



SAFEGUARDING CHILDREN POLICY

Oxford Active acknowledges its duty of care to safeguard and promote the welfare of children using its services. This policy outlines the measures taken to ensure that our safeguarding practice reflects statutory responsibilities and puts first the welfare and interests of children at all times.

- All members of staff working with children are required to undertake safeguarding training to ensure that they have up to date knowledge of safeguarding issues, are able to identify signs of possible abuse and neglect at the earliest opportunity and respond in a timely and appropriate way
- Each setting has a named member of staff taking the lead in safeguarding who has undertaken appropriate training recommended by the local children's safeguarding board.
- Safe recruitment procedures are used in the appointment of all staff - these are outlined in the safe recruitment policy – to prevent the employment of unsuitable individuals
- All staff are required to have an enhanced DBS disclosure
- DBS disclosures for staff not on the DBS update service will be renewed every 3 years
- All staff are required to sign a Staff Suitability Declaration Form annually where they are expected to disclose any reasons if they, or anyone living in their household, have any convictions, cautions or are disqualified from caring for children.
- The use of mobile phones and cameras at settings is strictly controlled - this is covered in a separate policy
- All staff are required to be aware of the Prevent Duty to enable them to identify and protect children at risk of radicalisation and extremism
- Staff will seek to build children's resilience to radicalisation by promoting fundamental British values (such as the principles of freedom of belief and non-discrimination, and an understanding of how our democracy works) in order to provide a safe environment to allow children to discuss sensitive or controversial issues openly.

If staff have concerns about a child's welfare or safety

- Whilst it is not staff's responsibility to diagnose abuse it is, however, their duty to alert the appropriate authorities if they have knowledge of the abuse or neglect of a child, or anxieties about the welfare and safety of a child.
- Concerns over changes in a child's behaviour or appearance, unexplained bruising or marks, any comments made by a child, any deterioration in a child's general well-being should be reported promptly to the setting's Safeguarding Lead (a summary of the different categories of abuse is contained in Appendix 1).

- Any concerns should be recorded on a confidential record which should be kept separate from the main records for the child, and must only be accessible by the concerned members of staff and their manager/s. The record should include the name, address and age of the child, timed and dated observations, describing objectively the child's behaviour and appearance and, where possible, the exact words spoken by the child. The record should be signed and dated.
- If there is any doubt or uncertainty about the concerns, a no-names consultation may be sought with the local MASH.
- Normally, the child and the child's parent or carer will be consulted to find an explanation and this will be recorded. Staff will keep parents/carers fully informed about any actions they undertake unless they fear this may affect the safety of the child or future investigations.
- When a setting is based in the school the child attends, it may also be appropriate to consult the nominated person for safeguarding at that school so that relevant information can be shared.
- If the child's and parent/carer's explanations fail to allay fears for the child's safety, then the setting's Safeguarding Lead will contact the local MASH and will also report it to Oxford Active's Safeguarding Management Team.
- If children are suspected to be at risk of radicalisation, a referral should be made to Channel.
- When **definite** concerns about abuse arise (for example when a child confides in a member of staff about abuse taking place) then the Multi Agency Safeguarding Hub should be contacted **without delay**. The details of these allegations and what the child has said should be confidentially recorded as outlined above.
- All suspicions and investigations must be kept confidential, shared only with those who need to know – unless otherwise advised by the MASH, these are the setting Safeguarding Lead, the Oxford Active Safeguarding Management Team.

Whistle Blowing - Allegations against staff members

- All staff should take care not to put themselves in a vulnerable position with a child
- If an allegation is made that abuse by a member of staff may have taken place, the Safeguarding Lead for the setting will record the details of the incident and report this to the Local Authority Designated Officer **without delay**.
- The Safeguarding Lead for the setting will then also report this, without delay, to a member of the Oxford Active Safeguarding Team, unless otherwise advised by the LADO. The Safeguarding Team will inform the Director, unless otherwise advised by the LADO.
- Once the LADO has been informed of the allegation, the organisation's Safeguarding Management Team may carry forward the responsibility of liaising with the relevant agencies and authorities.
- Staff will co-operate entirely with any investigation carried out by the LADO.
- All suspicions and investigations will be kept confidential and shared only with those who need to know, as specified by the Safeguarding Management Team or the LADO.
- The person accused of abuse will be suspended from duty whilst the allegation is investigated. This is not an indication of admission that the alleged incident has taken place, but is to protect the staff as well as children and families throughout the process. If the allegation is unsubstantiated, the member of staff may return to work.
- Confidential records will be kept of the allegations and of all the subsequent proceedings.
- Ofsted will be informed of any staff member accused of child abuse immediately.

Oxford Active's Safeguarding Management Team:

Peter Parry on 01865 594324 or 07984 011987

Tanya Studholme on 01865 594324 or 07854 198698

Roxie Clarke on 01865 594324 or 07454 794616

Contact Details for Reporting Concerns

- To report a concern about a child, contact your local Multi Agency Safeguarding Hub (**MASH**)
- To report a concern about a member of staff, contact the **LADO** (Local Authority Designated Officer)
- Concerns about radicalisation of children should be referred to the **Channel** programme via your local MASH

OXFORDSHIRE

- MASH 0845 0507666 mash-childrens@oxfordshire.gcsx.gov.uk
- Emergency Duty Team 0800 833408
- LADO 01865 810603 / LADO.safeguardingchildren@oxfordshire.gov.uk

For advice if you are unsure whether to report your concerns contact:

- North Oxfordshire (including Banbury, Witney, Bicester, Carterton and Woodstock) – 01865 323039
- Oxford City – 01865 328563

For more information visit www.oscb.org.uk

WOKINGHAM

- MASH 0118 908 8002 (office hours only)
- Emergency Duty Team 01344 786 543
- LADO 0118 974 6141 LADO@wokingham.gcsx.gov.uk

For more information visit www.wokinghamlscb.org.uk

READING

- MASH 0118 937 3641 (office hours only) gcsxmash.team@reading.gcsx.gov.uk
- Emergency Duty Team 01344 786543
- LADO 0118 937 3555

For more information visit www.readinglscb.org.uk

WARWICKSHIRE

- MASH 01926 414144 (office hours only) or johncoleman@warwickshire.gov.uk
- Emergency Duty Team 01926 886922
- LADO 01926 742372 or lado@warwickshire.gcsx.gov.uk

For more information visit www.warwickshire.gov.uk/mash

WINDSOR

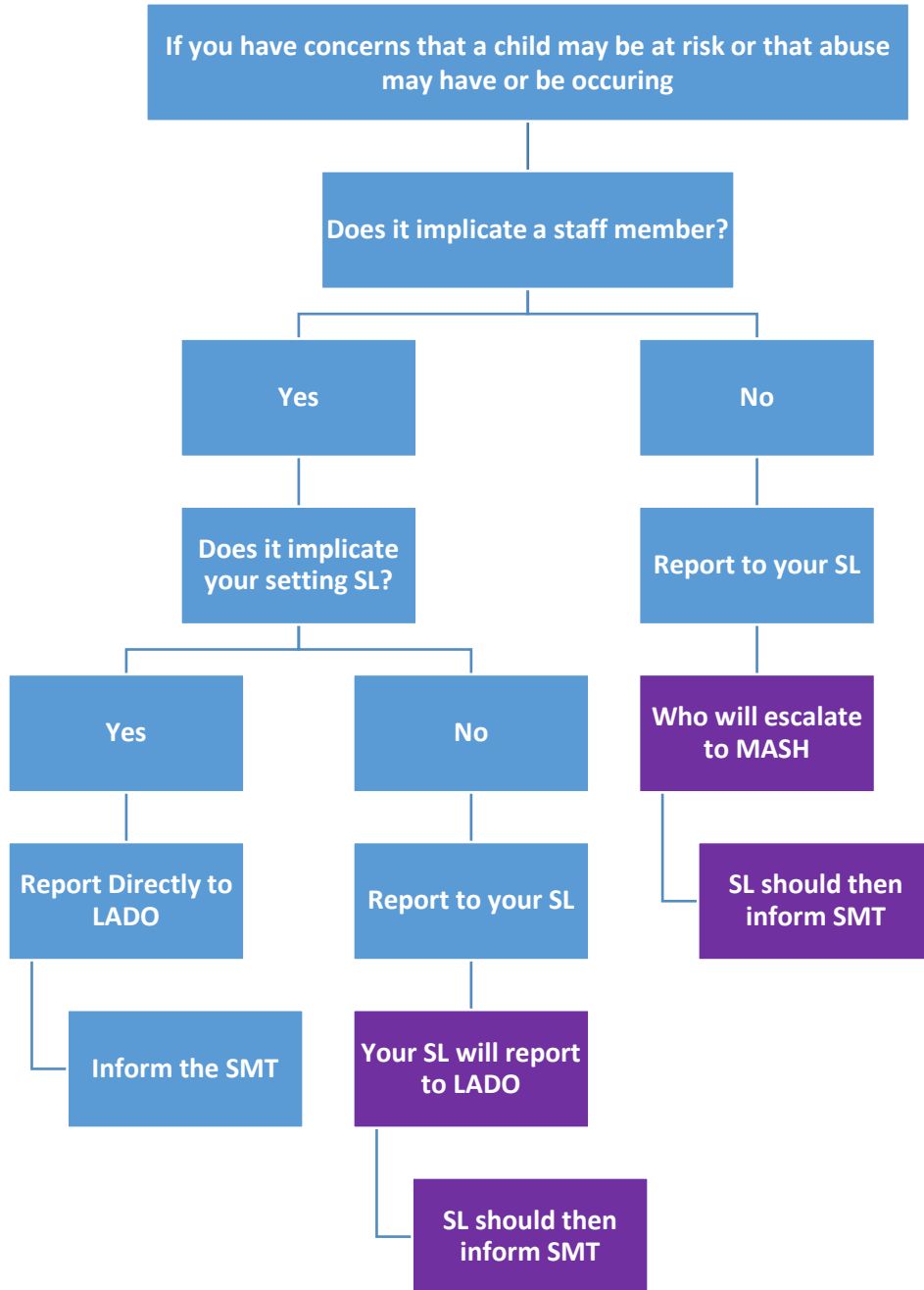
- MASH 01628 683150
- Emergency Duty Team 01344 786 543
- LADO 01628 683202

For more information visit www.wamlscb.org

Responsibility of reporting on staff member

ESCALATION PROCESS

Responsibility of Safeguarding Lead



SL - Safeguarding Lead (As defined on your safeguarding policy)

MASH - Multi Agency Safeguarding Hub (Contact details are in the safeguarding policy)

LADO - Local Area Designated Officer (Contact details are in the safeguarding policy)

SMT - Safeguarding Management Team (As defined by safeguarding policy, contact details are in the safeguarding policy)

APPENDIX 1 - Categories of Abuse

The table below outlines the four main categories of abuse as defined by the Department of Health 'Working Together to Safeguard Children' document 2010. Staff should be aware that the possible indicators are not definitive and that some children may present these behaviours for reasons other than abuse.

Type of Abuse	Possible Indicators
<p>Neglect The persistent failure to meet a child's basic physical and psychological needs, likely to result in the serious impairments of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide food, clothing and shelter; protect a child from physical and emotional harm or danger; ensure adequate supervision; ensure access to appropriate medical care or treatment.</p>	<p>Obvious signs of lack of care including: Problems with personal hygiene; Constant hunger; Inadequate clothing; Emaciation; Lateness or non-attendance at school; Poor relationship with peers; Untreated medical problems; Compulsive stealing and scavenging; Rocking, hair twisting, thumb sucking; Running away; Low self-esteem.</p>
<p>Physical Abuse May involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child</p>	<p>Physical signs that do not tally with the given account of occurrence conflicting or unrealistic explanations of cause repeated injuries delay in reporting or seeking medical advice.</p>
<p>Sexual Abuse Forcing or enticing a child 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, penetrative or non-penetrative acts and also includes involving children in watching pornographic material or watching sexual acts.</p>	<p>Sudden changes in behaviour Displays of affection which are sexual and age inappropriate Tendency to cling or need constant reassurance Tendency to cry easily Regression to younger behaviour Unexplained gifts or money</p>

	Depression and withdrawal Wetting/soiling day or night Fear of undressing
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 children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.	Rejection Isolation child being blamed for actions of adults child being used as carer for younger siblings Affection and basic emotional care giving/warmth, persistently absent or withheld.

Child sexual exploitation (CSE)

The sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people, (or a third person or persons) receive something, (e.g. food, accommodation, drugs, alcohol, cigarettes, affections, gifts, money) as a result of them performing and/or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. 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 intimidations are common, involvement in exploitative relationships being characterised in the main by the child's or young person's limited availability of choice, resulting from their social/economic and/or emotional vulnerability. (DCSF 2009)

Key facts about CSE

- Sexual exploitation often starts around the age of 10 years old. Girls are usually targeted from age 10 and boys from age 8.
- It affects both girls and boys and can happen in all communities.
- Any person can be targeted but there are some particularly vulnerable groups: Looked After Children, Children Leaving Care and Children with Disabilities.
- Victims of CSE may also be trafficked (locally, nationally and internationally).
- Over 70% of adults involved in prostitution were sexually exploited as children or teenagers.
- Sexual violence or abuse against children represents a major public health and social welfare problem within UK society, affecting 16% of children under 16. That is approximately 2 million children.

Forced marriages (FM)

FM is now a specific offence under s121 of the Anti-Social Behaviour, Crime and Policing Act 2014 that came into force on 16 June 2014.

A FM is a marriage conducted without the valid consent of one or both parties, and where duress is a factor. Forced marriage is when someone faces physical pressure to marry (e.g. threats, physical violence or sexual violence) or emotional and psychological pressure (e.g. if someone is made to feel like they're

bringing shame on their family). This is very different to an arranged marriage where both parties give consent.

FM is illegal in England and Wales. This includes:

- taking someone overseas to force them to marry (whether or not the forced marriage takes place)
- marrying someone who lacks the mental capacity to consent to the marriage (whether they're pressured to or not)

Female Genital Mutilation (FGM)

FGM is child abuse and a form of violence against women and girls, and therefore should be dealt with as part of existing child safeguarding/protection structures, policies and procedures.

FGM is illegal in the UK. In England, Wales and Northern Ireland, the practice is illegal under the Female Genital Mutilation Act 2003.

Other than in the excepted circumstances, it is an offence for **any person (regardless of their nationality or residence status)** to:

- perform FGM in England, Wales or Northern Ireland (section 1 of the Act);
- assist a girl to carry out FGM on herself in England, Wales or Northern Ireland (section 2 of the Act); and
- Assist (from England, Wales or Northern Ireland) a non-UK person to carry out FGM outside the UK on a **UK national or permanent UK resident** (section 3 of the Act).

Prevent

The Counter Terrorism & Security Act 2015 places a Prevent duty on specified schools to have "due regard to the need to prevent people from being drawn into terrorism". The education and childcare specified authorities in Schedule 6 to the Act are as follows:

- The proprietors of maintained schools, non-maintained special schools, maintained nursery schools, independent schools (including academies and free schools) and alternative provision academies, PRUs, registered early years providers, registered late years providers and some holiday schemes.

Schools/settings subject to the Prevent Duty will be expected to demonstrate activity in the following areas –

- Assessing the risk of children being drawn into terrorism
- Demonstrate that they are protecting children and young people from being drawn into terrorism by having robust safeguarding policies.

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

Dealing with Disclosures

- **Receive**

Always stop and listen straight away to someone who wants to tell you about incidents or suspicions of abuse. Listen quietly and actively, giving your undivided attention. Allow silences when needed. Do not show shock or disbelief but take what is said seriously.

- **Reassure**

Stay calm, no judgements, empathise. **Never make a promise that you can keep what a child has said a secret.** Give reassurance that only those who need to know will be told. Reassure the young person that they were right to tell you.

- **React**

React to the student only as far as is necessary for you to establish whether or not you need to refer this matter, but don't interrogate for full details.

Don't ask leading questions – keep the open questions e.g. 'is there anything else you want to say?'

Do not criticize the perpetrator; the student may have affection for him/her.

Explain what you will do next – inform designated lead, keep in contact.

- **Record**

If possible make brief notes about what they are actually telling you at the time. Keep these notes, however rough they are. If you are unable to make notes at the time write down what was said as soon as you can.

Try to record what was actually said by the student rather than your interpretation of what they are telling you.

Record the date, time, place and any noticeable nonverbal behaviour.

- **Report**

Report the incident to the designated teacher and do not tell any other adults or students what you have been told.

Never attempt to carry out an investigation of suspected abuse by interviewing the young person or any others involved. This is a highly skilled role and any attempts by yourself could affect possible criminal proceedings.

- **Record Keeping**

The designated lead for child protection are responsible for ensuring that the necessary paperwork is completed and sent to the relevant people and stored in a safe and confidential place. This means that the records will be a coherent factual record of the concerns that are stored on individual children in a clear chronological order.