



## Child Protection and Safeguarding Policy and Procedures

### Key contacts

Role	Name	Contact details
Designated Safeguarding Lead	Matt Spear	<b>M: 01903 372 800</b> <a href="mailto:matt.angling4education@gmail.com">matt.angling4education@gmail.com</a>
Local Authority Designated Officer (LADO) West Sussex		LADO@westsussex.gov.uk 0330 222 6450 (9am -5pm)

<p><b>Integrated front door (IFD)</b></p> <p>Office hours 9am – 5pm</p> <p>Out of hours</p> <p>Call 999 if you think a child or young person is in immediate danger</p> <p>Email</p> <p><a href="https://socialcareportal.westsussex.gov.uk/s4s/FormDetails/FillForm?formId=295">https://socialcareportal.westsussex.gov.uk/s4s/FormDetails/FillForm?formId=295</a></p> <p>Safeguarding Duty Line (Advice and Support)</p>		<p>01403 22 99 00</p> <p>0330 222 66 64</p> <p>WSChildrenservices@westsussex.gov.uk</p> <p>0330 222 3344 (9am-5pm)</p>
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### **Making a referral**

**The West Sussex Integrated Front Door (IFD)** All enquiries/referrals for both Social Care and Early Help will come through our single front door referred to as the Integrated Front Door (IFD), this is the only public contact point for Early Help and Children’s Social Care. The IFD for West Sussex Children Services ensures that all enquiries and referrals are triaged upon receipt and directed to the appropriate service to support with the query, providing a seamless process with children receiving a service proportionate to their needs in a timely way. This expertise of the team comprises of qualified Early Help specialists, qualified Social Care specialists, qualified managers, Customer Service Centre Agents and social care referral advisors. When referring in, you should confirm your referral in writing within 24 hours. If you have doubts about making a referral, please consult your agency manager or practitioner with responsibility for child protection. If this is not possible, please speak with the IFD for further advice. Should safeguarding concerns arise concerning a child you are working with, these should be reported without delay to the Designated Person.

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### GUIDING PRINCIPLE

The aim and purpose of Angling4Education (A4E) is *“the advancement of the education of young people by helping them so to develop their mental, physical and spiritual capacities that they may grow to full maturity as individuals and members of society and that their conditions of life may be improved”*.

The work of Angling4Education involves working closely with many children and young people. A4E seeks for those children and young people to enjoy a safe environment. A4E will endeavour to protect those children and young people from any risks from staff, outside members of the public, third party instructors/activity providers and each other. It is our policy that all staff read and sign to acknowledge they have read and adhere to this policy.

Angling4Education believes that:

Children are entitled to safeguarding & protection from physical, sexual or emotional abuse, neglect and exploitation. Angling4Education works within the West Sussex Local Safeguarding Children Board Policies & Procedures.

## **1 INTRODUCTION**

- 1.1. Safeguarding children is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.
- 1.2. The welfare of children and young people is our paramount concern. We will safeguard and promote the welfare of children and young people and work together with other agencies to ensure that adequate arrangements to identify, assess and support those children who are suffering or likely to suffer harm are in place.
- 1.3. Our organisation is a community and all those directly connected, staff members, parents, families, pupils and volunteers, have an essential role to play in making it safe and secure.

## **2 OUR ETHOS**

- 2.1 We believe that the activities provided should take place in a caring, positive, safe and stimulating environment that promotes our values and the Social, Moral, Spiritual and Cultural development of the individual child.
- 2.2 We recognise the importance of providing an environment that will help children feel safe and respected. We recognise the importance of enabling children to talk openly and to feel confident that they will be listened to. We recognise the need to enable children to stay safe and to ask for help if they need it.
- 2.3 We recognise that all adults in our organisation, including permanent and temporary staff and volunteers have a full and active part to play in protecting our young people from harm.

## **3 SCOPE**

- 3.1 In line with the law, this policy defines a child as anyone under the age of 18 years.
- 3.2 This policy applies to all members of our organisation including volunteers, and external service or activity providers.

## **4 THE LEGAL FRAMEWORK**

4.4 This policy and the accompanying procedures have been developed in accordance with the following statutory guidance and local safeguarding procedures:

- [Working Together to Safeguard Children: A Guide to Inter-Agency Working to Safeguard and Promote the Welfare of Children, March 2015](#)
- [Pan-Sussex Child Protection and Safeguarding Procedures](#)
- [The Children's Act 2004](#)

## **5 ROLES AND RESPONSIBILITIES**

5.1 Luke O'Keefe is the lead person with overall responsibility for child protection and safeguarding and is the Designated Safeguarding Lead. The Designated Safeguarding Lead's responsibilities are described in Appendix A.

5.2 The case manager for dealing with allegations of abuse made against staff will be Luke O'Keefe. The procedure for managing allegations is detailed in Appendix B.

5.3 All staff members, volunteers and partner organisations know how to recognise signs and symptoms of abuse, how to respond to children and young people who disclose abuse and what to do if they are concerned about a child.

## **6 SUPPORTING CHILDREN**

6.1 We recognise that children who are abused or witness violence are likely to have low self-esteem and may find it difficult to develop a sense of self-worth. They may feel helpless, humiliated and some sense of blame.

6.2 We accept that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

6.3 We will support all young people by:

- Ensuring that child protection is central to service provision to help children stay safe, recognise when they do not feel safe and identify who they might or can talk to.
- Providing young people with a number of appropriate adults to approach if they are in difficulties.
- Supporting the child's development in ways that will foster security, confidence and independence.
- Encouraging development of self-esteem and self-assertiveness while not condoning aggression or bullying.
- Liaising and working together with other support services and those agencies involved in safeguarding children; and
- Monitoring children who have been identified as having welfare or protection concerns and providing appropriate support.

## **7 CHILD PROTECTION AND SAFEGUARDING PROCEDURE**

- 7.1 We have developed a structured procedure in line with <http://sussexchildprotection.procedures.org.uk/> which will be followed by all members of our community in cases of suspected abuse. This is detailed in Appendix B.
- 7.2 In line with the procedures, the school at which the child attends and/or Multi Agency Safeguarding Hub (MASH) will be notified as soon as there is a significant concern.
- 7.3 The name of the Designated Safeguarding Lead will be clearly displayed.
- 7.4 We will ensure all parents and carers are aware of the responsibilities of staff members to safeguard and promote the welfare of children by publishing the policy and procedures on our website.

## **8 RECORD KEEPING**

- 8.1 We will ensure that records are maintained appropriately for children with safeguarding concerns and that confidential stand-alone files are created and maintained.

## **9 SAFER WORKFORCE AND MANAGING ALLEGATIONS AGAINST STAFF AND VOLUNTEERS**

- 9.1 We will prevent people who pose risks to children from working for our organisation by ensuring that all individuals working in any capacity have been subjected to safeguarding checks in line with safer recruitment guidance and practice.
- 9.2 We will ensure that agencies and third parties supplying staff provide us evidence that they have made the appropriate level of safeguarding checks on individuals we may work with.
- 9.3 Every job description and person specification will have a clear statement about the safeguarding responsibilities of the post holder.
- 9.4 We will ensure that at least one member of every interview panel has completed Safer Recruitment Training.
- 9.5 We have a procedure in place to handle allegations against members of staff and volunteers in line with:  
<http://sussexchildprotection.procedures.org.uk/tkhp/children-in-specific-circumstances/allegations-against-people-who-work-with-care-for-or-volunteer-with-children>

## **10 STAFF INDUCTION, TRAINING AND DEVELOPMENT**

- 10.1 All new members of the team will be given an induction which includes child protection/safeguarding training on how to recognise signs of abuse, how to respond to any concerns, e-safety and familiarisation with the child protection policy, guidelines for self protection and the role of the Designated Safeguarding Lead.
- 10.2 The induction will be proportionate to staff members' roles and responsibilities.
- 10.3 The Designated Safeguarding Lead will undergo child protection training, when appointed to post.
- 10.4 Staff members must ensure they have read and understood this policy.

## **11 CONFIDENTIALITY, CONSENT AND INFORMATION SHARING**

- 11.1 We recognise that all matters relating to child protection are confidential.
- 11.2 The Designated Safeguarding Lead will only disclose information about a child or young person to other members of staff on a need-to-know basis.
- 11.3 All members must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or well-being.
- 11.4 All members have a professional responsibility to share information with other agencies in order to safeguard children.
- 11.5 We will ensure that members are confident about what they can and should do under the law, including how to obtain consent to share information and when information can be shared without consent. This is covered in greater detail in Appendix B.

## **12 WHISTLE-BLOWING AND COMPLAINTS**

- 12.1 We recognise that children cannot be expected to raise concerns in an environment where members fail to do so.
- 12.2 We will ensure that all staff members are aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues. If necessary, they will speak with the Designated Lead, or with the Local Authority Designated Officer.
- 12.3 We have a clear reporting procedure for children, parents and other people to report

concerns or complaints, including abusive or poor practice.

### **13 SITE SECURITY**

- 13.1 All staff members have a responsibility to ensure our buildings and grounds are secure and for reporting concerns that may come to light.
- 13.2 We check the identity of all visitors and volunteers coming into our building. Visitors are expected to sign in and out in the office visitors' log and to display a visitor's badge. Any individual who is not known or identifiable will be challenged for clarification and reassurance.
- 13.3 We will not accept the behaviour of any individual, parent or anyone else, that threatens security or leads others, child or adult, to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse the person access to where provision is taking place.

### **14 POLICY REVIEW**

- 14.1 This policy and the procedures will be reviewed every year. All other linked policies will be reviewed in line with the policy review cycle.
- 17.2 The Designated Safeguarding Lead will ensure that staff members are made aware of any amendments to policies and procedures.

## **APPENDIX A**

### **1 MANAGING REFERRALS**

- 1.1 Refer all cases of suspected abuse to the Integrated front door (IFD) school or the Police if a crime may have been committed
- 1.2 Cases which involve concern around a member of staff should be referred to the LADO as well.





- 1.3 The Disclosure and Barring Service will also be informed where a person is dismissed or left the service due to posing a risk or harm to a child.
- 1.4 Act as a source of support, advice and expertise to staff members on matters of child protection and safeguarding.

## **2 RECORD KEEPING**

- 2.1 Keep detailed, accurate, secure written records of child protection and welfare concerns and referrals.
- 2.2 Ensure a stand-alone file is created as necessary for children with safeguarding concerns.
- 2.3 Maintain a chronology of significant incidents for each child with safeguarding concerns.
- 2.4 Ensure such records are kept confidentially and securely.

## **3 INTER-AGENCY WORKING AND INFORMATION SHARING**

- 3.1 Cooperate with Children's Social Work Services for enquiries under Section 47 of the Children Act 1989.
- 3.2 Liaise with other agencies working with the child, share information as appropriate and contribute to assessments.

## APPENDIX B

### 1 DEFINITIONS

- 1.1 **Abuse**, including neglect, is a form of maltreatment. A person may abuse a child by inflicting harm or by failing to prevent harm. Children may be abused within their family, in an institutional or community setting, by those known to them, or, more rarely, by a stranger.
- 1.2 **Children** are any people who have not yet reached their 18<sup>th</sup> birthday; a 16-year-old, whether living independently, in further education, in the armed forces or in hospital, is a child and is entitled to the same protection and services as anyone younger.
- 1.3 **Child protection** is part of safeguarding and promoting the welfare of children and refers to activity undertaken to protect specific children who are suffering, or likely to suffer significant harm.
- 1.4 **Early Help** means providing support as soon as a problem e [redacted] child's life, from the foundation years to teenage years.
- 1.5 **Harm** is ill treatment or impairment of health and development, including impairment suffered from seeing or hearing the ill treatment of another.
- 1.6 **Safeguarding children** is the action we take to promote the welfare of children and protect them from harm. **Safeguarding and promoting the welfare of children** is defined in [\*Working Together to Safeguard Children: A Guide to Inter-Agency Working to Safeguard and Promote the Welfare of Children \(March 2015\)\*](#) as:
- Protecting children from maltreatment.
  - Preventing impairment of children's health and development.
  - Ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
  - Taking action to enable all children to have the best outcomes.
- 1.7 **Significant harm** is the threshold that justifies compulsory intervention in the family in the best interests of the child. Section 31 of the Children Act 1989 states 'where the question of whether harm suffered by a child is significant turns on the child's health or development, his health or development shall be compared with that which could reasonably be expected of a similar child.'
- 1.8 For more definitions, see <http://sussexchildprotection.procedures.org.uk/>

## 2 CATEGORIES OF ABUSE

2.1 **Emotional abuse** is the persistent emotional maltreatment of a child such that it causes severe and persistent adverse effects on the child's emotional development. It may involve:

- Making a child feel worthless, unloved or inadequate.
- Only there to meet another's needs.
- Inappropriate age or developmental expectations.
- Overprotection and limitation of exploration, learning and social interaction.
- Seeing or hearing the ill treatment of another, e.g. domestic abuse.
- Making the child feel worthless and unloved - high criticism and low warmth.
- Serious bullying.
- Exploitation or corruption.

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

2.2 **Neglect** is the persistent failure to meet a child's basic physical 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 misuse. Once a child is born, it may involve a parent failing to:

- Provide adequate food, clothing and shelter, including exclusion from home or abandonment.
- Protect a child from physical and emotional harm or danger.
- Ensure adequate supervision, including the use of inadequate care givers.
- Ensure access to appropriate medical care or treatment.

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

2.3 **Physical abuse** may involve hitting, shaking, throwing, poisoning, burning, 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.

2.4 **Sexual abuse** involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. Activities may involve physical contact, including penetration of any part of the body, or non-penetrative acts. They may include non-contact activities, such as involving children looking at or in the production of sexual images, including on the internet, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Child sexual exploitation is also sexual abuse; it involves children and young people receiving something, for example accommodation, drugs, gifts or affection, as a result of them performing sexual activities, or having others perform sexual activities on them. It could take the form of grooming of children, e.g. to take part in sexual activities or to post sexual images of themselves on the internet.

### **3 SPECIFIC SAFEGUARDING ISSUES**

3.1 All staff need to be aware of specific safeguarding issues and be alert to any risks. Chapter 8 of the <http://sussexchildprotection.procedures.org.uk/> has detailed information about specific issues such as Child Sexual Exploitation, Female Genital Mutilation, Private Fostering, etc., and the local procedures to respond to risks.

3.2 Within Keeping Children Safe in Education, the following specific safeguarding issues are highlighted:

- Child missing from education
- Child missing from home or care
- Child sexual exploitation
- Bullying including cyberbullying
- Domestic violence
- Drugs
- Fabricated or induced illness
- Faith abuse
- Female Genital Mutilation
- Forced marriage
- Gangs and youth violence
- Gender-based violence/violence against women and girls (VAWG)
- Mental health
- Private fostering
- Preventing radicalisation
- Sexting
- Teenage relationship abuse
- Trafficking

3.3 Under the Female Genital Mutilation Act 2003 teachers have a mandatory duty to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18.

3.4 Under the Counter-Terrorism and Security Act 2015 schools have a duty to have due regard to the need to prevent people from being drawn into terrorism. Schools are expected to assess the risk of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology and to refer these children/families for support/intervention as necessary.

### **4 RECOGNITION – WHAT TO LOOK FOR**

- 4.1 Staff members should refer to the detailed information about the categories of abuse and risk indicators within <http://sussexchildprotection.procedures.org.uk/> for further guidance.
- 4.2 In an abusive relationship, the child may:
- Appear frightened of their parent(s).
  - Act in a way that is inappropriate to their age and development, although full account needs to be taken of different patterns of development and different ethnic groups.
- 4.3 In an abusive relationship, the parent or carer may:
- Persistently avoid child health services and treatment of the child's illnesses.
  - Have unrealistic expectations of the child.
  - Frequently complain about or to the child and fail to provide attention or praise.
  - Be absent.
  - Be misusing substances.
  - Persistently refuse to allow access on home visits by professionals.
  - Be involved in domestic violence and abuse.
  - Be socially isolated.
- 4.4 Serious case reviews have found that parental substance misuse, domestic abuse and mental health problems, sometimes referred to as the 'toxic trio', if they coexist in a family could mean significant risks to children. Problems can be compounded by poverty, frequent house moves or eviction.

## **5 Children's Services Continuum of Need /Threshold Guidance**

- 5.1 The Children's Services Continuum of Need / Threshold Guidance has been developed so that everyone working with children in West Sussex has a common language for understanding the needs and risks surrounding children and their families.
- 5.2 For example, if any member has concerns about a child and needs advice or support from the MASH, they will use the Threshold Guidance as a guide to understand the concerns and provide advice about what to do or to decide whether the child and family need social care involvement. The Threshold Document does not replace professional judgement, but it is intended to support decision-making and discussions between services and practitioners.
- 5.3 It is important that staff members are familiar with the Threshold Document, which can be accessed <https://www.westsussexscp.org.uk/professionals/working-together/west-sussex-continuum-of-need-threshold-guidance/> and clicking on the Continuum of Need Threshold Guidance 2019.
- 5.4 The Continuum of Need shows that a child's or family's additional needs can be on a range from none to very high, and that needs can shift from early help to specialist and back to targeted early help. It covers children whose needs are increasing as well as children whose needs are decreasing after Children's Social Work Services involvement. The Threshold

Guidance/Continuum of Need will help practitioners to identify the right level of support for the child in the least intrusive way while keeping the child safe.

5.5 The Threshold Guidance/Continuum of Need identifies four levels of need:

Level 1:

- Children who are achieving expected outcomes.
- Their needs are met by their parents and by accessing universal services such as health and education.
- They do not have additional needs.

Level 2:

- Children with additional needs.
- Parents need professional support or guidance to help them meet their children's needs.
- Extra support can usually be provided by agencies that already know the family, e.g. their pre-school, school, college or NHS community services such as Health Visiting.

Level 3:

- Children with multiple and complex needs.
- Children and parents need targeted early help or specialist services to meet the children's needs.
- Needs are met through multi-agency support and the use of Early Help Plans.

Level 4:

- Children with acute needs, including those in need of protection.
- Children and parents need multi-agency responses which include specialist intervention from Children's Social Work Services through the family assessment process.

5.7 By referring to the Threshold Guidance/Continuum of Need, staff can identify when assessment and support for a child and family need 'stepping up' to a referral to Social Work Services and when the needs of a child and their family have been reduced enough for them to be 'stepped down' to early help services.

## 6 WHAT ACTION TO TAKE IF YOU HAVE CONCERNS ABOUT A CHILD

Staff member	What action to take if you have concerns
Any member, volunteer, contractor or activity provider	<ul style="list-style-type: none"> <li>● Discuss your concerns with the Designated Safeguarding Lead as a matter of urgency i.e. on the same day you have concerns.</li> <li>● If the Designated Safeguarding Lead is not available, you should contact the IFD Integrated front door WSCC Inform the Designated Safeguarding Lead about what actions you have taken.</li> </ul>
Designated Safeguarding Lead	<p><b>You are concerned that the child is at risk of significant harm (Level 4 Threshold Guidance/Continuum of Need)</b></p> <ul style="list-style-type: none"> <li>● Contact IFD -Integrated front door West Sussex County Council (details on page 2)</li> <li>● If you believe that the child is in immediate danger, or you suspect a crime has been committed, you must also contact the police immediately.</li> </ul>
	<p><b>You believe the child is not at risk of significant harm, but the child or their family may need support (Level 2 or 3 Threshold Guidance/Continuum of Need)</b></p> <ul style="list-style-type: none"> <li>● Use the Threshold Guidance/Continuum of Need to identify the level of need.</li> <li>● Discuss your concerns with senior colleagues in another agency, if necessary.</li> <li>● If your consultation results in the decision that the child and family are in need of help at Level 2 or 3 of the Threshold Guidance/Continuum of Need, provide additional support in the school and/or refer the child or their family to other agencies providing <b>early help services</b>.</li> <li>● Record all your consultations and decision-making on the <b>Child Protection Incident/Welfare Concern form</b> sent by the staff member who contacted you originally. Update the chronology and add referral letters and forms to the child's file; create a stand-alone file, if one does not exist. Continue to update the file, including the chronology, as work progresses.</li> </ul>

## **7 DEALING WITH A DISCLOSURE MADE BY A CHILD – ADVICE FOR ALL MEMBERS OF STAFF**

- 7.1 If a child discloses that he or she has been abused in some way, the member of staff or volunteer should follow this guidance.
- Listen to what is being said without displaying shock or disbelief.
  - Only ask questions when necessary to clarify, and without suggesting what the answer might be.
  - Accept what is being said.
  - Allow the child to talk freely – do not put words in the child’s mouth.
  - Reassure the child that what has happened is not his or her fault.
  - Do not make promises that you may not be able to keep.
  - Do not promise confidentiality – it may be necessary to refer the child to Children’s Social Care.
  - Stress that it was the right thing to tell.
  - Do not criticise the alleged perpetrator.
  - Explain what has to be done next and who has to be told.
  - Inform the Designated Safeguarding Lead without delay.
  - Dealing with a disclosure from a child and safeguarding issues can be stressful. Consider seeking support for yourself and discuss this with the Designated Safeguarding Lead.

## **8 DISCUSSING CONCERNS WITH THE FAMILY AND THE CHILD – ADVICE FOR THE DESIGNATED SAFEGUARDING LEAD**

- 8.1 In general, you should always discuss any concerns with the child’s parents. They need to know that you are worried about their child. However, you should not discuss your concerns if you believe that this would place the child at greater risk or lead to loss of evidence for a police investigation.
- 8.2 **If you make a decision not to discuss your concerns with the child’s parents or carers** this must be recorded in the child’s child protection file with a full explanation for your decision.
- 8.3 When talking to children, you should take account of their age, understanding and preferred language, which may not be English. It is also important to consider how a disabled child may need support in communicating.
- 8.4 How you talk to a child will also depend on the substance and seriousness of the concerns. You may need to seek advice from the MASH or the Police to ensure that neither the safety of the child nor any subsequent investigation is jeopardised.
- 8.5 If concerns have arisen as a result of information given by a child, it is important to reassure the child but not to promise confidentiality.



8.6 **It is expected that you discuss your concerns with the parents before making a referral to the Threshold Guidance/Continuum of Need, unless you consider that this would place the child at increased risk of significant harm.**

8.7 Parents will ultimately be made aware of which organisation made the referral.

## **9. MULTI AGENCY SAFEGUARDING HUB RESPONSES TO CONCERNS ABOUT A CHILD**

9.1 Once Children's Social Work Services has accepted a referral as needing a social-care-led response (Level 4 of the Threshold Guidance/Continuum of Need), a senior social work practitioner and their manager will evaluate the concerns to identify the sources and levels of risk and to agree what protective action may be necessary.

9.2 The evaluation of concerns and risks involve deciding whether:

- The child needs immediate protection and urgent action is necessary; or
- The child is suffering, or at risk of suffering, significant harm and enquiries need to be made under section 47 of the Children Act 1989; or
- The child is in need and should be assessed under section 17 of the Children Act 1989.

## **10. INFORMATION SHARING AND CONSENT**

10.1 It is essential that people working with children can confidently share information as part of their day-to-day work. This is necessary not only to safeguard and protect children from harm but also to work together to support families to improve outcomes for all.

10.2 We will proactively seek out information as well as sharing it. This means checking with other professionals whether they have information that helps us to be as well informed as possible when working to support children.

10.3 The Data Protection Act is not a barrier to sharing information. It is there to ensure that personal information is managed in a sensible way and that a balance is struck between a person's privacy and public protection.

10.4 We should be sharing any concerns we have with parents at an early stage, unless this would put a child at greater risk or compromise an investigation. Parents need to know what our responsibilities are for safeguarding and protecting children and that this involves sharing information about them with other professionals.

10.5 Try to get consent from parents (or the child, if they have sufficient understanding<sup>1</sup>) to share information, if possible. However, **you do not need consent if you have serious concerns about a child's safety and well-being.**

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- 10.6 **Consent is not necessary** in cases where Children’s Social Work Services are making child protection enquiries under section 47 of the Children Act 1989. Information needs to be shared with Children’s Social Work Services; staff members must make sure to record what information has been shared.
- 10.7 If you are in any doubt about the need for seeking consent, get advice from the Multi Agency Safeguarding Hub (MASH) /Designated Safeguarding Lead.

## **11. RECORD KEEPING**

- 11.1 Good record keeping is an important part of our accountability and to respond appropriately to welfare concerns about children.
- 11.2 Records should be factual, accurate, relevant, up to date and auditable.
- 11.3 The Designated Safeguarding Lead will ensure that records are maintained appropriately for children with safeguarding concerns.

## **12. SAFER RECRUITMENT**

- 12.1 We have robust recruitment and vetting procedures to help prevent unsuitable people from working with children:
- Application.
  - 2 tier interview with at least two members of senior staff.
  - 2 reference checks.
  - Enhanced DBS check (every 3 years).
  - Induction training: Policies and Safeguarding.
- 12.2 All staff members who have contact with children, young people and families will have appropriate pre-employment checks.
- 12.3 At least one member on every shortlisting and interview panel will have completed safer recruitment training.

## **13 PROCEDURE FOR MANAGING ALLEGATIONS OF ABUSE MADE AGAINST MEMBERS OF STAFF**

- 13.1 **Angling4Education** takes seriously all allegations of abuse made against staff members, including volunteers, and will investigate them in line with the statutory guidance, and the <http://sussexchildprotection.procedures.org.uk/>
- 13.2 The process described below is a summary of the procedure described in the above documents. The case manager for the investigation should refer to them for details.

- 13.3 The allegations management procedure will be used in all cases where it is alleged that a member, has:
- Behaved in a way that has harmed a child, or may have harmed a child; or
  - Possibly committed a criminal offence against or related to a child; or
  - Behaved towards a child or children in a way that indicates that they would pose a risk of harm if they work regularly or closely with children.
- 13.5 Allegations may arise in a number of ways, for example a report from a child, a complaint from a parent, or a concern raised by another adult within the school. An allegation may concern someone's behaviour or actions within their job or a voluntary activity, or within their family or private life.
- 13.6 **Any concerns will be considered in the context of the four types of abuse** (see section 2 above).
- 13.7 Concerns include inappropriate relationships between adults and children. For example:
- A sexual relationship between a child under 18 and an adult in a position of trust with them, even if the relationship may appear to be consensual;
  - Grooming, i.e. meeting a child under 16 with intent to commit a relevant offence (section 15 of the Sexual Offences Act 2003); or
  - Other behaviour that gives rise to concerns, such as possession of abusive images of children or inappropriate contact through texts or online, inappropriate messages, gifts or socialising with children.
- 13.8 If an allegation or concern arises about a staff member outside of their work with children, and this may present a risk to children for whom the staff member is responsible, the general principles outlined in these procedures will still apply.
- 13.9 **Roles and responsibilities:**
- **Anyone who has concerns** about, or has received an allegation about, the behaviour of a staff member **needs to report the concerns immediately to the head of service. In the absence of the head of service, or if the head of service is the subject of the allegation, concerns must be reported to the Local Authority Designated Officer (LADO).**
  - The **Designated Safeguarding Lead will act as the case manager** for investigations of allegations and liaise with the **LADO**.
  - Another identified member will act **as the case manager**, if the allegation is made against the Designated Safeguarding Lead.
  - The **LADO** is involved in the overall management and oversight of individual cases. They will provide advice and guidance to the case manager, liaise with the police and other agencies and monitor the progress of cases to ensure that they are dealt with as quickly as possible, consistent with a thorough and fair process.

### 13.10 Initial action by the person noticing concerns or receiving an allegation first:

- Treat the matter seriously and keep an open mind.
- Do not make assumptions or offer alternative explanations.
- Do not investigate or ask leading questions, if seeking clarification.
- Do not promise confidentiality, but give assurance that the information will only be shared on a need-to-know basis.
- Act quickly.
- Make a written record of the information. Where possible, record the exact words of the person making the allegation or the child's own words.
- Record the time, date and place and names of people present when the allegation was made or concerning behaviour was observed. Record the time, date and place of alleged incidents, persons present and what was said, if these were mentioned by the person making the allegation.
- Sign and date the written record.
- Immediately report the matter to the head of service, as in 15.9 above and give them the written record.

### 13.11 Initial response by the case manager:

- Do not investigate the matter immediately or interview the staff member or the child concerned.
- Obtain written details of the concern or allegation, signed and dated by the person reporting it. Countersign and date the written details and record the decisions made and the reasons for those decisions.
- Contact the LADO immediately to report the allegation and for a consultation. The allegation must be reported within one day at the most.
- If the allegation requires immediate attention but is received out of hours, contact the Children's Services Emergency Duty Team or the police and inform the LADO as soon as possible.
- Refer allegations against a former member who is no longer involved to the Police in the first instance and then inform the LADO.

### 13.12 Initial consideration of the allegation by the case manager and the LADO:

- The case manager and the LADO will consider the nature, content and context of the allegation and agree on a course of action, including whether further information is needed.
- The case manager may need to obtain relevant additional information, such as previous history, whether the child or their family have made similar allegations in the past and the member's current contact with children.
- If the allegation is not demonstrably false and there is cause to suspect that a child is suffering or likely to suffer significant harm, the LADO will refer the case to Children's Social Work Services and ask them to convene a strategy discussion.
- The LADO will consult the police if a criminal offence may have been committed. If the threshold for significant harm is not reached but a police investigation may be needed, the LADO will immediately inform the police.
- If an investigation by Children's Social Work Services or the police is not necessary, the case manager and the LADO will discuss the options open to the school

depending on the nature of the allegation and the evidence available. This will range from taking no further action to dismissal or a decision not to use the member's services in the future.

- If the initial evaluation leads to no further action against the member concerned, the decision and justification should be recorded by both the case manager and the LADO. Agreement should be reached on what information should be put in writing to the individual and what action should follow, including informing the person who made the allegation originally.

#### 13.13 **Persons to be notified:**

- After consultation with the LADO, the case manager should inform the accused person about the allegation as soon as possible.
- **However, if a strategy discussion is needed, or the police or Children's Social Work Services need to be involved, the case manager should not inform the accused person until those agencies have been consulted and have agreed what information can be disclosed to the individual.**
- In principle, the case manager should inform the parents or carers of the children involved about the allegation. The LADO should be consulted first to ensure that this will not impede any investigation or disciplinary process. In some cases, the parents or carers may need to be informed right away, e.g. if a child is injured and needs medical attention.
- The parents or carers and the child, if sufficiently mature, should be helped to understand the process and kept informed about the progress of the case and the outcome if no criminal prosecution will take place.

#### 13.14 **Confidentiality:**

- Every effort should be made to maintain confidentiality and guard against publicity while an allegation is being investigated. Information should be restricted to only those who need to know in order to protect the children concerned, carry out the investigation and manage the disciplinary process.
- The case manager should discuss with the LADO how best to manage speculation, leaks and gossip within the organisation and the community at large, and press interest, if it arises.

#### 13.15 **Supporting people:**

- We, together with Children's Social Work Services and the police, if they are involved, will consider the impact on the child concerned and provide support as appropriate.
- The member who is the subject of the allegation will be advised to contact their union, professional association or a colleague for support.

#### 13.16 **Managing risk during the investigation:**

- The perceived level of risk during the investigation needs to be considered and managed. In some situations the level of risk may require the member not to be working with specific children or all children until the investigation is completed.
- There are several options including:

- redeployment so as not to come into direct contact with one or more children; or
  - refraining (agreeing that the person will not work with children during the investigation); or
  - suspension.
- Refraining and suspension should be considered as neutral acts and should not be automatic. Suspension should be considered only in cases where there is cause to believe children working with the organisation are at risk of harm or the allegation is so serious that it might be grounds for dismissal.
  - Decisions about risk are best made in a multi-agency forum such as the strategy discussion. The LADO will canvass the views of the agencies participating and inform the case manager. However, only the employer has the power to refrain or suspend.
  - Possible risks to the children involved and any children in the accused member's home, work or community life will be evaluated and managed.

#### 13.17 Timescales:

- Cases will be resolved as quickly as possible, consistent with a thorough and fair investigation.
- It is expected that the majority of cases should be resolved within one month and all but the most exceptional cases should be resolved within 12 months.
- However, the timing will depend on the nature, seriousness and complexity of the case and the right outcome is far more important than meeting timescales.

#### 13.19 Outcomes of investigations of allegations:

- **Substantiated** – there is sufficient evidence to prove the allegation
- **Malicious** – there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive
- **False** – there is sufficient evidence to disprove the allegation
- **Unsubstantiated** – there is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.

#### 13.20 Disciplinary or suitability process and investigations:

- The LADO and the case manager will discuss whether disciplinary action is appropriate in all cases where:
  - it is clear at the outset, or decided by a strategy discussion, that a Police investigation or section 47 enquiry is not necessary; or
  - the Police or the Crown Prosecution Service informs that the criminal investigation and subsequent trial are complete, or that an investigation is to be closed without charge, or prosecution is discontinued.
- The discussion will consider any potential misconduct or gross misconduct by the member, and take into account:
  - the information provided by the Police and Children's Services;
  - the result of any investigation or trial; and
  - the different standards of proof in disciplinary and criminal proceedings.

- In the case of supply, contract or volunteer workers, the LADO and the case manager will work with the providing agency in deciding whether to continue using the person's services or whether they can provide future work with children or whether to report them for barring considerations.

#### 13.21 References:

- If the allegation was proven to be malicious or false it will not be included in any references for the member.

#### 13.22 Informing the Disclosure and Barring Service (DBS):

- The LADO will discuss with the case manager whether the school will refer the staff member to the DBS if the allegation is substantiated and the person is dismissed or the school ceases to use the person's services, or the person resigns or ceases to provide their services.

### 14. Safeguarding and third parties

14.1 **Third party requests for staff information** – A4E has a robust recruitment process as part of this A4E process and Enhanced DBS check. Once this is received A4E will:

- The Safeguarding Lead will check the paper copy in person with the staff member present in accordance with the Data Protection Act/GDPR.
- It is mandatory for A4E staff to activate the DBS update services whilst working for the organisation - This is checked yearly in April in accordance with our DBS process policy. Available on request.
- A4E produces a form which holds the verified DBS certificate number/ Name of applicant/ and date checked. This form can be sent to any professional third parties in which request this information. This is in accordance with GDPR guidance that DBS certificates should not be copied and only verified in person.

### 15. Contextual Safeguarding of children and young people

#### Introduction

- 15.1 The conventional approach to safeguarding children has mainly centred on risks within the household, overlooking the influences and dangers children and young people face beyond their family environment. Contextual Safeguarding broadens this perspective by considering not only familial dynamics but also the impact of peer relationships, school environments, and community settings on young people's safety and well-being.

15.2 Acknowledging that children and young people increasingly socialise beyond the home as they transition into adolescence, Contextual Safeguarding understands the potential risks they may encounter from both adults and peers in these external settings and aims to identify and address harm and [abuse](#) in all environments where young people interact.

15.3 Peer relationships become more influential during adolescence, shaping the experiences, behaviours, and choices of young people while also influencing their peer status. These relationships are influenced by and contribute to the social norms of the child.

### Areas of Risk

15.4 Contextual Safeguarding is applicable to a wide range of risks which can potentially cause [significant harm](#) to children and young people where the prime cause of harm is outside of the family. This list isn't exhaustive but includes:

- Peer on peer relationship [abuse](#)
- Criminal/ sexual exploitation/ online [abuse - Criminal and sexual exploitation including serious organised crime and gangs](#)
- Missing episodes [Joint Policy for Children Missing, Safeguarding children who are absent from education](#)
- Risks associated with gangs
- Risks associated with radicalisation [Children and Young People Susceptible to Violent Extremism](#)
- Safeguarding risks in public spaces
- Trafficking and modern slavery - [Safeguarding Children who arrive from abroad \(including Unaccompanied Asylum Seeking Children, Victims of Modern Slavery, Trafficking and Exploitation\), Child victims of modern slavery and trafficking](#)

### 15.5 Definition

Dr. Carleen Firmin, a British social researcher from the University of Bedfordshire, coined the term Contextual Safeguarding to refer to child protection methods that address risks or abuse beyond the family environment:

“Contextual Safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's



experiences of extra-familial abuse can undermine parent-child relationships. Therefore children's social care practitioners need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.”

(Firmin 2017)

## 15.6 General Principles

The following principles collectively contribute to a nuanced and responsive approach to safeguarding that prioritises the safety, well-being, and rights of children and young people in diverse contexts.

1. Collaborative: Working in partnership with professionals, children, young people, families, and communities fosters a collective effort to ensure safety and well-being.
2. Ecological: Understanding the interconnectedness between the environments where young people face risks and the broader social inequalities that shape these environments is crucial for effective safeguarding.
3. Rights-based: Grounding safeguarding efforts in the principles of children's and human rights ensures that interventions are respectful, dignified, and aligned with ethical standards.
4. Strengths-based: Recognizing and leveraging the strengths and resilience of individuals and communities empowers them to actively participate in safeguarding processes and achieve sustainable change.
5. Evidence-informed: Relying on empirical evidence and lived experience helps in crafting solutions that are practical, relevant, and responsive to the realities of children's lives and experiences of exploitation.
6. Tailored Approach: Acknowledging the complexity of exploitation requires customised interventions that address the unique circumstances and needs of each child or young person at risk.

## 15.7 Contextual Safeguarding and the Child Protection System

The child protection system, along with its legislative and policy framework, was established to protect children and young people from risks originating from their families or situations where families lacked the capacity to ensure their safety. While existing approaches address some extra-familial risks that diminish family capacity, traditional methods typically involve intervening with families to enhance their ability to protect young people from harm or relocating them from harmful environments.

In contrast, a Contextual Safeguarding system promotes strategies that disrupt or transform harmful extra-familial contexts rather than merely relocating families or young people away from them. Recognising that parents or carers may not have the means to change these contexts, the focus shifts to professionals and service providers within these spaces, who play a crucial role in the safeguarding agenda.

This broader approach expands the concept of 'capacity to safeguard' beyond families to include individuals and agencies responsible for managing extra-familial settings where young people encounter risks.

Contextual Safeguarding broadens the objectives of child protection systems, acknowledging that young people are susceptible to [abuse](#) in various social contexts.

## 15.8 Response

There are existing processes in place to address child harm or potential harm, and it's important to continue following them. These processes support individualised safeguarding efforts that consider broader contexts and involve sharing information across teams and services for a collaborative response to significant risks and concerns.

Within these processes, it's crucial to identify connections between multiple incidents and individuals.

## **15.9 The Domains of Contextual Safeguarding**

The domains of Contextual Safeguarding encompass different aspects of safeguarding efforts that extend beyond traditional family-focused approaches.

These domains include:

Targeting the social conditions of harm (Domain 1): This domain involves addressing the broader social factors and environmental influences that contribute to harm and abuse experienced by children and young people outside the home.

Recognising the changing nature of risks and vulnerabilities (Domain 2): Contextual Safeguarding acknowledges that risks to children and young people evolve as they transition through different stages of development and interact with various environments.

Developing multi-agency responses (Domain 3): Collaborative working among different agencies and sectors is essential to effectively respond to safeguarding concerns and address complex issues across multiple contexts.

Measuring outcomes within a context (Domain 4): Evaluating the effectiveness of interventions and safeguarding measures involves assessing not only individual safety but also the overall safety and well-being of the environments where children and young people spend time.

## **15.10 Contextual Safeguarding Strategy Discussion**

During the risk assessment process, professionals may identify several young individuals at risk of significant harm or exploitation. Schools and other services frequented by children and young people play a crucial role in identifying those most vulnerable.

### **15.11 Contextual Safeguarding Strategy Meeting**

During the risk assessment process, professionals may identify several young individuals at risk of significant harm or exploitation. Schools and other services frequented by children and young people play a crucial role in identifying those most vulnerable.

For those deemed most at risk, it is important to make a referral, as detailed in Making a Referral.

A Contextual Safeguarding Strategy Meeting, chaired by a Senior Child Protection Manager from Children's Services or their designated representative, should be convened.

Participants should include representatives from: schools, relevant children's services, MASH/SPOA/FDFF), Police, Youth Offending Service, physical and mental health services, early help teams, and any other relevant agencies with significant involvement and knowledge of the children and young people concerned.

The primary objective of the meeting is to consider the young people involved and assess the prevailing contextual risks.

Professionals attending should be prepared, if necessary, to allocate resources from their respective agencies to support the young person and address the identified risks effectively

Decisions regarding the necessity of individual Section 47 investigations will be made during this session.

In cases where a specific Section 47 investigation is deemed unnecessary, a lead agency will be identified to oversee the implementation of actions generated and monitor progress to support the young person.

The meeting needs to consider the potential impact of the concerns on young people and devise measures to mitigate any identified risks.

### **15.12 The Contextual Safeguarding Strategy Meeting is tasked with:**

- Assessing the available information.
- Determining additional information needed.
- Organising the collection of required data.
- Conducting an initial mapping exercise to gauge the extent of the response and identify young people in need of targeted support.
- Evaluating the necessity of immediate protective measures.
- To decide if the risks presented require a wider Complex Contextual Safeguarding Response. For example the issues relate to more than 4 children, cross boundaries and there is clear evidence of a network of exploitation

- Developing specific operational responses, such as service provision for high-risk young people who go missing.

### **15.13 Professionals who need to be informed**

Once the decision has been taken at the Contextual Safeguarding Strategy meeting to initiate a Complex Contextual Safeguarding Response, the Head of Safeguarding or equivalent in Children's Services must be informed. They must consider the need to inform the Safeguarding Children's Partnership and senior leaders.

### **15.14 Initiating A Complex Contextual Safeguarding Response**

A Complex Contextual Safeguarding Meeting must ensure that any current risks to children are acted upon immediately, whenever they emerge during the investigation and should consider developing a risk management protocol.

The Complex Contextual Safeguarding Meeting must make arrangements to convene regularly during the response to:

- Monitor the progress of the response
- Ensure alignment with other governance structures involved in the response
- Review risk indicators for the children involved;
- Consider resource requirements;
- Consider the appropriate timing of the termination of the response;
- Plan a de-brief meeting with the response management group to identify lessons learnt.
- Ensure that staff support structures and processes are in place and utilised.

### **15.15 Closure**

A clearly defined exit strategy is essential, encompassing both the closure of the response and ongoing support for the young people involved. Safety plans will be developed for each young person in collaboration with the relevant agencies.

Directly involved staff must undergo thorough debriefing upon conclusion of the response.

Following the response, each agency should conduct a review to identify any necessary or beneficial policy changes. This review will complement any concurrent or completed safeguarding practice reviews.

The Complex Contextual Safeguarding Meeting will hold a final meeting to share concluding information and debriefing. An overview report will be compiled and presented to the safeguarding partnership.

**Reviews and amendments:**

<b>Action</b>	<b>Date</b>	<b>Reviewed</b>	<b>Amendments</b>	<b>Name</b>
<b>First draft</b>	<b>21/10/2021</b>			<b>Kelly Gilholm</b>
	<b>09/02/2022</b>		<b>Updated safer recruitment guidelines with new DBS process policy</b>	<b>Kelly Gilholm</b>
	<b>05/05/2023</b>	<b>YES</b>	<b>Updated DSL</b>	<b>Kelly Gilholm</b>

			<b>and Lado details</b>	
	<b>16/10/2023</b>		<b>updated new web address for raising safeguarding concerns and requesting a service for children page</b>	<b>Kelly Gilholm</b>
<b>16/05/2024</b>		<b>YES</b>	<b>Reviewed and updated contact details page 2</b>  <b>Added section (14) Contextual Safeguarding of children and young people</b>	<b>Kelly Gilholm</b>

**Annual review date: May Yearly**