2 Line Managers will explain to staff and volunteers the contents of this policy and related documents such as the Professional Boundaries Policy and Staff Code of Conduct and how these apply to the individual's work with children.
- 9.3 It is the line manager's responsibility to use the supervision process to prevent or detect abuse by:
- Ensuring new staff are appropriately supervised or shadowed by experienced workers
  - Being aware of exceptionally good treatment of children as well as signs of ill treatment by staff
  - Observing and evaluating an individual at work especially in one to one sessions with customers
  - Talking with an individual's colleagues about their work with customers
  - Talking with customers themselves about the key-working or support they are receiving or where there are suspicions of potential abuse taking place
  - Discussing child protection and boundaries issues at appropriate intervals and ensure actual practice conforms to the policy
  - Ensuring staff clearly understand their roles and responsibilities
  - Identifying training and development needs for more effective working
  - Ensuring staffing levels are adequate for the service
- 9.4 Line Managers will take responsibility for minimising unplanned one to one contact with children and young people i.e. ensuring there are transparent arrangements to show when, where and with whom key-working etc is taking place.
- 9.5 Line Managers must promptly act upon any breach of professional boundaries or suspicions about potential abuse.
- 9.6 Volunteers must not be engaged in lone working situations unless deemed by the Team Manager to be fully competent to do so.

## 10.0 Training & development of staff & volunteers

- 10.1 BCHA is committed to an on-going training programme for all workers that will include raising awareness of child protection, radicalisation and related issues:
- At induction
  - As part of Staff Supervision and/or Development Interviews
  - As a result of changes in the law or practices of child care authorities
  - When the Safeguarding Children policy and procedures change
- 10.2 All front line staff and those who may come into regular contact with customers or their children (e.g. maintenance staff) will undergo mandatory safeguarding awareness training and radicalisation training as part of their induction. Staff will be expected to undergo refresher training at least every three years although this may be more frequent where the nature of the service requires this.

## 11.0 Professional Boundaries

- 11.1 The guidelines contained in the Professional Boundaries Policy (610) will apply when working with young people and children, although the following points should be noted:
- Children and young people with additional needs are particularly vulnerable to abuse. They may require more help with personal needs such as washing, dressing, toileting, feeding, mobility etc, may have limited understanding and communication abilities and may be particularly demanding in relation to cuddles or sitting on a carer's lap.
  - Children with sensory loss may be more reliant on physical contact for communication
  - It is unacceptable for those in a position of trust to engage in any behaviour with children over the legal age of consent which may allow a sexual relationship to develop whilst the relationship of trust continues
- 11.2 Children are entitled to privacy to ensure personal dignity and are entitled to determine the degree of physical contact with others except in exceptional circumstances i.e. when they need medical attention.
- 11.3 Team members should take responsibility for monitoring one another in relation to physical contact and other boundaries issues with customers. **Staff have the responsibility to constructively challenge or report a colleague**, if necessary.

## 12.0 Confidentiality

- 12.1 Staff suspicious or aware of abuse must tell other staff on a **need to know basis** only and in line with Appendix 7, section 3.3.
- 12.2 Staff must respect the confidentiality of customers wherever possible. The consent of young people aged 16 or over must be obtained before any action is taken (including referral to another agency) but see 12.4 below.
- 12.3 For children under 16, parental consent should be obtained before any action is taken, subject to 12.4 below. However, children under 16 may seek advice or treatment in relation to sexual health issues without parental consent.
- 12.4 Where it is believed that there is a significant risk of harm to the customer or other customers in not reporting concerns to the authorities, customer confidentiality may be lawfully breached although it may be advisable to first discuss potential concerns with HR or the Head of Quality and Safeguarding who may also consult the Head of Strategy and Governance. Legal advice may be required.
- 12.5 All documentation must be marked confidential and kept in a secure place. Further information is contained in the Data Protection Policy (900)

## 13.0 Health & Safety

- 13.1 As with all services, BCHA has a legal duty to ensure the health, safety and welfare of customers, staff and volunteers as well as of children (who generally have a low awareness of their own and other people's safety).
- 13.2 It is the policy of BCHA to undertake regular risk assessments of its premises and working practices. These will cover general safety issues which relate to any buildings from which services are provided.
- 13.3 Specific issues to be considered as part of the overall risk assessment and control process and include:
  - The proper supervision of activities
  - Safety of the building – for example the prevention of accidents
  - Play areas, where provided, are in a safe and serviceable condition
  - Premises where children play outside are adequately fenced
  - Buildings are secure from entry by strangers
  - Security lighting and other systems are in good order
- 13.4 Wherever possible, children/young people should be involved in risk assessments

## 14.0 Visitors

### 14.1 Approved Contractors

BCHA expects that all contractors engaged adhere to the Contractors' Code. They MUST:

- Undergo DBS checks for all operatives either through the employer or through the organisation
- Carry ID at all times
- Behave professionally by observing appropriate boundaries
- Work in a manner that does not cause risk of harm to customers or children
- Not enter premises to inspect them or undertake repairs etc unless the tenant, licence holder, a member of staff or another responsible adult is there

In terms of supported housing with on-site staffing, contractors should be supervised or monitored by scheme staff whilst on site or, for unstaffed schemes, residents should be notified when workmen are due to attend to do repairs.

Contractors or the individual employees of contractors who fail to observe the Contractors' Code or other child protection requirements will be barred from working for the organisation.

### 14.2 Staff, Board Members & Visitors from other organisations

Staff from Head Office or other schemes, Board members or other official visitors to the scheme will be accompanied at all times whilst on site and must not be allowed to meet children alone in private.

### 14.3 Personal Visitors to schemes where staff are based

Each supported housing service will implement a Visitor Policy which will set out the arrangements for residents to receive visitors (although in some services, such as Refuges or schemes supporting victims of Human Trafficking, visitors may be prohibited in order to ensure the safety and security of residents). Such policies will take into account the need to safeguard all people resident in the scheme.

Staff may refuse admission to a scheme where unsure of the identity of the visitor or if the behaviour of the visitor is or has been a risk to others

### 14.4 Unauthorised Visitors

Managers should be alert to the risk of unauthorised visitors and should ensure premises are secure from unauthorised entry. This may include considering means of access other than entrance – for example communal windows.

## 15.0 Service Delivery

### 15.1 Provision of Accommodation

Children should never be allocated shared accommodation unless it is specifically for their age group. Care must be exercised when allocating self-contained accommodation especially where a child may be more vulnerable than their peers.

Adults known to be a risk to children (for example because they are Sex Offenders or have physically harmed children) will be allocated accommodation:

- Away from schools or other community sites where children have to congregate (as far as is practicable)
- With Support arrangements in partnership with other agencies to minimise risk
- Which does not include shared accommodation with persons under the age of 18.

Children/Young People who are a risk to other children must be thoroughly risk assessed prior to allocation in shared housing schemes.

### 15.2 Key-working & Child Support

Key working should always be planned and must always take place with the knowledge of the team manager or project leader. Managers should ensure keyworkers are allocated to customers appropriately and, from time to time, should sit in on key-working sessions as observers and audit case records.

Whilst key working is a private activity it must always take place in appropriate and specifically designated places – for example an office with windows. Key-working must not take place in bedrooms or other inappropriate locations unless in exceptional circumstances and with the express approval of the scheme manager. Boundaries are particularly important to observe during key-working.

### 15.3 Home Visits in the Community

BCHA Staff may need to visit children and their families at home from time to time. The following guidelines for under 16's should be observed:

- Staff must never go into a child's home if a parent is absent
- If the parent/carer is absent, some means of identification/explanation for the visit should be left
- A record of the visit, noting date and purpose, must be kept in the customer's file
- ID badges will be carried and displayed by staff

Visiting children aged 16-18 may be undertaken without a parent being present BUT interviews etc must take place in an appropriate setting (not bedrooms). Where there is a need for privacy, other venues (for example BCHA offices) must be considered.

## 15.4 Entry to Bedrooms in BCHA schemes

In family/young persons' accommodation schemes, the following guidance must be observed by staff:

- Staff must knock and be invited to open the door
- Staff should not go into the room but should stand at or near the doorway
- Staff should go out of the room and close the door if the young person is in bed or undressed
- Where entry is needed in an emergency or where a breach of licence or other conditions is suspected, **two** staff should be present

In supported housing, restrictions on residents going into each other's rooms or on receiving visitors in bedrooms may be imposed by the senior practitioner for the security of the scheme or for the protection of its residents.

## 15.5 Entry to Bathrooms & WC's

Staff will not go into communal bathing or toileting facilities when in use, unless in an emergency or where a breach of licence conditions is suspected, in which case two staff should be present. Cleaning of these areas must be undertaken at clearly established and appropriate times with signage to indicate that cleaning is taking place. .

# 16.0 Activities

## 16.1 Transporting Children

The following guidelines must be followed:

- If a child is under 16 the parent or person with parental responsibility needs to be present (unless is an emergency situation)
- Staff should not transport children unless it is a requirement of the contract
- Managers will limit the transportation of children to particular workers wherever possible
- At collection or dropping off points children under 16 must be collected by an appropriate adult
- Managers will assess whether more than one worker is required to be present
- Appropriate child/car seating must be used which meets current industry standards

## 16.2 Peer Group Activities

It should be borne in mind that young people under the age of 18 may sometimes be the perpetrators of abuse.

All youth activities on BCHA premises should be overseen by **named workers or volunteers**. Whilst activities for groups of age 16+ may be led and run by customers, adult staff or volunteers should be **readily** available, i.e. in the same building. In addition, staff should contribute to any risk assessment, planning and review of events.

### 16.3 Crèches

Staff who run crèches for pre-school children at their scheme must be appropriately qualified and adult to child ratios must follow prevailing Government guidance at all times.

### 16.4 Off-site Activities

These include swimming trips, excursions, social activities, holidays etc. In all cases:

- The activity must be authorised by Senior Practitioner /Manager or Child Support Worker
- The manager must risk assess the activity concerned to determine any potential problems and what arrangements can minimise the risks involved. Risk Assessments must be documented and retained for future audit
- There should be adequate insurance cover against personal injury etc either on the part of BCHA or the centre where the activity is taking place
- Parental or guardian's consent should be obtained as appropriate
- The activity must be properly planned, particularly with regard to:
  - The appointment of the group leader
  - Appropriate staff to young person ratios
  - Accident prevention and First Aid arrangements
  - Sleeping, dressing, toileting and bathing arrangements, where appropriate
  - Maintaining a (daily) log
  - Details of abilities, disabilities and medical needs in connection with the proposed activity
  - Where catering is provided by staff, they hold appropriate food hygiene qualifications.
  - Security arrangements, where appropriate
  - Storage of valuables, where appropriate
  - Dealing with disruptive behaviour and other incidents

### 16.5 Use of the Internet

Where internet access is provided at schemes through BCHA equipment, this will be routed automatically through BCHA filters to block access to inappropriate sites. However, this is not a failsafe system and where staff become aware that access to an inappropriate site has occurred, the IT department must be alerted as soon as possible. Internet access on customers' own equipment will not be blocked.

Children and young people should be made aware of: exposure to inappropriate information (pornographic sites, viruses etc) and exposure to inappropriate interaction

(chat rooms, grooming, receiving unsolicited or offensive material or giving too much information to strangers). Guidance is listed in appendix 12.

Illegal internet sites should be reported to the Internet Watch Foundation (+44 (0)1223 20 30 30 or [www.iwf.org.uk](http://www.iwf.org.uk)) and child pornography should be reported to the Police Child Pornography Information Line on 0800 100 0040 or [www.met.police.uk](http://www.met.police.uk).

## 16.6 Child Pornography

Where staff become aware that any customer or colleague is in possession of pornographic material which involves children or is accessing such pornographic material via the internet, this must be reported to the police via either their Business Manager or senior line manager. The Head of Quality and Safeguarding must be informed. If the person is a staff member HR must also be informed.

**Participation in the production of child pornography and/or viewing it must be dealt with as sexual abuse.** Duties of confidentiality will not apply in these instances.

## 17.0 Financial Matters

- 17.1 In cases where a child/young person is a customer in their own right, reference should be made to the Professional Boundaries Policy, Financial Affairs of Customers Policy, Staff Code of Conduct and receipting and banking procedures in regard to all financial matters. All transactions and handling of money or property must be logged, receipted and countersigned by the customer. Staff should NOT hold valuables or cash in safekeeping unless there is an exceptional need to do so and this has been agreed with line management and forms part of the person's Support Plan.

## 18.0 Use of Images for publicity purposes

- 18.1 The written consent of parents, carers or guardians must be obtained before using photographs of young people under the age of 16. The written consent of young people aged 16 or over is required before using their photographs in publicity material.
- 18.2 Children and young people under the age of 18 should not be identified by surname, address or other personal details (including contact information) in any BCHA published material or on websites.
- 18.3 A Customer image consent form must be completed (see appendix 17 )

## 19.0 Notification of serious incidents

- 19.1 Under the Serious Incidents Policy, cases of abuse, neglect or exploitation at schemes are classed as "serious incidents." However, on account of the necessity to limit the "need to know" whilst allegations, disclosures or concerns are investigated, the details

of cases of abuse or neglect should not be reported to the rest of the management team or the Board until the investigations are completed or at such a time as deemed appropriate by the investigator.

## 20.0 Monitoring and review

20.1 The Head of Quality and Safeguarding will establish and lead a Quality/Safeguarding group which will meet at least twice a year to:

- Review internal processes to ensure that there are robust controls in place to minimise the risk of abuse and radicalisation and respond properly to safeguarding incidents.
- Review organisational policy (a report will be presented to the Board annually)
- Ensure staff awareness of safeguarding is maintained to an appropriate level

## 21.0 Policy References

POLICY	PGN
Code of Conduct for Board and Committee Members	132
Data Protection Policy	900
Disciplinary and Dismissal Policy & Procedure	604
Domestic Violence	856
Employing People with Criminal Records	611
Equalities & Diversity	880
Financial Affairs of Service users	314
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Health & Safety	701
Professional Boundaries	610
Recruitment and Selection	601
Safeguarding 'At Risk' Adults	313
Serious Incidents	851
Service Users & Prescribed Medication	310
Staff Code of Conduct	133
Volunteers	608
Raising Concern - Whistleblowing	135

- Working Together to Safeguard Children 2018 Reference DFE-00195-2018
- Prevent Duty Guidance 2019 <https://www.gov.uk/government/publications/prevent-duty-guidance/revised-prevent-duty-guidance-for-england-and-wales>
- The Children Act 1989
- The Children Act 2004
- Multi-agency statutory guidance on female genital mutilation (2016)

**This policy is originally based on a model child protection policy supplied by the Churches Child Protection Advisory Service. A copy of the BCHA policy was filed with CCPAS by email on 1 December 2003. This policy must not be copied by others without the written agreement of CCPAS**

## APPENDIX 1: Definitions

*The definitions of child abuse given below come from the Government's "Working Together to Safeguard Children (2018)" guidance:*

### **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.

### **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.

### **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.

### **Sexual Abuse**

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

### **Child Sexual Exploitation**

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (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.

**NB** In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Sexual exploitation results in children and young people suffering harm, and causes significant damage to their physical and mental health. Some young people may be supported to recover whilst others may suffer serious life-long impairments which may, on occasion, lead to their death, for example through suicide or murder.

### **Neglect**

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

### **Extremism**

Extremism goes beyond terrorism and includes people who target the vulnerable – including the young – by seeking to sow division between communities on the basis of race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society. Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist.

*From the Multi-agency statutory guidance on female genital mutilation (2016)*

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/800306/6-1914-HO-Multi\\_Agency\\_Statutory\\_Guidance.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/800306/6-1914-HO-Multi_Agency_Statutory_Guidance.pdf)

### **Female Genital Mutilation (FGM)**

FGM is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/or death. The age at which FGM is carried out varies enormously according to the community. The procedure may be carried out shortly after birth, during childhood or adolescence, just before marriage or during a woman's first pregnancy.

FGM is not an issue where action or intervention can be determined by personal preference – it is an illegal, extremely harmful practice and a form of child abuse and violence against women and girls. Fears of being branded ‘racist’ or ‘discriminatory’ should not weaken the protection that professionals provide.

From Unseen <https://www.unseenuk.org/modern-slavery/human-trafficking>

### Human Trafficking

Human Trafficking is the movement of people by means such as force, fraud, coercion or deception, with the aim of exploiting them. It is a form of modern slavery.

Trafficking involves the transportation of people in the UK in order to exploit them by the use of force, violence, deception, intimidation or coercion. This exploitation includes commercial, sexual and bonded labour. Trafficked people have little choice in what happens to them and often suffer abuse due to violence and threats made against them or their families. In effect, they become commodities owned by traffickers, used for profit.

These three elements all form part of trafficking:

- The act: recruiting, transportation, transfer, harbouring or receipt of persons
- The means: force, fraud, coercion, deception
- The purpose: exploitation.

Human trafficking is a crime. It does not always involve international transportation. Victims include those transported around the UK into exploitative situations, those born into servitude, or those who escape a trafficker before being exploited. It also includes anyone who once consented to work for a trafficker or slave master or participated in a crime as a direct result of being enslaved.

From NSPCC <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-trafficking/#what-is>

### Child Trafficking – (applies to child or young person up to age of 18)

Trafficking is where children and young people are tricked, forced or persuaded to leave their homes and are moved or transported and then exploited, forced to work or sold. Children are trafficked for:

- sexual exploitation
- benefit fraud
- forced marriage
- domestic slavery like cleaning, cooking and childcare
- forced labour in factories or agriculture
- committing crimes, like begging, theft, working on cannabis farms or moving drugs.

Trafficked children experience many types of abuse and neglect. Traffickers use physical, sexual and emotional abuse as a form of control. Children and young people are also likely to be physically and emotionally neglected and may be sexually exploited.

Traffickers often groom children, families and communities to gain their trust. They may also threaten families with violence or threats. Traffickers often promise children and families that they will have a better future elsewhere.

Trafficking is also an economic crime. Traffickers may ask families for money for providing documents or transport and they'll make a profit from money a child "earns" through exploitation, forced labour or crime. They will often be told this money is to pay off a debt they or their family "owe" to the traffickers.

Traffickers may:

- work alone or in small groups, recruiting a small number of children, often from areas they know and live in
- be medium-sized groups who recruit, move and exploit children and young people on a small scale
- be large criminal networks that operate internationally with high-level corruption, money laundering and a large numbers of victims.

Any workers who have concerns that a child may be at risk of trafficking must inform social care

From NSPCC <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/gangs-criminal-exploitation/>

## Gang

The word 'gang' means different things in different contexts. The government in its paper 'Safeguarding children and young people who may be affected by gang activity' distinguishes between peer groups, street gangs and organised criminal gangs.<sup>1</sup>

- Peer group  
A relatively small and transient social grouping which may or may not describe themselves as a gang depending on the context.
- Street gang  
"Groups of young people who see themselves (and are seen by others) as a discernible group for whom crime and violence is integral to the group's identity."
- Organised criminal gangs  
"A group of individuals for whom involvement in crime is for personal gain (financial or otherwise). For most crime is their 'occupation.' "

It is not illegal for a young person to be in a gang – there are different types of 'gang' and not every 'gang' is criminal or dangerous. However, gang membership can be linked to illegal activity, particularly organised criminal gangs involved in trafficking, drug dealing and violent crime

Any individual who has concerns that a child may be at risk of harm as a consequence of gang activity (either through their participation in activity or as a victim) should follow the guidance set out in this policy, sections 6 and appendix 7 & 8.

## Organised Abuse

Organised or multiple abuse may be defined as abuse involving one or more abuser and a number of related or non-related abused children and young people. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse. Organised and multiple abuse occur both as part of a network of abuse across a family or community, and within institutions such as residential homes or schools.

## Domestic Abuse

Please refer to Domestic Abuse policy (856) 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

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

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

*\*This definition includes so called ‘honour’ based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.*

Domestic abuse may also include close family relationships such as Father/Daughter, Brother/Sister, Mother/Daughter and elder abuse. In these situations, the organisation’s Safeguarding Policies will normally apply.

NB Children themselves may be in abusive and controlling relationships. Domestic abuse can occur in any relationship.

If a child witnesses domestic abuse or lives in an environment where domestic abuse is a feature this should be shared with children’s services as a safeguarding referral.

## **Abuse of Trust**

Any adult who is in a position of authority or trust with a vulnerable adult or young person over the age of 16 (ordinarily the age of legal consent) and subsequently enters in a sexual relationship or engages in sexual activity with them, is abusing their trust. This is a criminal offence.

## **Financial & Material Abuse**

This is more likely to occur with young people over the age of 16 who are in a position to have an income or funds they have their own control of. Financial abuse is defined as fraud, theft, unwarranted confiscation or misuse of the person's goods or monies, blackmail, extortion or coercion.

## **Discriminatory Abuse**

Discriminatory abuse includes slurs or harassment on the grounds of race, gender, disability, sexual preference, age or other similar characteristic.

## **Bullying**

Children and young people may be at risk of bullying from their peers or others. This would include physical, discriminatory and emotional abuse (see above).

Revised Prevent duty guidance: for England and Wales April 2019

From revised Prevent Duty Guidance [www.gov.uk/government/publications/prevent-duty-guidance/revised-prevent-duty-guidance-for-england-and-wales](http://www.gov.uk/government/publications/prevent-duty-guidance/revised-prevent-duty-guidance-for-england-and-wales)

## **Extremism / Radicalisation – PREVENT Duty**

The Prevent strategy, published by the Government in 2011, is part of the overall counter-terrorism strategy, CONTEST. The aim of the Prevent strategy is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism. In the Act this has simply been expressed as the need to “prevent people from being drawn into terrorism”.

The 2011 Prevent strategy has three specific strategic objectives:

- respond to the ideological challenge of terrorism and the threat we face from those who promote it
- prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support
- work with sectors and institutions where there are risks of radicalisation that we need to address.

Terrorist groups often draw on extremist ideology, developed by extremist organisations. Some people who join terrorist groups have previously been members of extremist organisations and have been radicalised by them. The Government has defined extremism in the Prevent strategy as: “vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces”.

The Prevent strategy was explicitly changed in 2011 to deal with all forms of terrorism and with non-violent extremism, which can create an atmosphere conducive to terrorism and can popularise views which terrorists then exploit. It also made clear that preventing people becoming terrorists or supporting terrorism requires challenge to extremist ideas where they are used to legitimise terrorism and are shared by terrorist groups. The strategy also means intervening to stop people moving from extremist (albeit legal) groups into terrorist-related activity.

**NB** There is no single way of identifying who is likely to be vulnerable to being drawn into terrorism. Factors that may have a bearing on someone becoming vulnerable may include: peer pressure, influence from other people or via the internet, bullying, crime against them or their involvement in crime, anti-social behaviour, family tensions, race/hate crime, lack of self-esteem or identity, and personal or political grievances.

Any individual who has concerns that a child may be at risk of harm as a consequence of radicalisation (either through their participation in activity or as a victim) should follow the guidance set out in this policy: section 6, and appendices 6a, 7 & 8.

## APPENDIX 2: Useful contact numbers

<b>National Advice</b>	<b>Daytime</b>	<b>Out of Hours</b>
NSPCC Helpline (adults callers only)	0808 800 5000	24 hours
Childline Helpline (children callers only)	0800 1111	24 hours
Kidscape Advisory Service	020 7730 3300	N/a
Police	Non emergencies 101	Emergencies 999
Anti-terrorist hotline	0800 789 321	
Crimestoppers	0800 555 111	
<b>Children Services Offices</b>	<b>Daytime</b>	<b>Out of Hours</b>
BCP Multi Agency Safeguarding Hub	01202 735045	01202 738256
Dorset Children's Advice and Duty Services (single point of contact for safeguarding concerns)	01305 228866	
Somerset Children's Social Care	0845 345 91122	24 hours
Devon Safeguarding Hub (Multi Agency Safeguarding Hub)	0345 155 1071	0345 600 0388
Wiltshire Multi Agency Safeguarding Hub	0300 4560 108	0300 456 0100

**BCHA's Head of Quality and Safeguarding is Collette Puntis**

**Contact details:**

**Mobile:** 07464496503 | **DDI:** 01202 410617 **EXT:** 450

## **APPENDIX 3: Location of Intranet & Serious Incident database**

The BCHA intranet Safeguarding page: <https://hyped.sharepoint.com/sites/Safeguarding>

The Serious Incidents Database is placed on all PCs via a shortcut entitled "Serious Incidents Database USER mdb" in the Applications folder

The Disclosure of Abuse form is downloadable from the Serious Incidents Database

## APPENDIX 4: How to respond to a child wanting to talk about abuse

It is important to know what to do if someone wishes to talk about abuse. Please be aware that you are not expected to deal with complex issues or a person's emotional trauma yourself. Your job, in the first instance, is to listen to, protect and support the person and then to tell someone else as in Appendix 6, Section 3. The person you tell will decide what to do next.

### DO

- Keep calm and try not to show shock
- Be sympathetic
- Listen carefully
- Treat the information seriously
- Clarify with open questions, *but don't lead*
- Tell the child/young person you will need to let someone else know – don't promise confidentiality
- Be aware that the child/young person may have been threatened or bribed not to tell
- Never push for information. If the child/young person decides not to tell you after all, then accept that and let them know that you are always ready to listen.
- Protect the person from further harm

### DON'T

- Stop someone telling you what has happened (they may never tell someone again)
- Press them for more details
- Be judgemental
- Promise to keep secrets
- Tell anyone else who does not have a legitimate need to know
- Contact the alleged perpetrator
- Try to cover up or contain the facts to protect the abuser, the family or the scheme
- Make promises you cannot keep

### HELPFUL THINGS YOU MAY SAY OR SHOW

- I believe you
- Thank you for telling me
- It's not your fault
- I will help you

### DON'T SAY

- Why didn't you tell anyone before?
- Are you sure this is true?
- "I am shocked, don't tell anyone else"

### CONCLUDING

- Again reassure the child/young person that they were right to tell you and show acceptance

- Let the child/young person know what you are going to do next and that you will let them know what happens (you might have to consider referring to Social Services or the Police if you think they are at risk of further abuse)
- Follow the 4 step procedure outlined in appendix 7
- Consider your own feelings and seek support if needed

## APPENDIX 5: Recognising abuse and radicalisation

The following may/may not be signs that abuse has taken place, but the possibility must be considered.

### PHYSICAL SIGNS OF ABUSE

- Any injuries not consistent with the explanation given for them
- Injuries which occur to the body in places which are not normally exposed to falls/rough games,
- Injuries which have not received medical attention
- Neglect – under-nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care, etc
- Reluctance to change for, or participate in, games or swimming
- Repeated urinary infections or unexplained tummy pains
- Bruises, bites, burns, fractures etc which do not have an accidental explanation
- Cuts/scratches/substance abuse
- Obsessive behaviour (e.g. obsession with cleanliness)
- Bedwetting

### INDICATORS OF POSSIBLE SEXUAL ABUSE

- Any allegations made by a child concerning sexual abuse
- Child with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour, or who regularly engages in age-inappropriate sexual play
- Sexual activity through words, play or drawing
- Child who is sexually provocative or seductive with adults
- Inappropriate bed-sharing arrangements at home
- Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
- Eating disorders – anorexia, bulimia

### SIGNS OF EMOTIONAL ABUSE

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging. Also depression/aggression, extreme anxiety.
- Nervousness, frozen watchfulness
- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Attention-seeking behaviour
- Persistent tiredness
- Running away/stealing/lying

### SIGNS OF FINANCIAL ABUSE (Customers Only)

- Sudden loss of assets

- Unusual or inappropriate financial transactions
- Bills not being paid
- Insufficient food in their home
- Visits which coincide with the day a person's benefits are cashed

## SIGNS OF DISCRIMINATORY ABUSE

- A person may be overly concerned about race, sexual preference etc
- A person tries to be more like others
- A person reacts angrily if attention is paid to race, sex etc
- Disparaging remarks
- Over anxiousness or criticism from carers etc.

Staff should be alert to on-line abuse and bullying, grooming or financial exploitation by text, internet, or social media. Appendix 12 gives some basic tips for children/young people to be aware of.

## POTENTIAL INDICATORS OF RADICALISATION

- Feelings of grievance and injustice
- Feeling under threat
- A need for identity, meaning and belonging
- A desire for status
- A desire for excitement and adventure
- A need to dominate and control others
- Susceptibility to indoctrination
- A desire for political or moral change
- Opportunistic involvement
- Family or friends involvement in extremism
- Being at a transitional time of life
- Being influenced or controlled by a group
- Relevant mental health issues

Example indicators that an individual is *engaged with* an extremist group, cause or ideology include

- spending increasing time in the company of other suspected extremists;
- changing their style of dress or personal appearance to accord with the group;
- day-to-day behaviour becoming increasingly centred around an extremist ideology, group or cause;
- loss of interest in other friends and activities not associated with the extremist ideology, group or cause;
- possession of material or symbols associated with an extremist cause (e.g. the swastika for far-right groups);
- attempts to recruit others to the group/cause/ ideology; or
- communications with others that suggest identification with a group/cause/ideology.

Example indicators that an individual has an *Intention to cause harm*, use violence or other illegal means include:

- clearly identifying another group as threatening what they stand for and blaming that group for all social or political ills;
- using insulting or derogatory names or labels for another group;
- speaking about the imminence of harm from the other group and the importance of action now;
- expressing attitudes that justify offending on behalf of the group, cause or ideology;
- condoning or supporting violence or harm towards others; or
- plotting or conspiring with others.

Example indicators that an individual *is capable of* causing harm or contributing directly or indirectly to an act of terrorism include:

- having a history of violence;
- being criminally versatile and using criminal networks to support extremist goals;
- having occupational skills that can enable acts of terrorism (such as civil engineering, pharmacology or construction); or
- having technical expertise that can be deployed (e.g. IT skills, knowledge of chemicals, military training or survival skills)

**These examples are not exhaustive**

## APPENDIX 6: procedure for dealing with concerns about welfare

In some cases, staff may be concerned about the vulnerability, welfare or well-being of children or young people that they work with which is not connected to suspected abuse or neglect. In this instance, the worker should report the concern to their **line manager** straight away.

The line manager will review the concerns raised and make a decision as to whether to refer the child/young person to Social Services using the Common Assessment Framework (CAF) arrangements. If a referral is to be made (and referrals should be made wherever clear concerns exist), this should be done within 48 hours. Under the Children's Act 1989, referrals may be made of "children in need" i.e those who are vulnerable because:

- A child/young person has a disability
- A child/young person has special educational needs
- A child/young person is a carer
- A child/young person is engaged in anti-social behaviour or criminal activity
- The child or young person's family presents with substance misuse, adult mental health or domestic violence
- The child or young person is showing early signs of abuse or neglect in their family setting

### Consent to Make a Referral

For children under 16, concerns must always be discussed with parents/guardians and agreement reached with the family that referral to social services is in the child's best interests. However, when making referral, discussion or agreement with parents/guardians must be avoided if this would put the child at increased risk of harm or would prejudice a police or section 47 investigation.

For young people aged 16 or over, the consent of the person concerned should be obtained before referral to Social Services unless there is a severe risk of harm or self-neglect.

In all cases, written records must indicate the circumstances and justification of any actions taken.

### Cultural Issues

BCHA respects the right of people from different cultural backgrounds to raise children according to their own beliefs etc. However, ill treatment, even if acceptable in some cultures (for example, female genital mutilation) should not be ignored and a referral should be made in line with the guidance above.

### Sudden Infant Death Syndrome (SIDS)

Staff who are working with mothers and babies should be aware that the risk of SIDS is increased where mothers (or both parents) sleep together (co-sleep) with their baby.

Health practitioners recommend that mothers should put their babies in a separate cot or Moses basket although this can be in the same room as the parent.

However, if a mother does wish to co-sleep she should be advised that the following factors increase the risk of SIDS:

- If she smokes
- If she (or her partner if also in the bed) have consumed alcohol, illegal drugs or prescription medication which cause drowsiness
- If the baby is premature or low weight
- If she sleeps with her baby in an armchair or on a sofa
- If the mother has a sleep disorder
- Where the bed is not suitable

Where there is an issue, customers should be encouraged to contact their local midwife or health visitor for guidance. Staff may find it helpful to stock leaflets available from their local health centre.

Clearly, where there are ongoing concerns about the child, these must be reported as a Safeguarding matter without delay.

## APPENDIX 6.a Procedure for dealing with concerns about radicalisation

Prevent is part of the Government's counter-terrorism strategy that aims to stop people becoming terrorists. It is a multi-agency approach to safeguard people at risk of radicalisation.

Partners work together to support individuals vulnerable to radicalisation and provide tailored safeguarding measures to support their needs.

### Channel referral

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/425189/Channel\\_Duty\\_Guidance\\_April\\_2015.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/425189/Channel_Duty_Guidance_April_2015.pdf)

Channel is a process developed to support people at risk of being drawn towards terrorism or violent extremism.

Channel partners include local authorities, healthcare providers, Probation, Police and members of the community. A range of options are available, including mentoring, welfare support and access to key services.

The earlier the Channel intervention the more likely it is to be effective so make the referral at the earliest opportunity:

### Referral contacts

For referrals in Devon & Cornwall contact [prevent@devonandcornwall.pnn.police.uk](mailto:prevent@devonandcornwall.pnn.police.uk)

For referrals in Dorset contact the Safeguarding Referral Unit: [PreventReferrals@Dorset.pnn.police.uk](mailto:PreventReferrals@Dorset.pnn.police.uk)

For referrals in Avon, Somerset & Wiltshire, contact [channelsw@avonandsomerset.pnn.police.uk](mailto:channelsw@avonandsomerset.pnn.police.uk)

## APPENDIX 7: Procedure for responding to abuse

### 1.0 Contents

- introduction and definitions
- responsibilities of front line staff
- responsibilities of scheme manager, co-ordinator, deputy co-ordinator
- parental consent
- consent of the abused child/young person
- false allegations

### 2.0 Introduction

It is essential to make a distinction between a “**concern**” raised by customers or external agencies about poor practices and an “**allegation of abuse**”.

A “**concern**” may include a general complaint or comment that a service may not be keeping proper records of the medication it holds for people or that workers go into people’s bedrooms without good reason i.e. there is no actual abuse taking place but that practices, if left unchecked, may start to put people at risk of abuse. In such instances, general concerns should be directed to a Head of Function or Director to ensure appropriate transparency in the investigation process that will result. This Appendix will therefore **not** apply as part of that process.

“**Allegations of Abuse**” are more specific – that actions defined in Appendix One have taken place or may possibly be taking place against an individual customer or a number of customers. This appendix and the preceding one will apply in terms of responding to the allegation. You should be prepared to act **immediately** upon any suspicions of your own or upon allegations or disclosures made by others.

#### 2.1 Disclosures

Where children/young people wish to talk about abuse, staff should try to follow the guidelines listed in **appendix 4**. Staff should deal with the disclosure **sensitively** and not press the child/young person for details or try to investigate the matter themselves as this could prejudice any external investigation.

#### 2.2 Suspicions & Allegations

Staff must also be alert to the risks of abuse from other staff members, customers, family members or others.

### 3.0 Responsibilities of Front-line staff

In making a child protection alert, Staff should follow this four step procedure:

- Step 1 – protect those at risk
- Step 2 – protect any evidence
- Step 3 – inform someone in charge

## Step 4 – write a report

Where there is an immediate problem or disclosure by someone, steps one and two take priority. Where there is a suspicion of abuse but no immediate risk/evidence, go to step 3.

### 3.1 Step 1: Protect those at risk

If there is **immediate danger or risk of harm**, ensure the safety of any child(ren) or young person(s) at risk. This may include:

- moving those at risk to a safe location, if the person is on BCHA premises. This may be another part of the building. However, it is important to respect the wishes of the person concerned and also to ensure that professional boundaries are maintained at all times
- getting emergency medical assistance, if required (by dialling 999) or administering first aid, **if qualified to do so**
- getting police assistance (by dialling 999)
- staying with those at risk and making sure they are as comfortable as possible
- excluding the perpetrator from the service, if there is a danger from their continued presence AND ONLY IF you have the authority/legal right to do so

### 3.2 Step 2: Protect any evidence

What you do or do not do in the **immediate aftermath of allegations, concerns or disclosure of abuse** may affect the success of any police or social services investigations. In ensuring those at risk are safe from harm, you are advised to:

- Avoid touching the person unless you have to administer first aid. Seek the consent of the person before touching them and only touch what you have to in order to administer treatment
- Advise the person not to remove or wash clothing
- Do not touch any objects/weapons around the scene of the incident
- Secure the room(s) to prevent others (including perpetrators) from entering until the police arrive
- Keep anything you use (such as blankets) to comfort the person for police examination
- Do not clean or tidy or wash the room/area where the incident occurred

- In allegations of theft or financial abuse, secure all valuables, receipts, benefit books, bank books and documents with the person's consent and give them a receipt of the items secured

You must inform any other persons present – such as paramedics etc of the need to protect evidence if abuse is suspected.

### 3.3 Step 3 – Inform Someone in charge

Failure to inform one of the Protection from Abuse Co-ordinators (or, where relevant, an appropriate external agency) about a disclosure or allegation of abuse involving staff members/volunteers in line with this section may be grounds for disciplinary action.

Firstly, advise the person at risk whom you will be reporting the matter to.

#### **3.3.1 If the abuse is historic:**

You must report the matter to your **line manager** as soon as possible. Where the abuse is historic, and the child is under 16, a referral to social services must be made. Where the young person is over 16, their wishes about what to do next should be respected after having discussed their options. Bear in mind that if others (eg siblings) are still at risk from the perpetrator, a referral to social services **must** be made irrespective of the customer's wishes

#### **3.3.2 If the abuse is or has been recently happening away from BCHA premises and the abuser is not connected with BCHA:**

You must report the matter to your **line manager** as soon as possible. Where the child is under 16, a referral to social services must be made. Where the young person is over 16, their wishes about what to do next should be respected although a referral should still be made without consent if there is a significant and ongoing risk of harm. In this instance, the views of the young person must be indicated to Social Services when the referral is made.

#### **3.3.3 If the abuse has been or is occurring within the scheme/service and the perpetrator is another customer, a family member or visitor:**

You must report the matter to your **line manager** as soon as possible. Where the child is under 16, a referral to social services must be made. Where the young person is over 16, their wishes about what to do next should be respected although a referral should still be made without consent if there is a significant and ongoing risk of harm. In this instance, the views of the young person must be indicated to Social Services when the referral is made.

#### **3.3.4 If the abuse has been or is being perpetrated by a member of staff, a volunteer or Board member:**

You must report any incident, disclosure or allegation to HR and the Head of Quality and Safeguarding as soon as possible. Do not contact anyone else, including your line manager.

For out of hours incidents, it will be acceptable to contact the On Call Duty Manager to make an alert and agree next steps. It will be the On Call Duty Manager's responsibility to notify one of the Co-ordinators promptly on the next working day.

**YOU MAY ALSO CONTACT SOCIAL SERVICES OR THE POLICE DIRECTLY AT ANY TIME. IN AN EMERGENCY, YOU DO NOT NEED PERMISSION TO DO THIS.**

Under the organisation's **Raising Concern - Whistleblowing Policy**, staff and volunteers have the right to disclose concerns they may have without fear of reprisal, particularly if they believe BCHA would fail to act or would cover up a complaint.

**DO NOT:**

- **Investigate** the matter yourself
- **Tell anyone else** (this means not discussing the matter with the perpetrator, other staff, relatives, other customers or the press). However, in cases of disclosures of historic abuse, it will be permissible to alert other colleagues on duty if the customer's emotional state is a cause for concern.

3.4 Step 4 – Write a report

Hand write or type details of the incident, disclosure, allegation or concern as soon as possible giving as much information as you can using the Serious Incidents Database. Please remember, the report is confidential so do not show it to anyone else. As the report may be used as evidence at a later date, you must ensure what you write is factual, legible and non-judgemental.

**4.0 Responsibilities of the Line Manager and the person to whom the abuse is reported (i.e. Head of Quality and Safeguarding and/or HR)**

Upon being notified of the abuse or neglect, the service line manager or the Head of Quality and Safeguarding or HR member will

- a) Assume responsibility for ensuring those affected are safe from further harm and are receiving appropriate treatment
- b) If appropriate, ensure forensic evidence has been protected
- c) Assess whether there is a risk or “significant harm or exploitation” to the child/young person. This may be determined, as far as the known facts allow, by the following:
  - What is the nature and extent of the abuse?
  - Is the abuse historical or current?
  - Is the abuse a one-off act or is there a longstanding relationship with the child/young person and/or pattern of concerns?
  - What is the impact of the abuse on the child/young person?
  - What is the impact of the abuse on others?
  - What is the identity and the intent of the perpetrator/alleged perpetrator?
  - Is/Are the abusive act(s) illegal?
  - Is there further risk of harm to the child/young person or to others?
  - Whether the alert relates to an employee or service delivery
- d) On the basis of the assessment above, promptly decide whether to investigate the matter internally or notify the police or social services under the Child Protection arrangements (see the remainder of section 4) **within 24 hours**

Note: in many cases, things may not be straightforward. Informal discussion with police or social services about what to do is recommended.

- e) If a decision is made to report the matter to the statutory authorities, the abused person and alleged perpetrator(s) must not be questioned by BCHA staff at this stage. (although an initial agreement to suspend the staff member and an acceptable timeframe for disciplinary investigation should be established at the outset so that proceedings are not unduly compromised).
- f) Determine who within BCHA has a legitimate “need to know” and to notify them accordingly of the incident and action being taken. Others to be involved may include:
  - The relevant scheme manager
  - The relevant Head of Function or Director
  - Other staff working directly at the scheme
  - The Company Secretary, where there may be a claim against BCHA .
  - The Human Resources Business Partner, where staff are involved
  - The Chief Executive
  - The Board
  - The Communications Specialist (if there is potential for media coverage)
- g) Produce a written report of the action taken using the Disclosure Assessment Form.

The person to whom the abuse is reported may delegate any of the above steps to other competent persons. However, it is important that the delegator leads the process, setting a clear action plan and monitoring this, rather than leaving outcomes to chance. Recommendations made by those informed should be relayed back to the lead so this does not conflict with other actions or duplicate effort.

**GREAT CARE SHOULD BE EXERCISED IN ESTABLISHING THE FACTS SO AS NOT TO CONTAMINATE OR PREJUDICE ANY POLICE OR SOCIAL SERVICES INVESTIGATIONS.**

#### 4.1 Protection from Harm

Guidelines as outlined above.

#### 4.2 Protection of Evidence

Guidelines as outlined above

#### 4.3 When to Notify the Police

An immediate approach must be made to the Police where it is apparent that:

- A death has occurred (the coroner will also need to be informed)
- a child/young person has been subjected to deliberate injury or ill treatment by someone else that is not the result of a peer group fight
- a child currently under 16 may have been subjected to sexual abuse
- a young person may have been subjected to rape or other sexual assault

- a child/young person is in immediate danger from someone
- an abuse of trust may have occurred between a worker and a customer aged 16-18 which has led to sexual activity
- another crime (theft etc) has or claims to have been committed

It should be agreed with the Police what action BCHA will take prior to or during any investigation in terms of supporting the abused person/other customers and to deal with the alleged perpetrator. It should also be agreed which party will be responsible for contacting social services.

The consent of parents/guardians should be obtained prior to notifying the police unless there would be further risk to the child or young person in doing so. If consent is withheld, seek advice from your manager. Where the young person is the customer in their own right, they must be informed of our intentions to notify the police and, preferably, agree to the action. Again, seek advice, if consent is withheld.

Where it is unclear whether a referral should be made, the Crime Desk Manager (or similar) at the local divisional office of the police should be contacted for an informal discussion about how best to proceed. This contact, and any advice given, must be recorded.

#### 4.4 When to Make a referral to Children's Services

A formal referral within 24 hours must be made where a child or young person has suffered or is at risk of significant harm.

Please note: Each local Safeguarding Children's Partnership has established its own "Threshold Guidance" for determining in what circumstances the statutory agencies will act to protect a child/young person. The guidance will need to be consulted, although when in doubt, a referral should be made anyway.

The Local Authority Designated Officer (LADO) who works within Children's Services should be the first point of contact where a staff member, volunteer or relief worker:

- Has (or may have) harmed a child or young person
- Has committed a criminal offence against a child/young person (even if the police are already aware of this )
- Is deemed unsuitable for work with children/young people
- Is subject to an allegation against a child in the past, even where unrelated to their current work with children/young people
- May have put their own children at risk of harm, even where this is not related to their current work.

It should be agreed with social services (LADO) what action (with timescales) BCHA will take prior to or during any investigation in terms of supporting the abused person/other customers and to deal with the alleged perpetrator

The consent of parents/guardians should be obtained prior to notifying social services unless there would be further risk to the child or young person in doing so. Where the young person

is the customer in their own right, they must be informed of BCHA's intention to notify the police, and preferably, agree to the action. If consent is withheld by either parents or the young person, seek advice from your manager.

Where it is unclear whether a referral should be made, social services should be contacted for an informal discussion about how best to proceed. This contact, and any advice given, must be recorded.

#### 4.5 When to Investigate the matter internally

If it is clear there is **no** significant risk of harm or the Police/Social Services do not wish to investigate then the matter can be dealt with internally. This is particularly the case for:

- Verbal abuse (under the harassment procedures)
- Allegations of theft of small amounts of money/items of little value
- Further facts need to be established before onward referral to the police or social services (for example, it is not clear what has happened)
- Concerns are raised about poor practice rather than acts of abuse
- Breaches of professional boundaries or other misconduct

An investigation will be undertaken by a Team Manager or above. The investigation will be promptly initiated and professionally conducted and any investigatory or disciplinary processes should be fully explained to those involved.

The investigation will involve speaking to the abused person and the alleged perpetrator. However, it is not appropriate to speak to the perpetrator where:

- there is likely to be a formal police or social services investigation. Any action we feel should be taken against the perpetrator must be discussed and agreed with the statutory authorities first.
- There is likely to be a risk of violence from the alleged perpetrator towards staff or the abused person
- There is likely to be an attempt at self-harm by the abused person
- There is likely to be an attempt at self-harm by the perpetrator

The abused person, or their parents for children under 16, should be encouraged to report any crimes to the police or other issues to Social Services.

Internal investigations should also look at:

- Procedures and scheme/service security measures. Corrective action must be implemented as soon as is reasonably practicable
- Whether the abuse is more widespread (e.g. other victims, more than one perpetrator, institutional abuse)
- Whether non-abuse issues such as professional boundaries failings or potential fraud could become abusive if left unchecked

After the investigation, three courses of action may be taken:

- Close off the investigation, if the abuse is unlikely to recur or is unfounded. However, follow-up monitoring is recommended
- Regularly monitor the situation to ensure either that any suspicions remain unfounded or to seek further evidence
- Refer the matter to the statutory agencies

**In all cases, full written records must be made, with justifications for any course of action. Intended courses of action and outcomes should always be communicated to the young person or their parent/guardian, wherever practicable.**

## **5.0 Informing Others**

No other persons should be informed other than on a "need to know" basis. The Board will be notified either upon the completion of an internal investigation or that a referral has been made to the police/social services. However, in order to not compromise any investigations by outside agencies, exact details should be withheld from serious incident reports until the outcome of the third party investigations.

Relevant Service Commissioners should be notified when a referral is made to the police or social services. However, care should be taken with the information disclosed (i.e. general details of an incident rather than exact details of victim and perpetrator) so as not to breach Data Protection guidelines. However, where such personal details are requested by the service commissioner, these should be disclosed by the most secure form (i.e. by post with the envelope marked "Confidential – for addressee only) as far as is possible.

Email is not a secure means of communication but if this has to be used, double check the addressee details and never make an alert using a group email.

The Company Secretary will notify the Social Housing Regulator of an incident only if there is likely to be a significant reputational reason for doing so.

## **6.0 Parental Consent**

With children under the age of 16, parental consent should always be sought before referral to external agencies unless in so doing, this would endanger the child concerned. Further advice may be sought from social services.

## **7.0 Consent of Abused child/young person**

The consent of young people who are customers in their own right should be sought before referral to outside agencies. However, it may be deemed appropriate to make a referral without their consent if it is in the best interests of the young person or it is to protect other young people from risk of harm. In this instance, referral must be made with the knowledge of the young person concerned.

## **8.0 False Allegations**

BCHA will foster an environment where abuse and neglect are not tolerated. Whilst it is important to ensure customers and others are able to report concerns easily and without fear of reprisal, there will inevitably be occasions when false allegations are made.

As the consequences of an investigation can be significant not just for the individuals concerned but also for the organisation’s credibility, investigations must be fair. Where an allegation is retracted or is discovered to be false, it is important that:

- Any staff/volunteers concerned should receive an assurance that they will not be victimised in future. A transfer to another service or duties may be necessary especially to avoid contact with their accuser. Where allegations are withdrawn at an early stage or investigated and the staff member is not aware of the allegation, BCHA’s policy **will still be** to inform the staff member that an allegation was made.
- The customer concerned should not be punished or excluded immediately but a reassessment should be made of the individual or the family to determine the reason for the allegation and to explain what BCHA considers abuse or harassment to be. It may be appropriate to issue a warning to the young person or their parents that persistently false or malicious allegations against staff will not be tolerated and may result in further appropriate action being taken – such as exclusion or eviction from the service.

**However, all allegations must be seen to be properly investigated and documented.**

## 9.0 Complaints

Where customers or their advocates wish to complain about the conduct or outcome of any specific investigation by BCHA or any failure to act, the customer has the right to complain using the **BCHA complaints procedure**. In order to ensure complete fairness, the person who deals with the complaint must not have been involved in the original investigation in any way.

If disclosure/investigation was dealt with by:	This person should deal with a complaint:
Front-line staff member	Team Manager
Team Manager or Senior Practitioner	Head of Service/ Head of Wellbeing
Head of Service or Head of Wellbeing	Director of Homelessness, Health & Wellbeing <b>or</b> Chief Executive
Head of Quality and Safeguarding	Director of Homelessness, Health & Wellbeing
Director of Homelessness, Health & Wellbeing	Chief Executive

As with all decisions, there will be a right of appeal to the next Stage of the complaints process. In, addition, owing to the nature of the complaint, customers may approach an external agency – Children’s Services, commissioners, etc at any time.

Complaints by **Statutory Agencies** about BCHA's general handling of abuse disclosures/ investigations must be referred to the Chief Executive in the first instance.

## **APPENDIX 8: Supporting children/young people who have been abused and radicalised**

Professional Boundaries are vital in such cases and great care must be taken when working with people who have been abused.

In the first instance, it is the duty of all staff to protect their customers from further risk of harm or immediate danger. See Appendix 7 for more details.

Other support that can be offered includes:

### **1.0 Involvement of Children’s Services**

If there is no significant risk of harm to a child/young person, it may still be appropriate to make a referral to Children’s Services if there are broader welfare concerns.

Where a conference is convened by Children’s Services to investigate allegations of abuse or to support children/young people, the attendance of BCHA staff may be required. Staff will attend such conferences and agree with the statutory or other agencies what action is required jointly and by the organisation.

Guidance covering the operation of Children’s Services Investigations and Child Protection planning meetings is contained in the Inter-agency Child Protection procedures issued by Local Safeguarding Children’s Boards.

### **2.0 Counselling**

This may be arranged by Children’s Services or another agency such as:

- Relate
- Local Family Services
- the Educational Welfare Officer (if the child is at school)
- the College Counsellor (if the young person is attending college)
- the Youth Offending Teams (if the young person is known to these services) or
- Victim Support (0845 303 0900)

Under no circumstances should staff provide counselling. However, abuse issues may still be discussed in key-working sessions or arrangements can be made with individuals or organisations qualified to provide counselling to visit the customer, with their agreement.

### **3.0 Providing additional security measures for the person/family**

Accommodation provided by BCHA should be as secure as practicable. Where required, a means of contacting someone in case of emergency should be provided (mobile phone, alarm etc.)

### **4.0 Transferring the person**

#### 4.1 Moving the person to another room/flat within the scheme

For accommodation-based services, moving the young person/family to another unit within the same scheme, as vacancies allow may be appropriate if it affords more security for the young person/family or will ease any psychological effects. Any moves must be in line with the organisation's Transfer Policies.

#### 4.2 Moving the person to another scheme

It may be appropriate to transfer the person to another project within BCHA especially if this affords more security for the person/family or will ease any psychological effects. Any moves must be in line with the organisation's Transfer Policies. A referral to another accommodation provider (the local authority, other housing associations etc) should also be considered.

#### 5.0 **Providing or arranging extra support as part of the ongoing Support Plan.**

In circumstances where abuse is disclosed or brought to light, key-working sessions should be used to reassess the young person's/family's support needs. A revision to the Support Plan (for example additional levels or support or the involvement of appropriate external agencies) **should be urgently considered**.

In addition, any risk management controls which reduce the risk to a child/young person or others in the service should be **immediately** reviewed/implemented by the scheme. The review should cover not only risk of harm from others but also risk of self-harm.

#### 6.0 **Referring the person to their GP**

For young people who are customers in their own right, they should be advised to contact their GP where there may be ongoing medical concerns – either from physical injuries or for psychological issues such as depression, self-harm, insomnia etc.

#### 7.0 **Assistance with legal proceedings**

Where appropriate, staff may offer to support any application for legal representation or legal aid. Staff must not seek to give any legal advice regarding criminal or civil proceedings.

Where appropriate, staff may support the young person/family during meetings with the police, solicitors or at court or with related correspondence. However, the consent of the customer and the police etc must be specifically obtained. It would not be appropriate to offer this form of support where a member of BCHA staff is being prosecuted (contact Head of Service for further Guidance).

#### 8.0 **Criminal Injuries Compensation Scheme.**

Where a serious or violent crime has been committed resulting in physical or mental injury, compensation under the Criminal Injuries Compensation Scheme can be applied for. Whilst the incident must have been reported to the police, it is not necessary for the perpetrator to have been convicted at the time an application is made. Claims must be made within 2 years

of the incident by contacting the scheme on 0800 358 3601 or via the website at [www.cica.gov.uk](http://www.cica.gov.uk).

Applications on behalf of Person's under the age of 18 should generally be made by a person with parental responsibility – parents, guardians or the local authority where the person is in care. In other situations, advice from the freephone number should be sought.

## **9.0 Support for Parents & Carers**

BCHA would generally engage with parents over abuse issues which affect children under 16. Wherever practicable, it shall be our intention to offer support to parents. A reassessment of existing support arrangements and risks should therefore be undertaken as part of regular key-working.

Where investigations are internal, the Team manager should aim to keep parents fully informed about the progress, options and outcomes and to discuss and agree with parents for any further action required, where appropriate.

For cases of Domestic Violence, the police may also assist individuals and families through the Witness Protection Programme.

For cases of radicalisation, refer to Prevent Training / Channel referral processes.

## APPENDIX 9: Dealing with alleged perpetrators

In any investigations, irrespective of the substance of any allegations, BCHA will still treat perpetrators or alleged perpetrators in a fair and honest manner, consistent with the organisation's values. It will be agreed with the police and social services, where appropriate, what and when to discuss with perpetrators. This section should be viewed alongside the Disciplinary and Suspension policies and procedures.

### 1.0 Current Staff

No one has a right to work with children or young people. Convicted offenders or persons known to have perpetrated abuse will not be employed by BCHA in connection with services to children or young people under the age of 25.

In cases involving current staff, the LADO at the local authority must be contacted within 24 hours for initial guidance.

Unless the investigation is being led by the Police or Children's Services (in which case the Association's actions will be guided by those agencies), a meeting will be arranged by the Team Manager/Head of Function with the staff member as soon as is reasonably practicable to ascertain his/her side of the allegation. It is advisable that the HR Business Partner also attend the meeting.

Where a meeting cannot be arranged promptly, the Team Manager/Head of Service may decide to send the staff member home if it is felt that this would diffuse a difficult situation or would protect other staff and customers from unpredictable behaviour on the part of the alleged perpetrator or is in the best interests of the reputation of BCHA.

However, on occasions where an allegation is made and withdrawn shortly afterwards and it is believed the allegation was without substance, BCHA's policy is **not** to inform the staff member concerned about the allegation.

If reasonable suspicions remain and an investigation is required, the Team Manager/Head of Service will suspend the staff member on full pay under the terms of the Suspension Policy and Disciplinary Procedure.

If it is established that abuse or some other act of gross misconduct did take place, dismissal proceedings will be invoked. Staff access codes to premises should be changed accordingly and keys etc returned by the staff member.

Where not already involved, the Head of Service will notify the police or social services where there is reason to believe a child or young person is at risk of significant harm.

If the investigation proves that the allegations are inconclusive, then the staff member concerned may be reinstated although extra supervisory arrangements may be appropriate as will limiting any contact with any abused parties. Formal verbal or written warnings may also be appropriate.

If the investigation proves any allegations unfounded, then the staff member concerned will be reinstated although again, limiting contact with any aggrieved parties may be appropriate. Whilst in the employment of BCHA, staff may have access to the staff counselling service and should be made aware of this during or at the conclusion of any investigation.

Where the member of staff is dismissed for improper conduct or resigns before the completion of an investigation, or is transferred to other duties because of behaviour which put young people or children at risk of harm, the relevant Director, in conjunction with the HR Business Partner, will recommend that the Directors' team consider notifying the Independent Safeguarding Authority that the staff member concerned should, in BCHA's view, be barred from work with vulnerable adults. Where the Directors' team agrees a barring referral should be made, this will be signed off by the Director concerned. However, the organisation will not seek to include individuals on the Barred list where allegations have been made which prove to be false or which are withdrawn by the complainant, unless grave suspicions remain.

### **1.1 Agency Staff**

BCHA relief staff will be dealt with according to "current staff". Managers should adopt the following process for allegations or suspicions against external agency staff:

- a) Ask the person to leave the scheme or not to attend their shift
- b) Notify the agency and inform them of the substance of the allegation/suspicion (protecting confidential information)
- c) Advise the Agency not to place the person in question on any more company placements until further notice
- d) Notify the LADO for advice
- e) Upon completion of any investigation, if required, notify the agency of the outcome and the recommendations – i.e. exoneration, permanent bar to the worker concerned or restrictions on what work they can undertake with BCHA.
- f) If considered appropriate, managers may wish to request the agency to undertake its own investigation

### **2.0 Current Volunteers**

No one has a right to work with children or young people. Convicted offenders or persons known to have perpetrated abuse will not be engaged by BCHA as a volunteer in connection with services to children or young people under the age of 25.

In cases involving volunteers, the LADO at the local authority must be contacted within 24 hours for initial guidance.

Unless the investigation is being led by the Police or Social Services (in which case BCHA's actions will be guided by those agencies), a meeting will be arranged by the Team Manager/Head of Service with the volunteer as soon as is reasonably practicable to ascertain his/her side of the allegation. It is advisable that an HR representative also attend the meeting.

Where a meeting cannot be arranged promptly, the Team Manager/Head of Service may decide to exclude the volunteer if it is felt that this would diffuse a difficult situation or would

protect other staff and customers from unpredictable behaviour on the part of the alleged perpetrator or is in the best interests of the reputation of BCHA .

If reasonable suspicions remain and an investigation is required, the Team Manager/Head of Service will suspend the volunteer. If it is established that abuse or some other act of gross misconduct did take place, the volunteer will be excluded from the scheme permanently. Where it is established that the allegations are inconclusive or of a minor nature, it may still be appropriate to exclude the volunteer from the project/service either permanently or for a specified period in which case access codes should be changed or keys handed back.

Where not already involved, the Head of Service will notify the police or Children's services where there is reason to believe a child or young person is at risk of significant harm.

Volunteers should only be re-instated where allegations prove to be completely unfounded.

Where the volunteer is dismissed for improper conduct, is transferred to other duties because of their conduct or leaves before the completion of an investigation, the relevant Director, in conjunction with the HR Business Partner, will recommend that the Directors' Team consider notifying the Independent Safeguarding Authority that the staff member concerned should, in BCHA's view, be barred from work with vulnerable adults. Where the Directors' team agrees a barring referral should be made, this will be signed off by the Director concerned. However, the organisation will not seek to include individuals on the Barred list where allegations have been made which prove to be false or which are withdrawn by the complainant, unless grave suspicions remain.

### **3.0 Serving Board or Committee Member**

In this instance, the investigation should be conducted by the Chief Executive and Chair or, if the Chair is implicated, the Vice Chair.

During the investigation, the alleged perpetrator will be suspended from the Board/Committee and barred from entering any BCHA premises where customers/children are present.

Where the allegation proves founded or suspicions remain, the matter will be taken to the next Board meeting and a vote taken to expel the person concerned from the Board should the person not offer to resign. The RSH will be notified of the outcome of such a vote.

It should be noted that Board and committee members must be accompanied around schemes by staff and, under the Board members' Code of Conduct, Board members are not permitted to be alone with customers during such visits.

### **4.0 Former Staff & Volunteers**

Where abuse is alleged against a person no longer working for BCHA in a paid or voluntary capacity, a thorough investigation must be undertaken and recorded.

Where the allegation is founded, the Team Manager/Head of Service will notify the police or Children's services where there is a reason to believe there is a risk of significant harm to a child or young person, whether within the organisation or elsewhere.

The HR Business Partner may seek approval from the Directors' Team to refer former members of staff to the Disclosure and Barring Service where substantive information comes to light which would have led to dismissal had the individual been employed by BCHA at the time the incident(s) occurred. The individual would be informed by the DBS of their inclusion on the list and would have a right to appeal their inclusion.

Requests for references should clearly state the suitability or otherwise of the person concerned for the work to which the reference relates, in line with the Confidentiality & Privacy policy.

Former staff or volunteers should never be casually admitted to the scheme/service unless by invitation and then must be supervised as any other visitor whilst on site. Managers may bar any ex-staff or volunteers at their discretion which may include the changing of access codes.

## 5.0 Other Members of the Abused Person's Household

Where the perpetrator appears to be another member of the child's/young person's household, then this must be dealt with by the police/statutory agencies. In agreement with the police, it may be appropriate to:

- Limit access to the scheme/service or parts of it provided that this does not conflict with any rights the alleged perpetrator may enjoy under the terms of their occupancy agreement
- If the alleged perpetrator is a customer in their own right (for example, a parent), additional support may be offered by staff under any support plans in place, provided that this does not conflict with any formal investigation. Such support may involve assisting the alleged perpetrator to access counselling or other externally provided services.

## 6.0 Other Customers

Where the alleged perpetrator is under 18, then it is necessary to involve social services from the outset in order for the needs of the person to be separately and properly addressed during any investigation.

Where the alleged perpetrator is over 16 and a customer in their own right, appropriate short term action will include:

- In minor instances, perpetrators will be formally warned about their behaviour and what sanctions may be applied if the behaviour continues
- Exclusion from the service/scheme for a specified period to be sanctioned by the scheme manager where there has been violent, threatening or otherwise unsatisfactory behaviour (licence holders and non-accommodation based customers only). The exclusion and its duration should be recorded and notified to all scheme/service staff
- Moving the alleged perpetrator to another scheme – subject to vacancies and a risk assessment
- Contacting the police, where a crime has been committed
- Eviction/expulsion from the service/scheme in serious cases where there has been a persistent breach of occupancy conditions or where the continued occupancy of the alleged perpetrator poses a serious threat to staff and customers (licence holders and non-accommodation based customers only)
- An Injunction where it is likely that the alleged perpetrator would attempt to regain access unlawfully to the scheme or harass or threaten violence to staff/customers. This option must be discussed with BCHA's solicitors to assist with the commencement of proceedings
- Children's services should be contacted where there are clear care needs

Additional support may be offered by staff under any support plans in place, provided that this does not conflict with any formal investigation. Such support may involve assisting the alleged perpetrator to access counselling or other externally provided services.

In the longer term, where the alleged perpetrator is a tenant of BCHA, formal possession proceedings may be appropriate subject to there being sufficient evidence of a serious and ongoing risk to other customers. However, proceedings must be taken on the specific grounds laid out in the 1988 and 1996 Housing Acts and in accordance with established procedures.

Whilst confidentiality is important, it is recommended that any other agencies who are working with the customer are informed about any action being taken by BCHA providing that there is a legitimate need to know.

## 7.0 Visitors

Where the alleged perpetrator is a visitor, they should be debarred from the scheme for a specified time pending any investigations, unless there are strong reasons for them to continue visiting the scheme. The exclusion and its duration should be recorded and notified to all scheme/service staff. Again, agreeing this course of action should only be taken in consultation with the police or social services where they are leading the investigation.

Where the alleged perpetrator is an employee or representative of a statutory or voluntary organisation, and in consultation with the police or Children’s services, the alleged perpetrator’s employer may need to be notified that an exclusion is in place and the extent and duration of it. Care should be exercised in maintained confidentiality, especially where allegations are not yet proven.

Security and staff visibility at the scheme should be assessed for effectiveness in deterring or challenging casual visitors and trespassers.

Where debarred visitors attempt to gain access to a scheme despite exclusion, legal action may be required (e.g. an injunction). Options must be discussed with our solicitors.

Where allegations are founded, the visitor should be permanently debarred from the scheme/service and consideration should be given to extending the exclusion to other schemes/services. Where the perpetrator is an employee of another organisation, the organisation should be informed of the reason for the exclusion.

Where allegations prove to be unfounded, it may not be appropriate to allow the visitor back whilst the child/young person continues to reside at the scheme/use the service unless there are specific reasons to do so and there is no risk of harm to others at the scheme. The scheme manager retains complete discretion in whether to readmit previously excluded visitors.

## 8.0 Complaints

Where **perpetrators who are customers** wish to complain about the conduct or outcome of any investigation by BCHA, the customer (or their advocate) has the right to complain using the **BCHA complaints procedure**. In order to ensure complete fairness, the person who deals with the complaint must not have been involved in the original investigation in any way.

If disclosure/investigation was dealt	This person should deal with a
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with by:	complaint:
Front-line staff member	Team Manager
Team Manager or Senior Practitioner	Head of Service/ Head of Wellbeing
Head of Service or Head of Wellbeing	Director of Homelessness, Health & Wellbeing <b>or</b> Chief Executive
Head of Quality and Safeguarding	Director of Homelessness, Health & Wellbeing
Director of Homelessness, Health & Wellbeing	Chief Executive

As with all decisions, there will be a right of appeal to the next Stage of the complaints process. In, addition, they have the right to obtain external advice or representation through a solicitor or other agency, should they wish.

Where the **perpetrator is a member of staff, Board member or volunteer**, they have the right to complain about any unfair treatment by following the **company grievance process** or, where disciplinary action is being taken, to take legal or other advice and be represented at any stage of the process.

## APPENDIX 10: Support for other staff

Where abuse or radicalisation is alleged in a scheme/service, informing others must be on a need to know basis. However, where an investigation is taking place, it is important that the Team Manager/Head of Service:

- In the aftermath of an incident, the manager should make themselves available to provide general support to the team
- At an appropriate time (subject to police etc views) debrief staff about the incident and give as much information as is reasonable to staff concerned as long as this will not compromise any investigations
- Advise staff how to handle sensitive information – particularly disclosure to third parties
- Advise staff to co-operate with the police or Children's services, where involved
- Advise staff not to talk to the media
- Advise staff that support is available through the supervision process and staff counselling service (Care First: 0800 174319)
- Be sensitive in considering requests for leave because of extreme stress caused by the Allegations

## APPENDIX 11: Working with disruptive children/young people

Often children and young people can become very upset and disruptive and occasionally their behaviour may be assessed as possibly dangerous to themselves or others. Whilst joint guidance has been issued by the Department of Health and Department for Education & Skills this generally covers children's residential and educational services.

Some guidelines to consider:

Preventing disruptive behaviour can be achieved with appropriate levels of staffing, offering choices and flexibility, recognising achievement and good risk management. If a child/young person does become disruptive, an attempt should be made to speak to the individual to:

1. Request that the behaviour stops
2. Find out the cause(s) of upset
3. Warn the child/young person that they will be asked to leave if the behaviour continues and that continued disruptive behaviour may result in longer term exclusion

**Physical chastisement of any kind is not allowed.**

**Restraint should not be employed except in the process of exercising a duty of care to prevent injury or harm (for example to stop a child falling from a window). Please refer to the Professional Boundaries policy for further guidance.**

If a child/young person is harming or threatening to harm another person or property they should be escorted away from the place/area where the disruption is occurring, providing this is safe to do so. **At the same time**, and with a second worker present, request the child/young person to STOP.

If your request is ignored or if the person refuses to vacate the area, you should call for additional help, e.g. Police.

If the person is threatening to harm themselves, care must be taken to protect the safety of the young person as well as excluding other customers from the area. Appropriate backup such as the police or medical services should be obtained.

## APPENDIX 12: Stay safe when using the Internet

Here are some simple rules to follow to get the most out of being on the net as well as staying safe!

1. NEVER use your real name in chat rooms. Use a nickname instead.
2. NEVER give out personal information to people in emails or chat rooms. This means things like your mobile phone number, address, home phone number, school or college details.
3. NEVER arrange to meet anyone you contact online.
4. GET RID OF or do not open emails that are not familiar to you or seem strange. Attachments can include upsetting information or pictures and could also contain viruses which can cause damage to your device.
5. TELL SOMEONE – parents or staff if someone online asks you things you don't feel comfortable with or which upset you. This could be, for example, someone asking you to send a personal or intimate picture of yourself. If you see things which upset you or seem strange, let someone know about this too.
6. Up-to-date advice is available from charities such as NSPCC such as

[10 Internet Safety Tips - Staying Safe Online | SWGfL](#)

## APPENDIX 13: Referrals to Children’s Services

See Appendix 6a for Channel referrals (radicalisation)

Children’s Services procedures for safeguarding children should be kept at schemes likely to come into contact with children, for ease of reference.

Children’s Services are under an obligation to make a prompt initial assessment of any referral, especially where there is a risk of significant harm. Enquiries may be made of other local agencies (health, school etc) and, depending upon the concerns, one of the following will be decided:

- No further action to be taken
- A Referral to another agency for support
- Provide help to the family as a “child in need” (Section 17 of the Children Act 1989)
- Proceed with a formal child protection investigation (Section 47 of the Children Act 1989) if there is a concern of “significant harm”

The conclusions of a Child Protection investigation will generally be as follows:

- Concerns are not substantiated – in which case either no further action will be taken or extra support will be provided, if appropriate
- There are ongoing concerns but no real evidence of significant harm. In this case, the situation will be monitored and reviewed by agencies involved
- Concerns are substantiated but there is no continuing risk of significant harm. In this case, there will be a formal inter-agency meeting to agree action and review the situation again
- Concerns are substantiated and there is a significant risk of harm. In this instance, a formal Child Protection Planning meeting will be convened to produce a Child Protection Plan which will be regularly reviewed by those involved. A decision may also be made to place the child on the Child Protection Register.

Investigations will always be based on the following principles:

- The welfare of the child is the paramount consideration
- Any possible negative effects of intervention must be considered
- The wishes of the child and his/her parent(s), where known, must be given due consideration
- Due consideration must be given to the child’s age, ethnic, cultural and religious background, and any impairment the child may have
- Wherever possible, and where the child’s safety and welfare permit, voluntary interventions and services outside the formal child protection process are to be the preferred option

Staff should check out with Children’s Services what his/her role would be during any investigations, e.g. to offer support to the individual or family (if desired). If the alleged perpetrator is a worker with children then BCHA will need to follow the principles already

described in the policy and agree with Children's Services and the Police the stage at which the person concerned should be suspended from duty.

## APPENDIX 14: Barriers to disclosing

The following practices have been recognised as making it less daunting for customers over the age of 16 to raise concerns and make complaints:

- There must be an adequate supply of “Your Views Count” leaflets or Children’s Services leaflets readily accessible for customers without having to ask members of staff
- Staff need to be aware of customers’ reticence to complain for fear of reprisal action by staff or other customers or fear of “getting people into trouble.” As a result, local arrangements for discussing protection from abuse (whether in key-working or on other occasions) must be sensitively handled with full knowledge of these procedures.
- The reporting procedure for raising concerns should be discussed/advertised at residents’ meetings or on notice boards etc as a way of reinforcing how to complain.
- Any notices or posters should indicate the names and titles of the relevant Managers/Directors (generally) or Protection from Abuse Co-ordinators (where staff are involved). However, care should be taken not to upset the “homely” environment of schemes with overt displays of “abuse” material.

All of the above practices should be implemented wherever practicable, in consultation with customers.

## APPENDIX 15: Serious Case Review

### Abuse or Alleged Abuse by Staff Members

In **every** case where a staff member is accused of abuse, the Head of Quality and Safeguarding will convene an internal review group comprising relevant staff to consider strengths and weaknesses in the handling of the incident.

Issues which will be explored could include:

- The full facts and chronology of the incident and the organisation’s response to it
- Were the individuals put at unnecessary risk because of any deficiency in procedures?
- Is there a need to amend or introduce new procedures following the incident?
- Were procedures correctly followed in reporting the incident?

“Lessons learned” will be documented and shared with managers in the organisation in order to strengthen internal safeguarding practices and joint working arrangements.

### Other Cases

The review will comprise:

- Project leaders or team managers signing off Serious Incident reports to confirm that the quality of reporting and action taken is appropriate
- Project leaders will be responsible for discussing case handling with their teams on a regular basis
- Project leaders will collate SI reports of a safeguarding nature every month or quarter to their Grade 3 / 4 Manager to review any action
- Heads of Service management meetings will include a substantive safeguarding agenda item to discuss and review lessons learned or good practice from these reports
- Items of concern may be passed to the Head of Quality and Safeguarding for consideration at organisation-wide level

However, where the Head of Quality and Safeguarding deems it necessary, an internal review group comprising appropriate parties will be convened to consider strengths and weaknesses in the handling of an incident of abuse not involving a staff member.

Such reviews will only tend to be convened where:

- An incident took place at a scheme and the actions of staff concerned need to be established or clarified, or
- An incident took place away from a scheme and action/lack of action by staff is a potential cause for concern

Issues to be explored and “lessons learned” will be as above.

## Deaths

When a death occurs within BCHA accommodation or in the community but where the individual concerned was receiving support from BCHA, the Head of Quality and Safeguarding will direct a manager to review the circumstances leading up to the death, whether this was from natural causes or not. The review should be independent of the immediate management of the accommodation concerned and will seek to examine:

- The circumstances
- The support and risk management provided by BCHA
- Support and risk management provided (or not provided) by other agencies
- Whether record keeping is robust
- Whether any procedures can be strengthened as a result of the incident

“Lessons learned” will be documented and shared with managers in the organisation.

## APPENDIX 16: Prevent Strategy

There is no single way of identifying who is likely to be vulnerable to being drawn into terrorism. Factors that may have a bearing on someone becoming vulnerable may include: peer pressure, influence from other people or via the internet, bullying, crime against them or their involvement in crime, anti-social behaviour, family tensions, race/hate crime, lack of self-esteem or identity, and personal or political grievances.

The Government has defined extremism in the Prevent strategy as: “vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces”

**For more information and the strategy in full, see:**

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

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

- a. identifying individuals at risk;
- b. assessing the nature and extent of that risk;
- and
- c. developing the most appropriate support plan for the individuals concerned.

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

For more information about Channel, see:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/425189/Channel\\_Duty\\_Guidance\\_April\\_2015.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/425189/Channel_Duty_Guidance_April_2015.pdf)

## APPENDIX 17: Customer Image Consent Form

Date: \_\_\_\_\_.

Name of Service/Scheme: \_\_\_\_\_.

### 1. Introduction

BCHA may take pictures/videos of participants and activities showing engagement in their programmes, events and/or services. These are used to promote the work of the organisation, market the programme to attract new customers and may be included in general publicity and publicity materials for BCHA.

We would never knowingly use an image or recording of you and / or your child / children without your prior consent. We therefore ask for your permission to use photographs or film footage taken.

These will only be used by BCHA for the following purposes:

- Electronic and printed information, displays, exhibitions relating to events.
- On the BCHA website and/or social media channels relating to events and programmes.
- Any similar event or campaign promoted by the BCHA.

Distribution to the media where appropriate Images will NOT be used for:

- Anything that may be viewed as negative in tone or that may cause offence, embarrassment or distress.

### 2. Publicity & Media Consent Form

I confirm that I give permission for photos/articles/testimonials to be used by BCHA within publicity materials which will be aimed at internal and external stakeholders of BCHA, including members of the public.

I understand that editorial changes may be made.

I further understand that the publicity material will be widely distributed and/or displayed in public and/or appear on BCHA websites and/or appear in BCHA publications in order to promote and explain the work of BCHA now or in the future.

List of articles:

1. : \_\_\_\_\_.

2. : \_\_\_\_\_.

If you consent to us collecting and processing photos/video/testimonials/quotes of you for this purpose, please tick the relevant boxes and sign below.

I consent for BCHA to use my image and photos or videos of me for publicity and marketing purposes.

I consent for BCHA to use my quotes and/or case study.

*or*

I consent for BCHA to use my quotes and/or case study anonymously.

I understand that my contact details may be shared with other parties to facilitate filming or production of publicity materials but only with my explicit consent.

Name: \_\_\_\_\_.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please print your name in capitals: \_\_\_\_\_

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Member of staff to complete: \_\_\_\_\_.

Staff signature: \_\_\_\_\_.

Name of scheme: \_\_\_\_\_.

Print name: \_\_\_\_\_.

### 3. Your rights

Under Data Protection law, you have the right to request to see a copy of the information we hold about you and to request corrections or deletions of the information that is no longer required.

You can ask BCHA to stop using your images at any time, in which case they will not be used in future publications but may continue to appear in publications already in circulation. You also have the right to withdraw your consent.

You can read more about your rights by visiting: <https://www.bcha.org.uk/customer-hub/dataprotection/>

If at any point you would like to query, review, amend or revoke use of your data, please contact BCHA's Data Protection Officer.

If you have a complaint about how we have handled your data, please contact BCHA's Data Protection Officer.

BCHA's Data Protection Officer:

Philip Baker, St Swithun's House, 21 Christchurch Road, Bournemouth BH1 3NS.

Tel: 01202 410500 or email [companysecretary@bcha.org.uk](mailto:companysecretary@bcha.org.uk)

If, however you wish to raise a complaint regarding the processing of your personal data or are unsatisfied with how we have handled your information, you have the right to lodge a complaint with the supervisory authority:

The Information Commissioner's Office

0303 123 1113 or via the website [www.ico.org](http://www.ico.org).

#### 4. Contact details

If you have any questions relating to this consent form or the way we are planning to use your information please contact:

Name: \_\_\_\_\_.

Address: \_\_\_\_\_.

Email: \_\_\_\_\_.

*or*

Customer Services | BCHA  
St Swithun's House, 21 Christchurch Road, Bournemouth, BH1 3NS  
Email: [enquiries@bcha.org.uk](mailto:enquiries@bcha.org.uk)