



**The Bolton Woods Centre
Child Protection and Safeguarding policy**

2024

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The Bolton Woods Centre

Child Protection and Safeguarding Policy

1. Introduction

The Bolton Woods Centre (BWC) works with all sectors of society, providing a full programme of community-based programmes across the week, including evening and weekends.

2. Policy statement

The statement of intent outlines our commitment to ensuring all employees, volunteers, trustees and all children and young people are safe while accessing our services.

In implementing this child protection policy, Bolton Woods will:

- Ensure the safe recruitment and vetting of staff, including volunteers and anyone who comes into direct contact with the children we work with.
- Ensure all staff, trustees and volunteers within our organisation understand their child protection and safeguarding responsibilities.
- Ensure all workers understand their responsibility to work to the standards always detailed in these child protection procedures and work towards maintaining high standards of practice, through staff induction, effective management, supervision, and training provided by this organisation. All workers should undertake safeguarding training which will be reviewed every 3 years as a minimum.
- Recognise the importance of the safety of children and young people who encounter our services.
- Work within current legislation to safeguard children, including Section 11, Children Act 2004 and guidance from Bradford Safeguarding Children Board and the West Yorkshire Interagency Procedures.
- Act appropriately to any allegations, reports or suspicions of abuse. **This may involve sharing concerns with agencies who need to know and involving parents and children appropriately.**
- Recognise that some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- Recognise that all children have equal rights to protection, regardless of age, ability, culture, language, gender, race, religion, or sexual identity. We believe that a child or young person should never experience abuse of any kind.
- Ensure the named person understands his/her responsibility to refer any child protection concerns to the necessary statutory child protection agencies.
- Ensure any procedures relating to the conduct of workers are implemented in a consistent, fair and impartial manner.
- Ensure CYP are enabled to express their ideas and views on a wide range of issues and will have access to the centre's complaints procedure.
- Encourage parents and carers to be involved in the work of the organisation and have access to all policies and procedures.

This policy applies to all trustees, paid staff, volunteers, sessional workers, students, and anyone working on behalf of BWC including consultants and contractors. BWC is committed to the belief that safeguarding is everyone's responsibility.

BWC is committed to:

- Ensuring there is a Designated Safeguarding Lead (DSL) and a Deputy Designated Safeguarding Lead (DSL)
- Ensuring all young people, staff, volunteers, trustees, sub-contractors / contractors and parents are aware of all policies and their roles and responsibilities in response to safeguarding. (Sub-contractors should have their own organisational policies and procedures in place for their staff to follow. These will be checked to ensure they meet our requirements and standards.)
- Ensuring appropriate training, advice and guidance are in place.
- Keeping up to date with local and national safeguarding developments.

3. Designated Safeguarding Lead

BWC has a nominated Designated Safeguarding Lead (DSL) and Deputy who are responsible for dealing with any child protection or safeguarding concerns.

Janet Jewitt is interim DSL. In her absence Julie Whiting is the deputy safeguarding lead.

The role and responsibilities of the Designated Safeguarding Lead include:

- Keeping up to date with local and national safeguarding legislations and feeding this information to all staff
- Updating the Child Protection and Safeguarding policy when new legislations occur
- To provide advice and support to staff and volunteers who have concerns a child is at risk of or is suffering from abuse.
- To ensure all staff are aware of what they should do and who they should go to if they are concerned a child/young person is subject to abuse or neglect.
- Ensure any concerns about a child/young person are acted on immediately and clearly recorded.
- To complete a Common Referral form: Bradford Children's Social Care or ensure the member of staff who contacted Bradford Children's Social Care completes the form and that it is sent to Bradford Children's Social Care where necessary.
- The DSL will ensure there are always blank Common Referral forms and BWC Child Protection Internal Recording forms available. These are kept in the child protection and safeguarding policy file.
- To ensure any referral is acted upon and issues are addressed in a timely manner.
- The Designated Safeguarding Lead/Deputy will record any reported incidents in relation to a child/young person or breach of Child Protection policies and procedures. This will be stored in the safeguarding file and its contents will be kept confidential and secure.
- Refer any cases to the Local Authority Designated Officer (LADO) about any child protection concerns relating to a staff member or other organisations.
- Refer persons dismissed/left due to risk or harm to a child to the Disclosure and Barring Service. (DBS)
- Refer concerns about radicalisation to The Channel Scheme in Bradford. See appendix 2 for more on this.
- Refer cases where a crime may have been committed to the Police as required.
- Contribute to the assessment of children by working with all appropriate agencies and the local authority, including attendance at strategy discussions and multi-agency meetings.
- Ensure safeguarding policies are known, understood, and used appropriately by staff and volunteers and parents/carers where relevant.
- Review policies annually and seek policy approval from BWC Board of Trustees
- Ensure policies are available publicly.
- Keep a database of training undertaken by staff and ensure everyone has up to date safeguarding certificates.

4. Recognising the Signs and Symptoms of Abuse

BWC will ensure all staff and volunteers working with children undertake safeguarding training. This will be completed as part of the induction, with a commitment to undertaking refresher training at least every 3 years.

Staff will gain an awareness of the signs and symptoms of child abuse and familiarise themselves with the definitions as outlined in Working Together to Safeguard Children (2015) See Appendix A, Glossary and Appendix 1, Signs and symptoms of abuse and neglect, at the end of this document.

5. How concerns about a child or young person's safety can come to light.

Concerns about safety can come about in several different ways, all concerns must be taken seriously and dealt with appropriately no matter how they come about.

Listed are ways you may become aware of a child protection issue:

- A child or young person alleges abuse has taken place or they feel unsafe.
 - A third party or anonymous allegation is received.
 - A child or young person's appearance, behaviour, play, drawing or statements cause suspicion of abuse and/or neglect.
 - A child or young person reports an incident(s) of alleged abuse which occurred some time ago.
 - A report is made regarding the serious misconduct of a worker towards a child or young person
- These will be dealt with in line with our 'Allegations Management procedures' in section 8.

6. What to do if you are concerned about a child

It is important that you treat any allegations extremely seriously. Never think that someone else may be dealing with it. If you receive information that a child may be at risk of, or experiencing harm, follow the process below.

6a. Stage 1

RECEIVE: Listen to the child/young person and accept what they are telling you. Encourage the child/young person to allow another person to be present. It is okay to ask questions e.g. 'I notice you don't appear to be yourself today', Can you tell me how you are feeling? and you can ask them to clarify what they have said. You can ask questions such as: 'Tell me a bit more...', 'Can you explain that...' or 'Can you describe' ... (TED – Tell, Explain and Describe).

But **NEVER** ask **leading** (investigative) questions e.g., 'Was his hair brown? What was her name?' (This conversation could be deemed as the 'interview' and a child can only be 'interviewed' once with regards to a disclosure and this should be left to a professionally qualified person at Bradford Children's Social Care).

REASSURE: Stay calm and reassure them they have done the right thing. Do not promise confidentiality. Explain you may need to share what they are telling so you can help them. Reassure them they are not to blame or in trouble for what they have told you.

REACT: Explain what you have to do next. Do not pass judgement or show shock or disquiet.

RECORD: Record what was said as soon as possible after any disclosure within 48 hours. (it is important to record the same language/words used by the child). Make a note of any signs or injuries and any behaviour. Where possible draw a picture to indicate location of injuries. The person who receives the allegation or has a concern should complete the child protection internal reporting form which is kept in the child protection and safeguarding policy file. When filling out the form **ensure it is signed and dated on**

each page.

Respect confidentiality and file documents securely with the DSL.

SUPPORT: Offer support to the child or young person throughout any process that may happen to them. Make sure the child or young person will be safe. Get support for yourself through your line manager or agreed alternative.

Notify the nominated Designated Safeguarding Lead or their Deputy of the disclosure immediately. Be aware that anyone can contact the Initial Contact Point and/or the police if the DSL or deputy from your organisation are unavailable and you believe the child or young person to be in immediate danger.

Parental Consultation

Professionals should seek, in general, to discuss concerns with the family and, where possible seek the family's agreement to making a referral unless this may either delay the referral or place the child at increased likelihood of suffering Significant Harm.

See also Managing Confidential Information and Information Sharing, sections 9 and 10.

A decision by any professional not to seek parental permission before making a referral to Children's Social Care Services must be recorded and the reasons given. Where a parent has agreed to a referral, this must be recorded and confirmed on the relevant Referral Form.

Where the parent is consulted and refuses to give permission for the referral, further advice and approval should be sought from a manager or the DSL unless to do so would cause undue delay. The outcome of the consultation and any further advice should be fully recorded.

If having taken full account of the parent's wishes, it is still considered that there is a need for a referral:

- The reason for proceeding without parental agreement must be recorded.
- The Children's Social Care Services team should be told that the parent has withheld her/his permission.
- The parent should be contacted by the referring professional to inform her/him that after considering their wishes, a referral has been made.

Stage 2 (refer also to Referral flow chart: Appendix 3 and our referral flow chart found on the wall by the office telephone)

The Designated Safeguarding Lead (DSL) or worker will take immediate action if there is a suspicion a child has been abused or likely to be abused and will contact:

- Bradford Children's Social Care Initial Contact Point **01274 437500**
Mon - Thurs 8.30am – 5pm and Friday up to 4.30pm
For advice and referrals. If a referral is made by telephone, this must be followed up in writing immediately, using the Common Referral Form.
- At all other times contact the Emergency Duty Team on **01274 431010**
- If you believe a child is at immediate risk of harm by a member of the public or family member contact the Police – **999**
- For all general enquiries contact Children's Specialist Services on **01274 435600**

Bradford Safeguarding Children Board (BSCB) is responsible for safeguarding children and young people in the district. See their website for information on inter-agency procedures and free Safeguarding training and/or advice.

Note: If you do not agree with the response and decisions about the referral by the Children's Social Care Services, the referring agency should discuss their concerns directly with the line manager of the social worker, in the first instance to seek resolution. See also Resolving Professional Disagreements and Escalation Procedure.

Advice can also be sought through:

NSPCC 24-hour National Child Protection Helpline on: 0808 800 5000

The NSPCC Child Protection Helpline is a free 24-hour service that provides counselling, information and advice to anyone concerned about a child at risk of abuse.

The NSPCC is unique amongst charities as it also has statutory powers to intervene on behalf of children, along with local authorities. Professionals can also therefore make referrals to the NSPCC if they become aware of safeguarding concerns. They should however contact their local authority in the first instance.

Workers or volunteers should also refer to the organisation 'Allegations Management Policy' and 'Whistle Blowing Policy' where necessary.

7. Managing Allegations against a member of Staff or Volunteer

This section refers to allegations made against a member of staff regarding children and young people up to the age of 16 and including junior volunteers.

Please also see the Complaints and Whistle Blowing policy.

We will ensure any allegations made against members or a member of staff, including unpaid staff, i.e. volunteers and trustees, will be dealt with swiftly and in accordance with these procedures:

- The worker will ensure the child is safe and away from the person against whom the allegation is made.
- The person who an allegation or concern is first reported to should treat the matter seriously and keep an open mind. They should not.
 - investigate or ask leading questions if seeking clarification.
 - Make assumptions or offer alternative explanations.
 - Promise confidentiality but should give assurance that the information will only be shared on a 'need to know' basis.
- The Designated Safeguarding Lead for child protection at BWC should be informed immediately. In the case of an allegation involving the named person, alternative arrangements should be sought to ensure the matter is dealt with by an independent person or refer to the named deputy.
- The Designated Safeguarding Lead should contact the Local Authority Designated Officer (LADO), who will advise on how to proceed. Details for the LADO can be found on Bradford Safeguarding Children Board website in the [Allegations Management and Safer Recruitment](#) section found under resources for Practitioners and Professionals. Note in the Contacts for LADO document, scroll down to the Children's Specialist Services heading for the LADO team contact details.
- The employer should seek advice from the LADO, the Police and/or Children's Social Care Services as appropriate about how much information should be disclosed to the accused person.
- Subject to restrictions on the information that can be shared, the employer should, as soon as possible, inform the person accused about the nature of the allegation; how enquiries will be conducted and the possible outcome (e.g., disciplinary action, and dismissal or referral to the DBS and/or regulatory body where required).

BWC has a legal duty under the Safeguarding Vulnerable Groups Act (SVGA) 2006 (England and Wales) to make a referral to the DBS in cases when an employer has dismissed or removed a person from working with children or vulnerable adults (or would or may have done so if the person had not left or resigned) because of concerns over their behaviour towards children.

- The individual who first received/witnessed the concern should make a full written record of what was seen, heard and/or told as soon as possible after observing the incident/receiving the report. It is important the report is an accurate description and is signed and dated.
- The Designated Safeguarding Lead if appropriate, can support the worker during this process, but must not complete the report on their behalf. This report must be made available on request from either the police and/or Children's Social Care.
- Regardless of whether a police officer and/or Children's Social Care investigation follows, BWC will ensure an internal investigation takes place and consideration is given to the operation of disciplinary procedures. This may involve an immediate suspension and/or ultimate dismissal, dependent on the nature of the incident.
- Duty of Care to child/young person: The worker or DSL should follow up what happens to any referral made by the organisation if they do not hear back from Bradford Children's Social Care, LADO or the police. See Appendix 3: Referral Flow Chart for timescales.

8. Recording and managing confidential information.

It is important when recording information to note exactly what was said as soon as possible after any disclosure or allegation. It is important to record the same language/words used by the child or individual. Make a note of any signs or injuries and any behaviour. Where possible draw a picture to indicate location of injuries or use the body map sheet (appendix 5) copies of which can be found in the Child Protection and Safeguarding policy file.

The person who receives the allegation or has a concern should complete the organisation pro-forma (see Appendix 4) and **ensure it is signed and dated on each page**. Respect confidentiality and file documents securely.

Forms and information can be found in the safeguarding and child protection policy file, kept in the office.

We are committed to the safe and secure management of confidential information. All personal information regarding staff (including volunteers) and children/young people is kept locked and can only be accessed by those that require it to carry out their role. Only relevant information is kept, and this is regularly reviewed and outdated information destroyed appropriately.

BWC is committed to the rights of children and young people to confidentiality unless the organisation considers they could be at risk of abuse and/or harm.

Please see the **data protection policy** for more on this.

9. Information sharing.

BWC collects a variety of information from CYP and families to ensure we have all of the relevant information to keep CYP safe and for our data collection for funding requirements.

When collecting information, staff should be open and honest with children (subject to their age and understanding) and families about why, what, how and with whom information will, or could be shared. BWC has a systematic approach for explaining to children and families when they first access our services how information will be shared and seek their agreement to this.

Consent forms clearly state that confidentiality may not be maintained if the disclosure of information is necessary in the interests of the child. Staff should say something like the following to families that attend for the first time.

"I need to collect some details from you.

Because we are a charity our funders ask us for lots of information about who we work with so that they can show that their money is being spent well.

We put this information into reports, and you can have a look at these on our website if you like. We never share the children's names, and your information won't be identifiable.

We need your phone numbers so that we can contact someone in an emergency. We would never share your personal details unless we need to do so to keep a child safe. Is that okay? "

The early sharing of information is the key for effective Early Help and Early Intervention Services where there are emerging problems. At the other end of the continuum, sharing information is essential for effective child protection services.

No professional should assume someone else will pass on information which they think may be critical to keeping a child safe. If a professional has concerns about a child's welfare and believes they are suffering or likely to suffer harm, then they have a responsibility to share the information with local authority children's social care.

To keep children who, encounter our service safe from harm, we may need to share information with other professionals where the following comes to light:

- A child's health and development, and exposure to possible harm.
- A parent / carer who may need help or may not be able to care for a child adequately and safely.
- Adults and other children who may pose a risk of harm to a child.

As a general principle, information will only be shared with the consent of the parent/carer. The subject of the information, where relevant about why, what, how and with whom information will, or could be shared will be explained from the onset by staff at BWC. Staff should seek the parent/carer/child's agreement unless it is deemed unsafe or inappropriate to do so.

When sharing confidential information about a member of staff, child or parent, BWC has regard to its responsibilities under the Data Protection Act 1988 and the Freedom of Information Act 2000

When contacting any Early Help or Early Intervention services in relation to children with additional needs, this must always be done with consent of them / their family.

Practitioners should always record the decisions made and their reasoning for this – whether it is to share information or not. All conversations should be recorded on the correct sheets and given to the safeguarding lead or deputy who will ensure the information is stored correctly.

Staff should share their concerns with the safeguarding lead and in their absence, speak to the named deputy. If both are unavailable staff can contact the relevant authorities themselves following section 7 of this policy.

10. Safer Recruitment

BWC aims to safeguard children and young people during the selection and recruitment process for new trustees, managers, staff, and apprentices. Paid and voluntary.

We will do this in the following ways:

- Use application forms to assess the candidate's suitability for the role. This makes it easier to compare the experience of candidates and helps to get all the important information we need.
- Job application packs clearly state our commitment to safeguarding and child protection.
- Face to face interviews take place with pre-planned, clear questions. Including a question about criminal convictions, cautions, other legal restrictions or pending cases that might affect their suitability to work with children.
- Candidates are asked to provide photographic ID and proof of qualifications they say they have.

- Always obtain and check any references, asking specifically about an individual's suitability to work with children.
- Apply for an enhanced DBS check. This is carried out for all staff who have contact with children or access to records. Including volunteers and trustees.
- Any disclosures will be appropriately risk assessed.

11. Responsibilities of the board of trustees

Trustees understand they are ultimately accountable for all that happens within the centre and this includes the implementation of effective safeguarding procedures.

The Management Committee ensure all staff and trustees are aware of their responsibilities to safeguarding.

The Board will have regular discussions about safeguarding and child protection. They will share information about current cases, updates to policies and to identify relevant training for staff and trustees.

Please see trustee's responsibilities policy for more information on this

12. Distributing/Reviewing Policies and Procedures

We have a system in place for distributing, displaying and reviewing their policies and procedures.

- Policies will be reviewed annually and signed off by the board of trustees.
- All staff will be made aware of the new policy update and required to read and sign a copy, stating that they agree to the updated version.
- BWC will endeavour to consult with parents/carers and young people when developing policies that affect them.
- The policies and procedures will be displayed in the office and on the website. A copy will be given or be made easily available to all staff, parents, children and young people.

13. Date of policy and review date

It should be signed by the most appropriate senior leadership figure (generally at trustee board level).

Policy agreed date...01/04/2023.....

Trustee signed...*Julie Whiting*.....

Review date 01/04/2024.....

Appendix A: Glossary

Children	Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection.
Safeguarding and promoting the welfare of children	Defined for the purpose of this guidance as: <ul style="list-style-type: none"> • Protecting children from maltreatment • Preventing impairment of children's health or development • Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and • Taking action to enable all children to have the best life chances.
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.
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 (e.g. via the internet). They may be abused by an adult or adults, or another child or children.
Staff	All those working for or on behalf of BWC. full time, part time, temporary or permanent, in either a paid or voluntary capacity.
Parent	Birth parents and other adults who are in a parenting role, for example, stepparents, foster carers and adoptive parents.
DSL	Designated Safeguarding Lead or their Deputy for your organisation
DBS	Disclosure and Barring Service helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).

Other relevant policies and procedures

Please see:

Resolving Professional Disagreements and Escalation Procedure.

Allegations Management

Complaints

Whistle Blowing

Safer recruitment

Trustee's Responsibilities

Appendix 1: SIGNS AND SYMPTOMS OF ABUSE AND NEGLECT

Source: 'Working Together to Safeguard Children 2015' – A Guide to inter-agency working to safeguard and promote the welfare of children, pages 92-94. Published by the Department for Education, latest edition March 2015.

What is abuse and neglect? Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, neglect 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 a stranger for example, via the internet. They may be abused by an adult or adults, or another child or children.

Children: Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection.

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 the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Child Sexual Exploitation (CSE): 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, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur using 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 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.

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 because of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger.
- ensure adequate supervision (including the use of inadequate caregivers); or 94.
- ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Female Genital Mutilation (FGM): FGM is a serious form of child abuse and violence against women and girls, and a violation of human rights. It has been illegal in this country since 1985 and there is a statutory duty to safeguard children and protect and promote the welfare of all women and girls. People guilty of allowing FGM to take place are punished by fines and up to fourteen years in prison.

FGM is defined by the World Health Organisation as "all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons". It can leave women and girls traumatised as well as in severe pain, cause difficulties in childbirth, and in some rare cases it can lead to death.

There is no cultural or religious justification for FGM.

Sexually active children: All staff should be clear that sex under the age of 16 is illegal and that sex or sexual activity for under 13's is cause for concern.

Children under 13 cannot consent to sexual activity. Therefore, where a worker becomes aware that a young person is sexually active, they should always follow safeguarding procedures.

Appendix 2: The Channel Scheme in Bradford District

What is Channel?

Channel is a multi-agency process which provides support to those who may be vulnerable to being drawn into violent extremism or terrorism. Channel uses existing collaboration between partners to support individuals and protect them from being drawn into terrorism. It is similar to the way we work, using partnership structures, to protect vulnerable people from harm – for example in drugs and gang's prevention work.

Who delivers Channel?

The process is a multi-agency approach with a wide range of agencies and local partners working together to provide support for individuals. Coordinators are usually police officers with the multi-agency panel being chaired by the Local Authority.

Who is Channel aimed at?

It is aimed at all individuals who may be most at risk of being drawn into terrorism- whatever section of society they may be from. Supporting those most at risk is about early intervention to protect and divert people away from the risk they face before illegality occurs.

How does Channel work?

Channel works by partners collaboratively assessing the nature and the extent of the risk and where necessary, providing an appropriate support package tailored to the individual's needs. The three key stages of Channel are:

Identifying individuals who may be at risk of and vulnerable to being drawn into terrorism.

Assessing the nature and extent of the risk

Where necessary, referring cases to a multi-agency panel for development of the most appropriate support package to divert and support the individual at risk.

How do you identify those at risk?

Referrals come from those who have concerns about individuals who may be vulnerable to being drawn into terrorism.

Who makes the referrals?

Referrals can come from a wide range of partners and could include youth offending teams, social services, health, police, schools, colleges and local communities.

Who sits on the multi- agency panel?

The panel is designed to work in the same way as other multi agency structures that are used to safeguard individuals at risk – from drugs, knife and gun crime, gangs etc.

The panel is chaired by the local authority and consist of statutory partners and the Channel coordinator.

What kind of support is provided through Channel?

Examples of support provided could include mentoring, diversionary activities such as sport, signposting to mainstream services such as education, employment, or housing. Support is always tailored to specific needs of the individual following assessment by the multi-agency panel.

How should local communities make a referral?

If anyone has concerns about an individual, they should contact their local authority or local police in the first instance.

How do I make a Channel Referral? (See accompanying document BMDC GUIDE FOR PARTNERS)

Contact either:

- 1) Andy Rose – Channel Co-ordinator, West Yorkshire Police
andrew.rose@westyorkshire.pnn.police.uk
tel 07525 989331

- 2) Michael Churley – BMDC Prevent Co-ordinator
michael.churley@bradford.gov.uk
tel 01274 432816

Indicators of Risk

There are examples of indicators that might suggest vulnerability to violent extremism, and which may therefore be useful in the Channel process. It should not be assumed that the characteristics and experiences set out below necessarily indicate that a person is either committed to violent extremism or is a risk to themselves or others.

Expressed opinions.

These may include support for violence and terrorism, the leadership of terrorist organisations and uncompromising rejection of the principle of the rule of law and of the authority of any elected Government in this country.

Material

The following may be relevant:

- possession of violent extremist literature and imagery in hard copy or digital form (e.g., so called 'beheading videos' or amateur film of terrorist attacks)
- attempts to access, become a member of or contribute to violent extremist.
- websites and associated password protected chat rooms.
- possession of material regarding weapons and/or explosives
- possession of literature regarding military training, skills, and techniques.

Online communities are important in the radicalisation process and enable ready access to radicalising material which may not be available in the offline world. Digital content can be made very attractive and persuasive and can be quickly and widely shared between young people.

Behaviour and behavioural changes

Relevant changes may include:

- withdrawal from family, peers, social events, and venues; hostility towards former associates and family; association with proscribed organisations; and association with organisations which hold extremist views that stop short of advocating violence in this country.

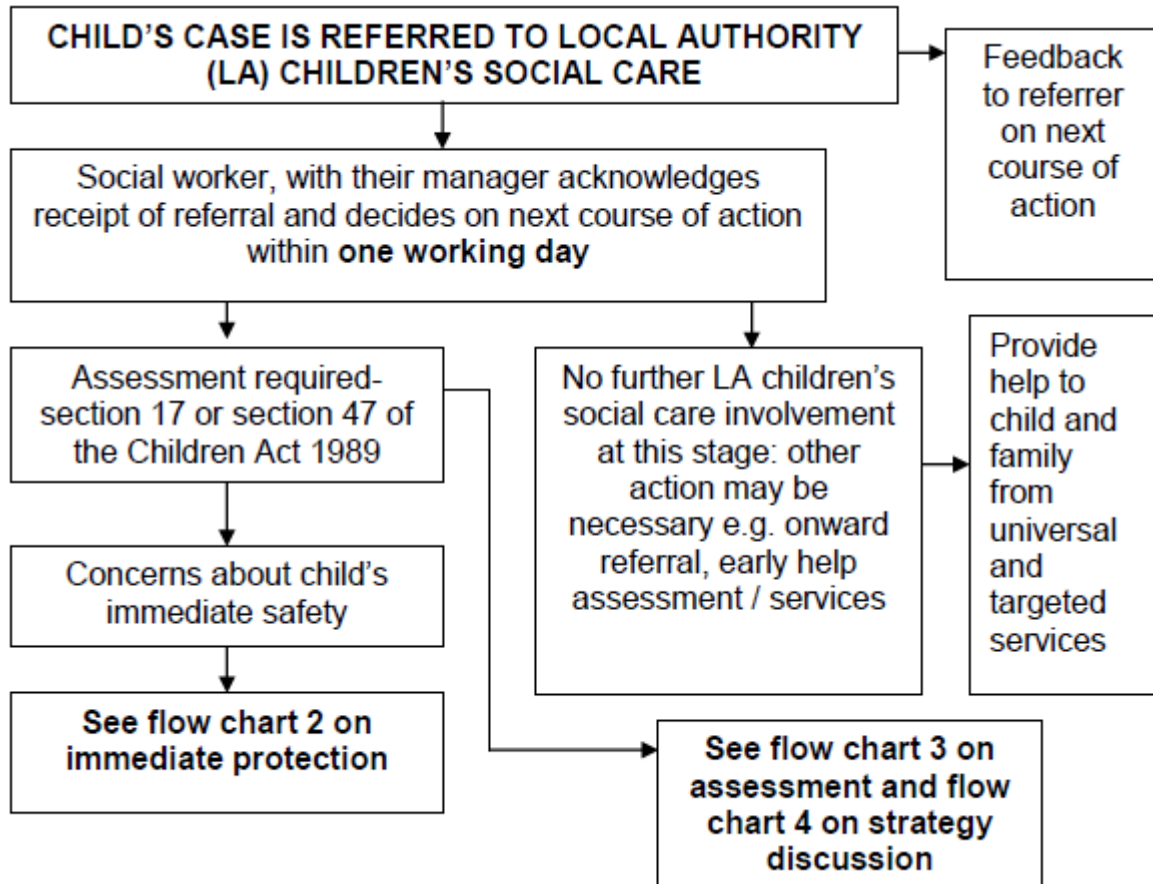
Personal history

The following may be relevant:

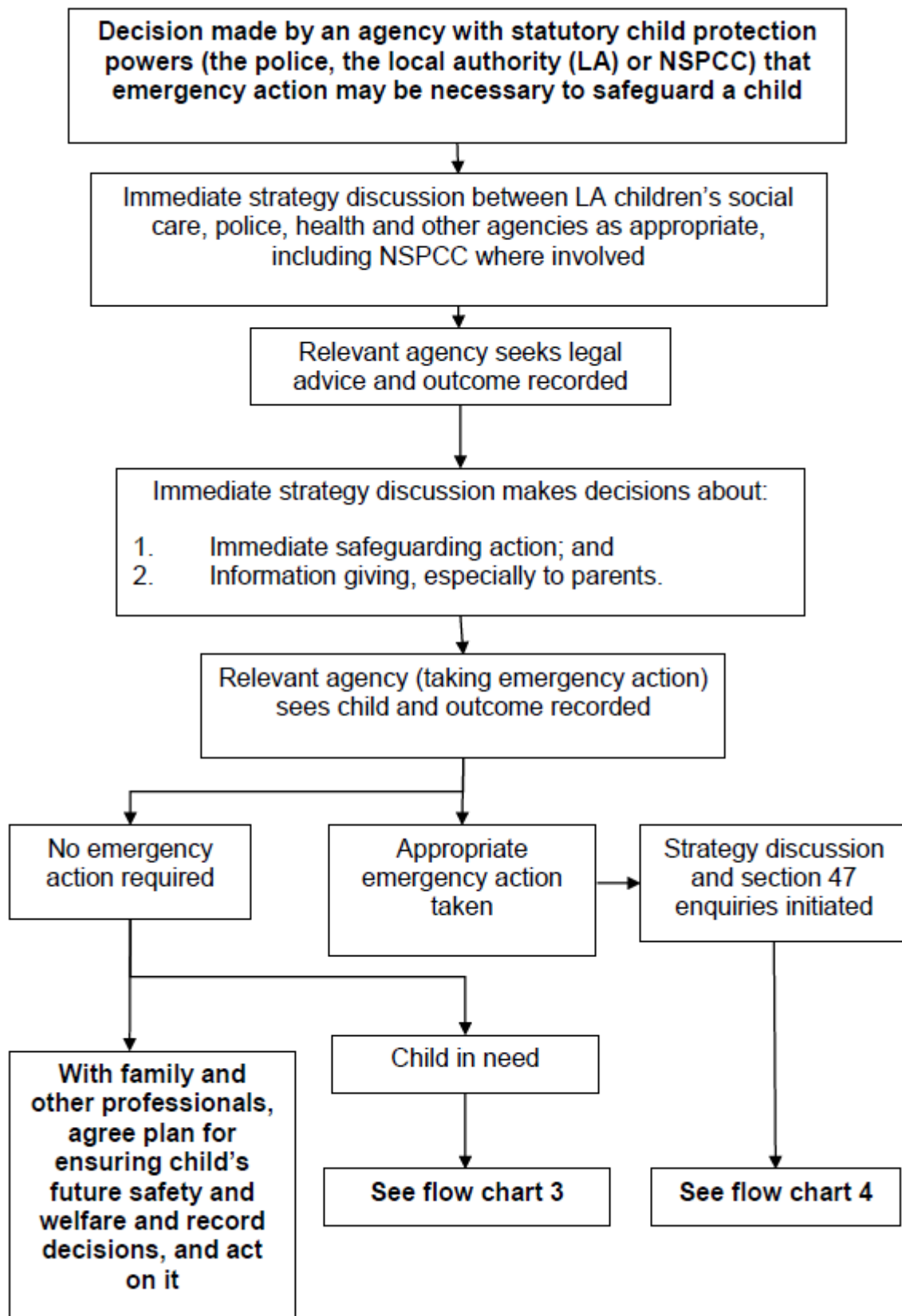
- claims or evidence of involvement in organisations espousing violent extremist ideology in this country or overseas.
- claims or evidence of attendance at military/terrorist training in the UK or overseas.
- claims or evidence of involvement in combat/violent activity, particularly on behalf of violent extremist non-state organisations low level criminality, including some violence, is also commonly seen in case histories of convicted terrorists.

Appendix 3: Referral Flow Chart

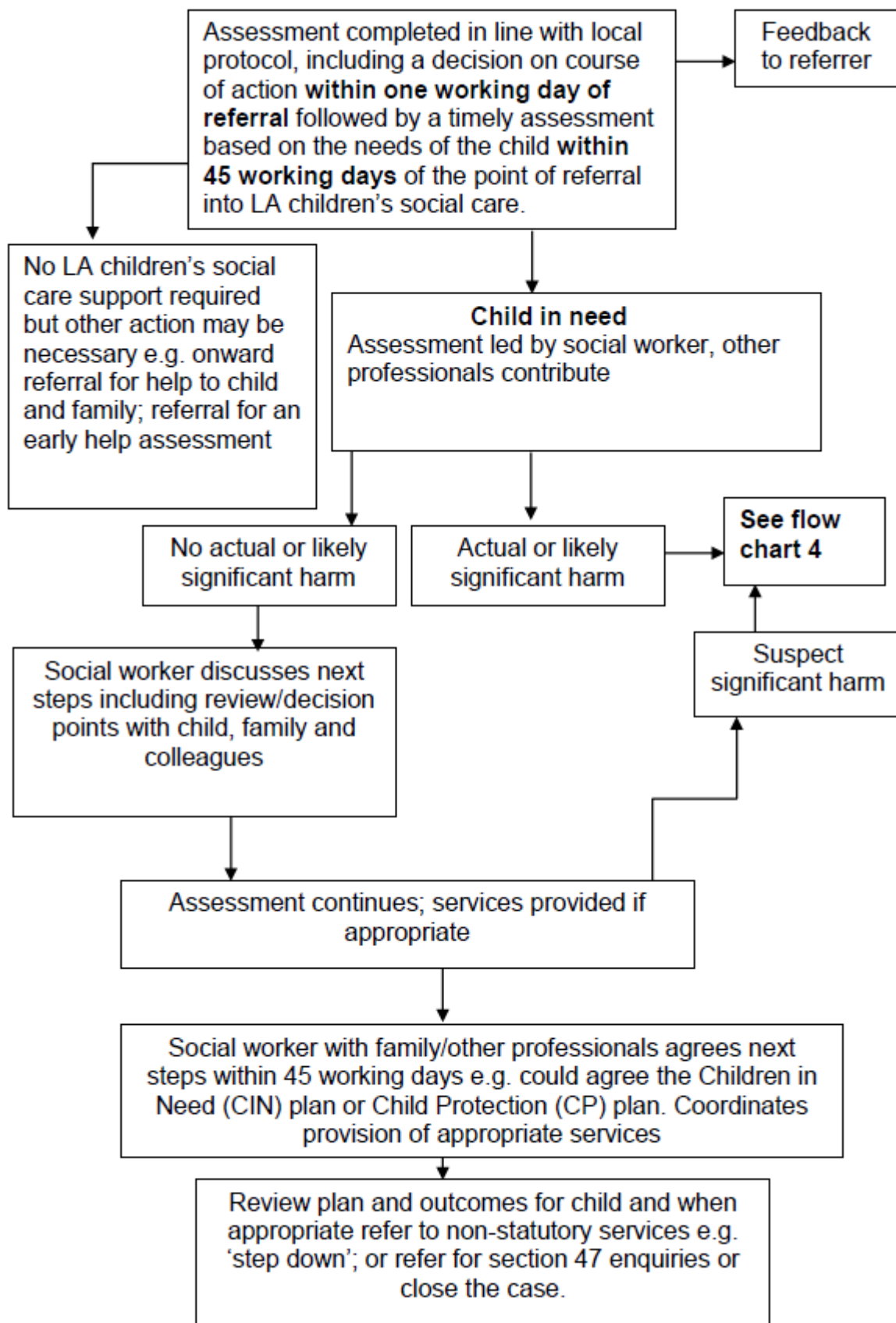
Flow chart 1: Action taken when a child is referred to local authority children's social care services



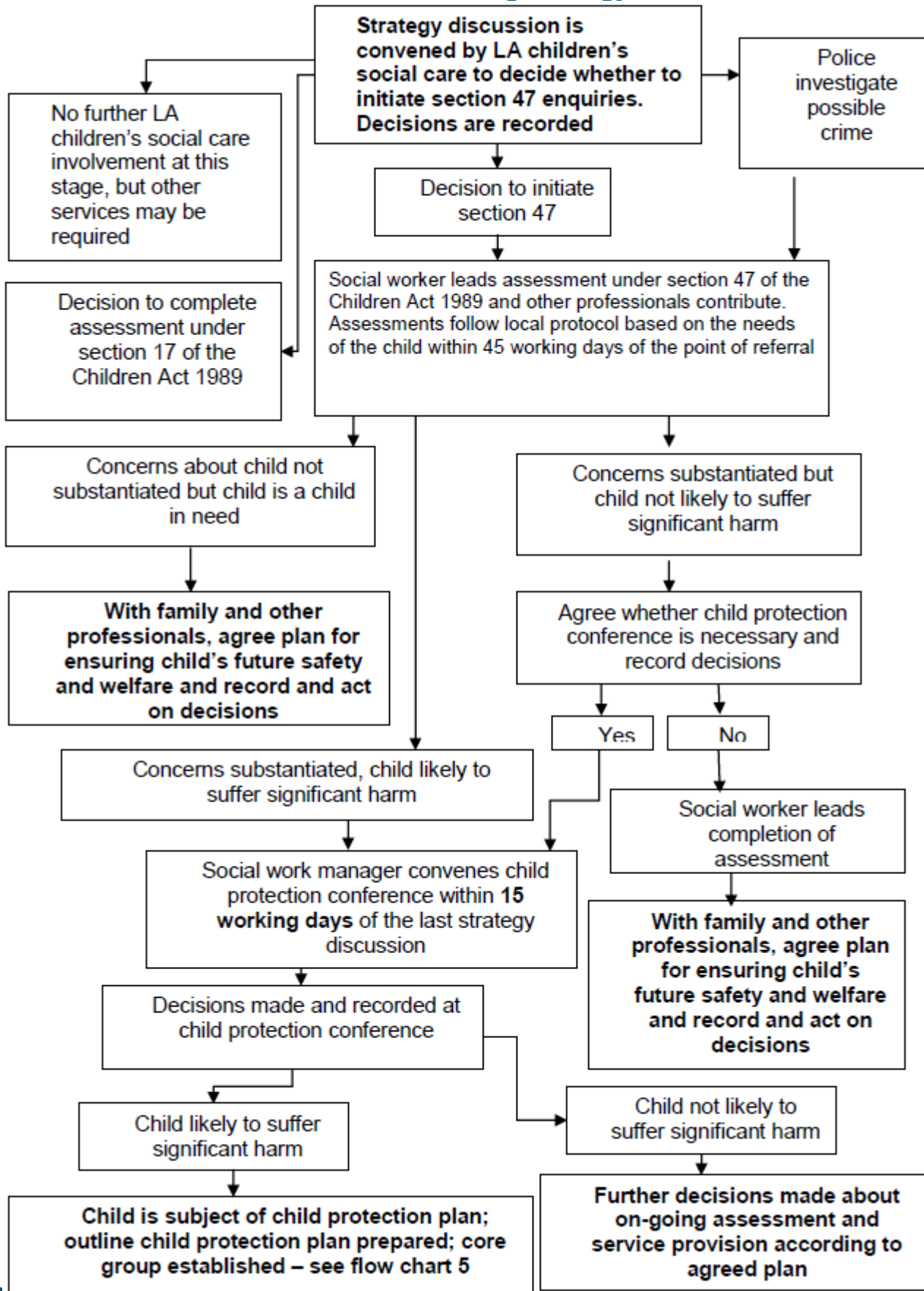
Flow chart 2: Immediate protection



Flow chart 3: Action taken for an assessment of a child under the Children Act 1989



Flow chart 4: Action following strategy discussion



a

Appendix 4: Child Protection Internal Recording Pro Forma

CONFIDENTIAL

Full name, including any aliases.	
Gender	
Date of Birth	
Address:	
Who Has Parental Responsibility?	
Details of disclosure or concern, include date, time, full names, actual wording used)	
Any special needs	

of the child/ren.	
Actions Required	
Consent Given by child/young person/parent: If consent not given, please state clearly reason for overruling the need for consent.	Yes / No
Follow Up	
Your Name	
Your Role	
Signature	
Date, time and place:	

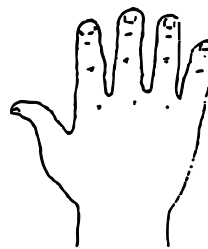
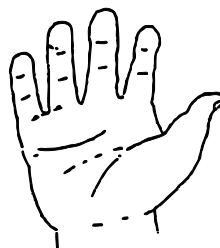
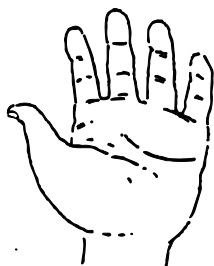
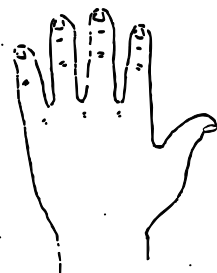
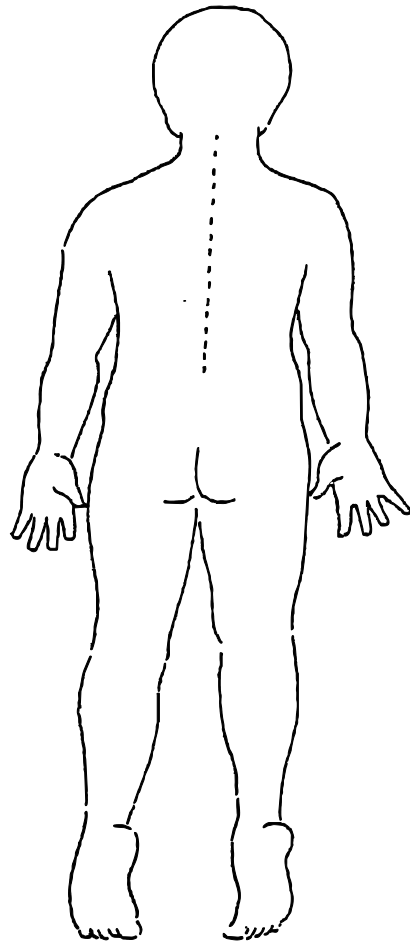
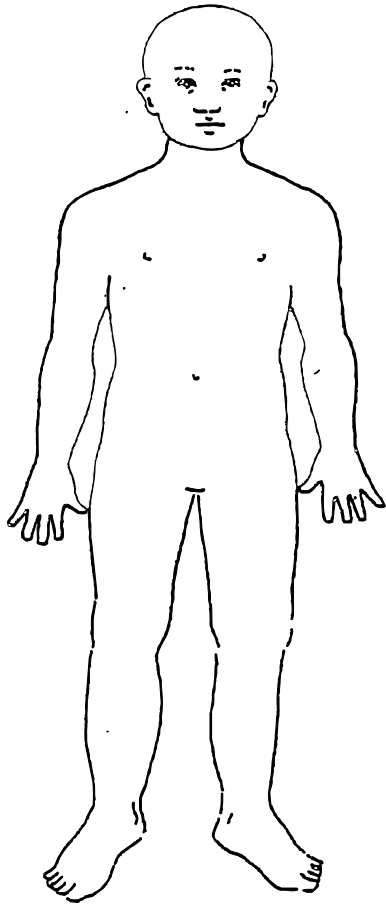
Appendix 5: Body Map

This form can be used to note any areas of abuse you think may have occurred.

RECOGNITION OF POTENTIAL CHILD ABUSE (SKIN MAP)

NAME OF YOUNG PERSON

DATE OF BIRTH



NAME OF REFERRER

SIGNATURE OF REFERRER

DATE

Appendix 6: Legal framework

BWC works in accordance with local guidance from West Yorkshire Consortium Procedures Manual and statutory legislation based on law and guidance that seeks to protect children, namely.

- Children Act 1989
- Children Act 2004
- Children and Families Act 2014
- Children missing education (September 2016)
- Counterterrorism and Security Act 2015 (section 26 Prevent duty)
- Data Protection Act 1998
- Disqualification under the Childcare Act 2006 (February 2015)
- Female Genital Mutilation (FGM) Act 2003 (as amended by Serious Crime Act 2015)
- Human Rights Act 1998
- Information sharing – Advice for safeguarding practitioners’ (March 2015)
- Prevent Duty 2015
- Protection of Freedoms Act 2012
- Safer working Practice Guidance (October 2015)
- Sexual Offences Act 2003; amended 2006.
- Safeguarding Vulnerable Groups Act 2006
- Special Educational needs and disability (SEND) code of practice: 0 – 25 – Statutory guidance for organisations who work with and support children and young people who have special educational needs or disabilities; HM Government 2015
- United Convention of the Rights of the Child 1991
- What to do if you’re worried a child is being abused (March 2015)
- Working Together to Safeguard Children (2015)