



**Noah's Early Year's Centre**

**Child Protection and Safeguarding Policy**

**March 2020 (version 6)**

To be reviewed: March 2021

Designated Safeguarding Lead (DSL)

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I declare that I have read the Child Protection and Safeguarding Policy, understand the policy and undertake to work in accordance with it.

Name\_\_\_\_\_

Date\_\_\_\_\_

Signature\_\_\_\_\_

**1. Policy statement and principles**

Noah's Early Year's Centre takes our responsibilities for safeguarding seriously and we actively promote and protect the welfare of the children that access our services. We endeavour to provide a safe and welcoming environment where children are respected and valued. This policy is available on the Noah's website and all staff, volunteers and Trustees are required to read it and confirm they have done so in writing before commencing work with Noah's.

**1.1. Child protection statement**

We recognise our moral and statutory responsibility to safeguard and promote the welfare of all parents and children who are involved with Noah's. We endeavour to provide a safe and welcoming environment where children are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children receive effective support, protection and justice. The procedures contained in this policy apply to all staff, volunteers and Trustees.

## 2. Our policy principles:

- Safeguarding is everyone's responsibility.
- Noah's responsibility to safeguard and promote the welfare of children is of paramount importance.
- All children, regardless of age, gender, ability, culture, race, language, religion or sexual identity, have equal rights to protection.
- Children who are safe and feel safe are better equipped to learn.
- Noah's Early Year's Centre is a charity committed to safeguarding and promoting the welfare of children and young people and expects all staff, volunteers and Trustees to share this commitment. Noah's staff will always act in the best interests of children.
- Noah's staff are uniquely placed to observe changes in children's behaviour and the outward signs of abuse, neglect, exploitation and radicalisation. It is vital that all Noah's staff are alert to the signs of abuse, are approachable and trusted by children, listen actively to them and understand the procedures for reporting concerns. Our charity: whether it be staff; volunteers; or Trustees, shall act on identified concerns and will provide early help to prevent concerns from escalating.
- All staff have an equal responsibility to act on any suspicion or disclosure that may suggest a child is at risk of harm at home, in the community or in our centre.
- All staff members will maintain an attitude of 'It could happen here' where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.
- If, at any point, there is a risk of immediate serious harm to a child a referral will be made to Children's Social Care and/or the police immediately.  
**Anybody can make a referral.** If the child's situation does not appear to be improving, any staff member with concerns should press the Designated Safeguarding Leads for re-consideration.
- If a member of staff remains concerned about a child, they can discuss their concerns with the Designated Safeguarding Lead, Deputy Designated Safeguarding Lead, or contact the Multi Agency Safeguarding Hub (MASH) for additional advice as necessary.
- Children and staff, volunteers and Trustees involved in child protection issues will receive appropriate support.
- This policy will be reviewed at least annually unless an incident, new legislation or guidance suggests the need for an interim review. Our child protection and safeguarding leads, staff, volunteers, Trustees and parent/carer feedback will therefore be used in reviewing, shaping and developing the charity's safeguarding arrangements and child protection policy.

### 2.1. Our policy aims:

- To provide all staff with the necessary information to enable them to meet their safeguarding and child protection responsibilities.
- To ensure consistent good practice.

- To demonstrate the charity's commitment with regard to safeguarding and child protection to children, parents and other partners.
- To contribute to the charity's safeguarding portfolio.

## 2.2. Our terminology:

**Safeguarding** and promoting the welfare of children refers to the process of protecting children from maltreatment, preventing the impairment of health or 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.

**Child protection** refers to the processes undertaken to protect children who have been identified as suffering or being at risk of suffering significant harm.

**Staff** refers to all those working for or on behalf of Noah's, full time or part time, temporary or permanent, in either a paid or voluntary capacity.

**Child** includes everyone under the age of 18.

**Parent** refers to birth parents and other adults who are in a parenting role, for example step parents, foster carers and adoptive parents.

## 3. Safeguarding legislation and guidance

This policy has been drawn up on the basis of law and guidance that seeks to protect children, namely:

- Children Act 1989
- United Convention of the Rights of the Child 1991
- Data Protection Act 1998
- Human Rights Act 1998
- Sexual Offences Act 2003
- Children Act 2004
- Safeguarding Vulnerable Groups Act 2006
- Protection of Freedoms Act 2012
- Children and Families Act 2014
- Special educational needs and disability (SEND) code of practice: 0 to 25 years – Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities; HM Government 2014
- Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers; HM Government 2015
- Working together to safeguarding children: a guide to inter-agency working to safeguarding and promote the welfare of children; HM Government 2015

This policy should be read alongside our policies and procedures on:

- Recording and information sharing;

- Health and Safety policy;
- First aid policy;
- Website and e-safety policy;
- Complaints policy; and,
- Behaviour policy.

We recognise that:

- The welfare of the child is paramount, as enshrined in the Children Act 1989.
- All children, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse.
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- Working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare.

We will seek to keep children and young people safe by:

- Valuing them, listening to and respecting them.
- Appointing a Designated Safeguarding Lead (DSL) for children and young people and a Deputy Designated Safeguarding Lead (DDSL).
- Adopting child protection and safeguarding practices through procedures and a code of conduct for staff and volunteers; developing and implementing an effective e-safety policy and related procedures.
- Providing effective management for staff and volunteers through supervision and support.

#### **4. Roles and responsibilities**

The following people have been assigned to co-ordinate child protection arrangements.

**The Designated Safeguarding Lead (DSL) is** Vanessa Gilbert  
(Gilbert.v@welearn365.com)  
Tel: 01788 812324

**The Deputy Designated Safeguarding Lead (DDSL) is** Selina Crinigan  
(Crinigan.S@welearn365.com)  
Tel: 01788 812324

#### **The Designated Safeguarding Lead (DSL):**

- Takes lead responsibility for safeguarding and child protection for the charity, which will not be delegated although the activities of the DSL may be delegated to appropriately trained deputies.
- Is appropriately trained, receives refresher training at two-yearly intervals and regularly (at least annually) updates their knowledge and skills to keep up with any developments relevant to their role.

- Acts as a source of support and expertise to charity members and staff.
- Encourages a culture of listening to children and taking account of their wishes and feelings.
- Is alert to the specific needs of children in need; those with special educational needs, children who are looked after or were previously looked after; and young carers.
- Has a working knowledge of Warwickshire Safeguarding Children Board (WSCB) procedures.
- Keeps detailed written records of all concerns, ensuring that such records are stored securely and flagged, but kept separate from the child's registration form.
- Refers cases of suspected abuse to Children's Social Care or the Police as appropriate.
- Develops effective links with relevant statutory and voluntary agencies including the WSCB.
- Ensures that all staff sign the policy to indicate that they have read and understood the Child Protection and Safeguarding Policy and Staff Behaviour Policy (Code of Conduct).
- Has a working knowledge of relevant national guidance in respect of all safeguarding issues.
- Ensures that the child protection and safeguarding policy and procedures are regularly reviewed and updated annually.
- Ensures that all staff that have **any concerns** about a child's welfare, they should act on them immediately, either by speaking to the DSL (or deputy), or in exceptional circumstances, taking responsibility to make a referral to Children's Social Care.
- Ensures that all staff know how to make a referral.
- Ensures that parents/carers who access our sessions are aware of the charity's role in safeguarding and that referrals about suspected abuse and neglect may be made.
- Ensures that the charity holds more than one emergency contact number for every child who accesses sessions.
- Keeps a record of trustee and staff attendance at child protection training.
- Makes the child protection and safeguarding policy available publicly, i.e. on the Noah's website or by other means.

### **The Deputy Designated Safeguarding Lead:**

Is appropriately trained to the same level as the DSL and supports the DSL with safeguarding matters as appropriate. In the absence of the DSL, carries out those functions necessary to ensure the ongoing safety and protection of children. In the event of the long-term absence of the DSL, the deputy will assume all of the functions of the DSL as above.

### **Responsibilities of Noah's Committee:**

- To appoint a Designated Safeguarding Lead who has undertaken training in inter-agency working, in addition to basic child protection training.

- Ensures that the DSL role is explicit in the role holder's job description and that safeguarding responsibilities are identified explicitly in the job/role descriptions of every member of staff and volunteers.
- Has adequate contact information for the DSL and DDSL to be contacted by staff if they have concerns, if they are not available in person.
- Has a child protection policy and procedures, including a staff code of conduct, which are reviewed annually and made available publicly on the charity's website or by other means.
- Has a procedure for dealing with allegations of abuse made against members of staff and volunteers including allegations made against the DSL and allegations against other children.
- Follows safer recruitment procedures that include statutory checks on the suitability of staff to work with children and disqualification from providing childcare regulations.
- Develops an inclusion strategy that ensures all staff, including volunteers and Trustees receive information about the charity's safeguarding arrangements, Behaviour Policy (Code of Conduct) and the role of the DSL on induction.
- Develops a training strategy that ensures all staff, including the DSL, and volunteers receive appropriate and regularly updated safeguarding and child protection training and updates as required (at least annually) to provide them with the relevant skills and knowledge to safeguard children effectively. The training strategy will also ensure that the DSL receives refresher training and regular updates as defined under the DSL's duties above.
- Ensures that all staff, including temporary staff and volunteers, are provided with copies of or access to Noah's child protection and safeguarding policy and Staff Behaviour Policy (code of conduct) before they start work with Noah's.

The Committee nominates a member to be responsible for liaising appropriate agencies in the event of an allegation being made against the DSL.

It is the responsibility of the Committee to ensure that the way Noah's manages its safeguarding, recruitment and allegations procedures, take into account, the procedures and practice of national guidance and best practice.

## **5. Good practice guidelines and staff code of conduct**

To meet and maintain our responsibilities towards children, we need to agree standards of good practice and have set out our expectations of staff in the Staff Behaviour Policy, which all members of staff and volunteers are required to read and sign before starting work with Noah's. Good practice and our expectations include:

- Treating all children with respect.
- Setting a good example by conducting ourselves appropriately.
- Involving children in decisions that affect them.
- Encouraging positive, respectful and safe behaviour among children.
- Being a good listener.
- Being alert to changes in children's behaviour and to signs of abuse and neglect and exploitation.

- Recognising that challenging behaviour may be an indicator of abuse.
- Reading and understanding Noah's child protection policy, Staff Behaviour Policy (code of conduct) and guidance documents on wider safeguarding issues, for example bullying, behaviour, physical contact, sexual exploitation, extremism, e-safety and information-sharing.
- Asking the child's permission before initiating physical contact, such as assisting with dressing or administering first aid
- Maintaining appropriate standards of conversation and interaction with and between children and avoiding the use of sexualised or derogatory language.
- Being aware that the personal and family circumstances and lifestyles of some children lead to an increased risk of abuse.
- Reporting all concerns about a child's safety and welfare on a green form to the DSL or, if necessary, directly to the Police or Children's Social Care.
- Following the Committee's rules with regard to communication and relationships with Noah's parents/children, including via social media.
- Referring all allegations against members of staff, Trustees, volunteers or other adults that work with children and any concerns about breaches of the Behaviour Policy directly to the Designated Safeguarding Team using a yellow form, with any concerns about the Designated Safeguarding Lead being referred to the nominated Trustee lead.

**Please also refer to Noah's Behaviour Policy (code of conduct) for all staff and volunteers.**

## **6. Children who may be particularly vulnerable**

Some children are more vulnerable to abuse and neglect than others. Several factors may contribute to that increased vulnerability, including prejudice and discrimination; isolation; social exclusion; communication issues; a reluctance on the part of some adults to accept that abuse can occur; as well as an individual child's personality, behaviour, disability, mental and physical health needs and family circumstances. Noah recognises that we give special consideration to: children who are disabled; have special educational needs; or, have mental health needs.

## **7. Children with special educational needs and disabilities or have mental health needs**

Children with special educational needs (SEN), disabilities or who have mental health needs can face additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group of children, which can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability or mental health issues without further exploration;
- The potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs; and,
- Communication barriers and difficulties in overcoming these barriers.

Staff are trained to manage these additional barriers to ensure this group of children are appropriately safeguarded.

## **8. Support for children, families and staff involved in a child protection issue**

Child abuse is devastating for the child and can also result in distress and anxiety for staff who become involved.

We will support children, their families, and staff by:

- Taking all suspicions and disclosures seriously;
- Nominating a link person (usually the DSL) who will keep all parties informed and be the central point of contact;
- Where a member of staff is the subject of an allegation made by a child, separate link people will be nominated to avoid any conflict of interest;
- Responding sympathetically to any request from staff for time out to deal with distress or anxiety;
- Maintaining confidentiality and sharing information on a need-to-know basis only with relevant individuals and agencies;
- Storing records securely;
- Offering details of helplines, counselling or other avenues of external support;
- Following the procedures laid down in our child protection, whistleblowing, complaints and disciplinary procedures; and,
- Co-operating fully with relevant statutory agencies.

## **9. Complaints procedure**

Our complaints procedure will be followed where a child or parent raises a concern about poor practice towards a child that initially does not reach the threshold for child protection action. Poor practice examples include unfairly singling out a child or attempting to humiliate them, bullying or belittling a child or discriminating against them in some way. Complaints are managed by the DSL and/or other members of the Committee.

Complaints from staff are dealt with under the Noah's Complaints Policy.

Complaints which escalate into a child protection concern will automatically be managed under Noah's safeguarding and child protection procedures.

## **10. Staff reporting concerns about a colleague or other adult who works with children (Whistleblowing)**

Staff who are concerned about the conduct of a colleague – including visiting practitioners and volunteers – towards a pupil are undoubtedly placed in a very difficult situation. They may worry that they have misunderstood a situation and they will wonder whether a report could jeopardise a colleague's career. All staff must remember that the welfare of the child is paramount.

The charity's whistleblowing policy enables staff to raise concerns or allegations, initially in confidence, and for a sensitive enquiry to take place.



Staff are expected to report all concerns about poor practice or possible child abuse by colleagues – including what may seem minor contraventions of the charity’s behaviour policy (code of conduct) to the DSL; to facilitate proactive and early intervention in order to maintain appropriate boundaries and a safe culture that protects children and reduces the risk of serious abuse within our centres.

The recommended format for all staff is to record any such poor practice or possible child abuse by a colleague or other adult who works with the children, via the yellow form. All such forms should be passed to the DSL. Alternatively, staff are free to approach the DSL directly to discuss their concerns.

Concerns or complaints about a Trustee should be reported to the DSL using a yellow form. Any complaint or concern about the DSL should be made using the yellow form or in person to the nominated Trustee lead for this occurrence.

Staff or Trustees may also report concerns about suspected abuse or neglect directly to Children’s Social Care or the Police if they believe direct reporting is necessary to secure action.

The NSPCC whistleblowing helpline is also available for staff or Trustees who do not feel able to raise concerns regarding child protection failures internally. Staff can call 0800 028 0285 between 8.00am and 8.00pm., Monday to Friday or email [help@nspcc.org.uk](mailto:help@nspcc.org.uk). Information is also available on the NSPCC website at <https://www.nspcc.org.uk/what-you-can-do/report-abuse/dedicated-helplines/whistleblowing-advice-line/>.

The NSPCC whistleblowing helpline and contact numbers for Children’s Social Care, the Police and the DSL are all available in our centres.

## **11. Managing allegations against staff**

When an allegation is made against a member of staff, set procedures must be followed. Staff who are the subject of an allegation have the right to have their case dealt with fairly, quickly and consistently and to be kept informed of its progress.

Suspension is not the default option and alternatives to suspension will always be considered. In some cases, however, staff may be suspended where this is deemed to be the best way to ensure that allegations are investigated fairly, quickly and consistently and that all parties are protected. In the event of suspension, the charity will provide support and a named contact for the member of staff.

Allegations concerning staff who no longer work for the charity or historical allegations will be reported to the Police.

The charity will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

An allegation in respect of an individual who works at the school that fulfil any of the following criteria will be reported to the DSL for action within one working day. This may result in reporting it to the Police, Children's Social Care and/or the Charity Commission depending on the nature of the concern. Examples in this respect include:

- Behaved in a way that has harmed a child or may have harmed a child.
- Possibly committed a criminal offence against or related to a child.
- Behaved towards a child or children in a way that indicates they pose a risk of harm to children.

Please note, that the only exception is when the allegation is against the DSL, in which instance the nominated Trustee will undertake that responsibility.

**Staff may also report their concerns directly to the Police or Children's Social Care if they believe direct reporting is necessary to secure action.**

## **12. Staff training**

It is important that all staff have training to enable them to recognise the possible signs of abuse, neglect, exploitation and radicalisation and to know what to do if they have a concern. New staff; Trustees who will have direct contact with children; and, volunteers will receive information when they start which will include:

- Noah's child protection and safeguarding policy;
- The signs and symptoms of abuse and neglect;
- Responding to disclosure of abuse or neglect by a child;
- Reporting and recording arrangements;
- The Staff Behaviour Policy (code of conduct);
- The identity and role of the DSL, Deputy DSL; and,
- Details of the nominated Trustee in case of an allegation against the DSL.

NB all of the above will be explained **before** a new member of staff, Trustee or volunteer has direct contact with children at Noah's. The charity's child protection policy and Staff Behaviour policy (code of conduct) will be sent with the letter confirming an appointment with a written requirement that the individual reads the two policies in advance of starting work at Noah's. The individual will be given an opportunity to clarify any issues on their first day at work and then asked to sign to confirm that they have read and understood both policies and undertake to comply with them.

All staff, including the DSL, volunteers and trustees will receive appropriate and regularly updated safeguarding and child protection training and thematic updates as required (at least annually) and regular discussions at staff meetings, to provide them with the requisite skills and knowledge to safeguard children effectively in line with statutory guidance and to comply with the Charity Commission standards. The DSL will update their knowledge and skills at least annually to keep up with any developments relevant to their role.

All staff will be made aware of the increased risk of abuse to certain groups, including children with special educational needs and disabilities, looked after children, previously looked after children, young carers and risks associated with specific safeguarding issues including child sexual exploitation, child criminal exploitation, peer on peer abuse, sexual harassment and sexual violence, extremism, female genital mutilation and forced marriage; and will receive training in relation to keeping children safe online.

### **13. Safer recruitment**

Our charity endeavours to ensure that we do our utmost to employ 'safe' staff and allow 'suitable' volunteers to work with children. Safer recruitment means that all applicants will:

- Complete an application form which includes their employment history and explains any gaps in that history;
- Provide two referees, including at least one who can comment on the applicant's suitability to work with children;
- Provide evidence of identity and qualifications;
- If offered employment, be checked in accordance with the Disclosure and Barring Service (DBS) regulations as appropriate to their role. This will include an enhanced DBS check and a barred list check;
- If offered employment, provide evidence of their right to work in the UK; and,
- Be interviewed by a panel of at least two trustees, if shortlisted.

The charity will also:

- Ensure that every job description and person specification for roles in Noah's includes a description of the role holder's responsibility for safeguarding;
- Ask at least one question at interview for every role in Noah's about the candidate's attitude to safeguarding and motivation for working with children;
- Verify the preferred candidate's mental and physical fitness to carry out their work responsibilities;
- Obtain references for all shortlisted candidates, including internal candidates;
- Carry out additional or alternative checks for applicants who have lived or worked outside the UK;
- At least one member of each recruitment panel will have attended safer recruitment training;
- All new members of staff and volunteers will undergo an induction that includes familiarisation with Noah's child protection and safeguarding policy, and Staff Behaviour Policy (code of conduct);
- All staff are required to sign to confirm they have received a copy of the child protection and safeguarding policy and Staff Behaviour Policy (code of conduct);
- All relevant staff are made aware of the disqualification legislation with a staff/volunteer/trustee briefing;
- Noah's obtains written confirmation from supply agencies and third-party organisations that they have satisfactorily undertaken all appropriate checks

in respect of individuals they provide to work in Noah's; and that those individuals are suitable to work with children;

- Noah's maintains a single central record of recruitment checks undertaken and ensures that the record is maintained; and,
- All trustees will be the subject of Enhanced DBS.

**Volunteers** - Volunteers will undergo checks commensurate with their work in Noah's and contact with children. Under no circumstances will a volunteer who has not been appropriately checked be left unsupervised or be allowed to engage in regulated activity.

**Supervised volunteers** - Volunteers who work only in a supervised capacity and are not in regulated activity will undergo the safer recruitment checks appropriate to their role, in accordance with the charity's risk assessment process and best practice.

#### **14. Site security**

Visitors to Noah's sessions, including contractors, are asked to sign in. All visitors are expected to be observant and follow Noah's safeguarding and health and safety regulations to ensure children are kept safe.

#### **15. Behaviour Management**

Our behaviour policy is set out in a separate document and is reviewed regularly by the trustee board. It is shared with staff before they start working with children as part of their induction.

#### **16. Record Keeping**

Noah's will maintain safeguarding (including early help) and child protection records. We will:

- Keep clear detailed written records of concerns about children (noting the date, event and action taken), even where there is no need to refer the matter to Children's Social Care immediately;
- Keep records in a folder in a meticulous chronological order; and,
- Ensure all records are kept secure and in locked locations.

Such records will only be accessible to the Designated Safeguarding Lead. Noah's staff will fill out a 'green form' which will document their concerns, which is the recommended pro forma *Logging A Concern About A Child's Safety And Welfare (Form C)*.

Such records will include, in addition to the name, address and age of the child, timed and dated observations describing the child's behaviour, appearance, statements/remarks made to staff or other children and observations of interactions between the child, other children, members of staff and/or parents/carers that give rise to concern. Where possible and without interpretation, the exact words spoken by the child or parent/carer will be recorded. Records will be signed, dated and timed by the member of staff making the record.

Records of safeguarding/child protection observations or concerns can be completed electronically or as a paper version but it is most important that **all staff use one consistent system for the recording of concerns and that all records are passed to the Designated Safeguarding Lead**, who should complete the form to confirm what action has been taken.

The Data Protection Act 2018 and GDPR do not prevent the DSL/staff from sharing information with relevant agencies without the consent of parents, where that information may help to protect a child.

## **17. Confidentiality and Information Sharing**

All staff will understand that child protection issues warrant a high level of confidentiality, not only out of respect for the child, family and staff involved but also to ensure that information being released into the public domain does not compromise evidence.

The Data Protection Act 2018 (DPA) and the GDPR places duties on our charity and individual staff to process personal information fairly and lawfully and to keep the information they hold safe and secure. Neither the DPA nor the GDPR, however, prevent or limit the sharing of information for the purposes of keeping children safe.

Staff will ensure confidentiality protocols are adhered to and information is shared appropriately. If in any doubt about confidentiality, staff will seek advice from the DSL, another trustee member or outside agency as required (e.g. Social Services). It is reasonable for staff to discuss day-to-day concerns about children with colleagues in order to ensure that children's general needs are met. However, staff should report all child protection and safeguarding concerns to the DSL or DDSL – in the case of concerns about the DSL – to the appointed safeguarding trustee. The person receiving the referral will then decide who else needs to have the information and they will disseminate it on a 'need-to-know' basis.

**However, any member of staff can contact and/or make a referral to Children's Social Care if they are concerned about a child.**

All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children. Information sharing will take place in a timely and secure manner and where:

- It is necessary and proportionate to do so; and,
- The information to be shared is relevant, adequate and accurate.

All staff must be aware that they cannot promise a child/parent to keep secrets. Child protection information will be stored and handled in line with Data Protection Act 1998 principles. Information is:

- Processed for limited purposes;

- Adequate, relevant and not excessive;
- Accurate;
- Kept no longer than necessary;
- Processed in accordance with the data subject's rights; and,
- Secure.

Record of concern forms (Green forms) and other written information will be stored in a locked facility and any electronic information will be password protected and only made available to relevant individuals.

Every effort will be made to prevent unauthorised access to sensitive information. Any sensitive information that needs to be stored on portable devices such as laptop computers or tablets or on portable media such as a CD or flash drive will be password protected or encrypted and kept in locked storage.

Noah's policy on confidentiality and information-sharing is available to parents on request.

## 18. Photography and images

The vast majority of people who take, or view photographs or videos of children, do so for entirely innocent, understandable and acceptable reasons. Sadly, some people abuse children through taking or using images, so we must ensure that we have some safeguards in place.

To protect children, we will:

- Seek their consent for photographs or video images to be taken;
- Seek parental consent;
- Ensure children are appropriately dressed; and,
- Encourage children to tell us if they are worried about any photographs/images that are taken of them.

Furthermore, when using images for publicity purposes (e.g. on our website or in newspapers or publications), we will:

- Avoid naming children when possible;
- If it is necessary to name children, use their first names rather than surnames;
- If children are named, avoid using their image;
- Establish whether the image will be retained for further use, where and for how long;
- Ensure that images are stored securely and used only by those authorised to do so.

For the protection of children and staff, only Noah's owned equipment will be used to record and store images taken by staff or volunteers on the Noah's site or during off site Noah's activities. Parents are welcome to take still photographs of their **own children only** during Noah's activities. Parents must not publish (including on social media) photographs of other children inadvertently captured during Noah's events

without the express permission of the parents of those children. Parents are welcome to video record their **own children only** during school activities, subject to the same terms and conditions as for photographs above. Visiting practitioners who work directly with children are subject to the same restrictions as Noah's staff and volunteers in respect of recording and storing images of children.

## **19. Child Protection Procedures**

### **19.1 Recognising abuse**

To ensure that our children are protected from harm, we need to understand what types of behaviour constitute abuse and neglect. Abuse and neglect are forms of maltreatment of children. Somebody may abuse or neglect a child by inflicting harm, for example by hitting them, or by failing to act to prevent harm, for example by leaving a small child home alone. Children may be abused in a family or in an institutional or community setting by those know to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Abuse may be committed by adult men or women and by other children and young people. Staff are trained to understand and recognise indicators of all four categories of abuse as defined below.

**There are four categories of abuse: physical abuse, emotional abuse, sexual abuse and neglect.**

### **19.2 Physical abuse**

Physical abuse is 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 (this used to be called Munchausen's Syndrome by Proxy but is now more usually referred to as fabricated or induced illness).

### **19.3 Emotional abuse**

Emotional abuse is 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, although it may occur alone.

#### **19.4 Sexual abuse**

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

#### **19.5 Neglect**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- 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,
- Ensure access to appropriate medical care or treatment.

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

Definitions taken from *Keeping Children Safe in Education (DfE 2019)*.

#### **19.6 Indicators of abuse**

Physical signs define some types of abuse, for example bruising, bleeding or broken bones resulting from physical or sexual abuse, or injuries sustained while a child has been inadequately supervised. The identification of physical signs is complicated, as children may go to great lengths to hide injuries, often because they are ashamed or embarrassed, or their abuser has threatened further violence or trauma if they 'tell'. It is also quite difficult for anyone without medical training to categorise injuries into accidental or deliberate with any degree of certainty. For those reasons it is vital that staff are also aware of the range of behavioural indicators of abuse and report any concerns to the Designated Safeguarding Lead.

**It is the responsibility of staff to report their concerns. It is not their responsibility to investigate or decide whether a child has been abused.**



A child who is being abused or neglected may:

- Have bruises, bleeding, burns, fractures or other injuries;
- Show signs of pain or discomfort;
- Keep arms and legs covered, even in warm weather;
- Be concerned about changing for PE or swimming;
- Look unkempt and uncared for;
- Change their eating habits;
- Have difficulty in making or sustaining friendships;
- Appear fearful;
- Be reckless with regard to their own or other's safety;
- Self-harm;
- Frequently miss school or arrive late;
- Show signs of not wanting to go home;
- Display a change in behaviour – from quiet to aggressive, or happy-go-lucky to withdrawn;
- Challenge authority;
- Become disinterested in their work;
- Be constantly tired or preoccupied;
- Be wary of physical contact;
- Be involved in, or particularly knowledgeable about drugs or alcohol;
- Display sexual knowledge or behaviour beyond that normally expected for their age and/or stage of development; and/or,
- Acquire gifts such as money or a mobile phone from new 'friends' or adults recently acquainted with the child's family.

Individual indicators will rarely, in isolation, provide conclusive evidence of abuse. They should be viewed as part of a jigsaw and each small piece of information will help the DSL to decide how to proceed.

**It is very important that staff report all of their concerns, however minor or insignificant they may think they are – they do not need 'absolute proof' that the child is at risk.**

### **19.7 Impact of abuse**

The impact of child abuse, neglect and exploitation should not be underestimated. Many children do recover well and go on to lead healthy, happy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach and the rest of their childhood and their adulthood may be characterised by anxiety or depression, self-harm, eating disorders, alcohol and substance misuse, unequal and destructive relationships and long-term medical or psychiatric difficulties.

## 19.8 Taking action

**Any child in any family could become a victim of abuse. Staff should always maintain an attitude of “It could happen here”.**

Key points for staff to remember when taking action are:

- In an emergency take the action necessary to help the child, for example, call 999;
- Report your concern to the DSL as quickly as possible – immediately when there is evidence of physical or sexual abuse and certainly by the end of the day;
- Do not start your own investigation;
- Share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family;
- Complete a record of concern, using a Green form; and
- Seek support for yourself if you are distressed or need to debrief.

## 19.9 If a member of staff or volunteer is concerned about a child’s welfare

There will be occasions when staff may suspect that a child may be at risk without unequivocal evidence. The child’s behaviour may have changed, their artwork could be bizarre, they may write stories or poetry that reveal confusion or distress, or physical but inconclusive signs may have been noticed. In these circumstances, staff will try to give the child the opportunity to talk. The signs they have noticed may be due to a variety of factors, for example a parent has moved out, a pet has died, a grandparent is very ill, or an accident has occurred. Staff are encouraged and supported to ask children if they are OK, if there is anything the child would like to talk to them about and if they can help in any way. Staff are trained to do this by asking appropriate open questions which do not lead anything if they wish to.

Staff should use the same record of concern form (Green form) to record these early concerns. If the child does begin to reveal that they are being harmed, staff should follow the advice below. Following an initial conversation with the child, if the member of staff remains concerned, they should discuss their concerns with the DSL.

## 19.10 If a pupil discloses to a member of staff or volunteer

It takes a lot of courage for a child to disclose that they are being abused. They may feel ashamed, particularly if the abuse is sexual. Their abuser may have threatened what will happen if they tell. They may have lost all trust in adults. Or they may believe, or have been told, that the abuse is their own fault. Sometimes they may not be aware that what is happening is abusive.

If a child talks to a member of staff about any risks to their safety or wellbeing, **the staff member will need to let the child know that they must pass the information on** – staff are not allowed to keep secrets. The point at which they tell the child this is a matter for professional judgement. If they jump in immediately the child may think that they do not want to listen but if left until the very end of the

conversation, the child may feel that they have been misled into revealing more than they would have otherwise. During their conversations with children staff will:

- Allow them to speak freely;
- Remain calm and not overreact – the pupil may stop talking if they feel they are upsetting their listener;
- Give reassuring nods or words of comfort – ‘I’m glad you told me’/‘thank you for telling me’; ‘I believe you’; ‘What happened to you is not your fault’/‘This isn’t your fault’; ‘I’m going to do what I can to help you’;
- Not be afraid of silences – staff must remember how hard this must be for the child;
- **Under no circumstances** ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the child’s mother think about all this; (**however**, it is reasonable to ask questions to clarify understanding and to support a meaningful referral if that is required, e.g. when did this happen, where did this happen?)
- At an appropriate time tell the child that in order to help them, the member of staff must pass the information on;
- Not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused;
- Avoid admonishing the child for not disclosing earlier. Saying things such as ‘I do wish you had told me about this when it started’ or ‘I can’t believe what I’m hearing’ may be the staff member’s way of being supportive but may be interpreted by the child to mean that they have done something wrong;
- Tell the child what will happen next;
- Let them know that someone will come to see them before the end of the day;
- Report verbally to the DSL;
- Write up their conversation as soon as possible on the **record of concern form** Form C (Green form) and hand it to the DSL; and
- Seek support if they feel distressed or need to debrief.

## 20. Making a referral to Children’s Social Care

The DSL and DDSL are most likely to have a complete safeguarding picture and be the most appropriate person to advise on the response to safeguarding concerns. The DSL will make a referral to Children’s Social Care (and if appropriate the Police) if it is believed that a pupil is suffering or is likely to suffer significant harm.

The child (subject to their age and understanding) and the parents will be told that a referral is being made, unless to do so would increase the risk to the child or create undue delay. All staff will be made aware of the process for making a referral to Children’s Social Care, that they may follow a referral, along with the role they might be expected to play.

### **Statutory assessments Children in need**

A child in need is defined under the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health

and development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled. Local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Children in need may be assessed under section 17 of the Children Act 1989.

### **Children suffering or likely to suffer significant harm**

Local authorities, with the help of other organisations as appropriate, have a duty to make enquires under section 47 of the Children Act 1989 if they have reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm. Such enquiries enable them to decide whether they should take any action to safeguard and promote the child's welfare and must be initiated where there are concerns about maltreatment, including all forms of abuse and neglect, female genital mutilation or other so-called honour based violence, and extra-familial threats like radicalisation and sexual exploitation.

## **21. Submitting child protection referrals**

All child protection referrals should be made to the Multi-Agency Safeguarding Hub (MASH) by completing a Multi-Agency Referral Form (MARF) and submitting it to the MASH at [mash@warwickshire.gov.uk](mailto:mash@warwickshire.gov.uk). The form can also be completed online. All urgent child protection referrals, i.e. where there is an immediate concern about a child's safety, should be made in the first instance by telephoning the MASH on 01926 414144. This should be followed by submission of a MARF as above.

If the DSL is aware that the child is already the subject of an open case to Children's Social Care, the DSL must contact their allocated social worker. Any difficulties in contacting the social worker must be escalated to their line manager.

Outside of office hours, immediate concerns about a child should be referred to the Emergency Duty Team on telephone number 01926 886922.

If staff are ever concerned that a child is in immediate danger, they will contact the Police by dialling 999.

## **22. Staff reporting directly to child protection agencies**

Any member of staff can refer their concerns directly to Children's Social Care and/or the Police if:

- The situation is an emergency and the DSL or the deputy DSL, are both unavailable;
- They are convinced that a direct report is the only way to ensure the child's safety; or,
- For any other reason they make a judgement that a direct referral is in the best interests of the child.

In any of those circumstances, staff may make a direct referral and share information without being subject of censure or disciplinary action. However, staff should inform

the DSL at the earliest opportunity that they have done so unless in their judgement doing so would increase the risk of harm to the child.

### **23. What will Children's Social Care do?**

Children's Social Care should make a decision about the type of response that is required within one working day of a referral being made; and should let the referrer know the outcome. This will include determining whether:

- The child requires immediate protection and urgent action is required;
- Whether the child is in need, and should be assessed under section 17;
- There is reasonable cause to suspect the child is suffering, or likely to suffer, significant harm, and whether enquiries must be made and the child assessed under section 47;
- Any services are required by the child and family and what type of services; and,
- Further specialist assessments are required in order to help the local authority to decide that further action to take.

### **24. Bullying, peer on peer abuse and harmful sexual behaviour**

Children should be free from harm, both from adults and other children. Children may be harmed by other children or young people. All staff recognise that children can abuse their peers and are trained on this. All peer on peer abuse is unacceptable and will be taken seriously. It is most likely to include, but is not limited to:

- Bullying (including cyberbullying);
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- Sexual violence, such as rape, assault by penetration and sexual assault;
- Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be stand-alone or part of a broader pattern of abuse;
- Sexting including pressuring another person to send a sexual image or video content (also known as youth produced sexual imagery);
- Upskirting, which typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm (upskirting is a criminal offence and may constitute sexual harassment);
- Teenage relationship abuse – defined as a pattern of actual or threatened acts of physical, sexual or emotional abuse, perpetrated against a current or former partner.
- Initiation/hazing – used to induct newcomers into an organisation such as sports team or school groups by subjecting them to a series of potentially humiliating, embarrassing or abusing trials which promote a bond between them; and,
- Prejudiced behaviour – a range of behaviours which causes someone to feel powerless, worthless or excluded and which relates to prejudices around

belonging, identity and equality, in particular prejudices linked to disabilities, special educational needs, ethnic, cultural and religious backgrounds, gender and sexual identity.

Bullying is a very serious issue that can cause children considerable anxiety and distress. At its most serious level, bullying can have a disastrous effect on a child's well-being and in very rare cases has been a feature in the suicide of some young people.

All incidents of bullying, including cyber-bullying and prejudice-based bullying should be reported and will be managed according to our policy. All staff receive a copy of the charity's behaviour policy, which contains the anti-bullying procedure, as part of their induction and are trained to be aware of the harm caused by bullying and to respond to all incidents of bullying and peer on peer abuse proactively.

Abuse is abuse and will not be tolerated, minimised or dismissed as 'banter'; 'just having a laugh'; 'part of growing up'; 'boys being boys'; or 'girls being girls'. Different gender issues can be prevalent when dealing with peer on peer abuse, for example girls being sexually touched/assaulted or boys being subject to initiation/hazing type violence. Whilst mindful of the particular vulnerability of women and girls to violence, it is also recognised that boys as well as girls can be abused by members of the opposite sex as well as the same gender group.

Occasionally, allegations may be made by a child against another child, which are of a safeguarding nature. Safeguarding issues raised in this way may include physical abuse, emotional abuse, sexual abuse and sexual exploitation. Members of staff to whom such allegations are made and/or who become concerned about a child's sexualised behaviour, including any known online sexualised behaviour, should report their concerns in the usual way on a Green form and report them to the DSL as soon as possible, as with any other safeguarding concern.

## **25. Children with sexually harmful or inappropriate behaviour**

Children may be harmed by other children or young people. Staff will be aware of the harm caused by bullying and follow our procedures. However, there will be occasions when a child's behaviour warrants a response under child protection rather than anti-bullying procedures. In particular, research suggests that up to 30 per cent of child sexual abuse is committed by someone under the age of 18. Abusive behaviour by one child towards another will not be tolerated, minimised or dismissed as 'banter' or 'part of growing up'.

Staff will be mindful of the different gender issues that can be prevalent when dealing with peer on peer abuse although it is recognised that boys as well as girls can be abused by members of the opposite as well as the same gender group. Members of staff who become concerned about a child's sexualised behaviour, including any known online sexualised behaviour, should record their concerns and report them to the DSL as soon as possible, as with any other safeguarding concern. The management of children and young people with sexually harmful behaviour is complex and Noah's will work with other relevant agencies whenever required to maintain the safety of the whole Noah's community. Young people who display such

behaviour may be victims of abuse themselves and the child protection procedures will be followed for both victim and perpetrator. Any instances of sexual harm caused by one child to another and any situation where there are concerns about power imbalance, coercion or force will be discussed with Children's Social Care.

In responding to cases involving children or young people who have committed sexually abusive behaviours, Children's Social Care will consult with the Sexualised Inappropriate Behaviours Service (SIBS), for advice, consultation or provision of a direct service. A wide range of practice guidance, knowledge and therapeutic materials has been developed by SIBS to inform the interventions relating to children and young people with sexual behaviour difficulties.

In deciding the most appropriate response, relevant considerations will include:

- The nature and extent of the inappropriate/abusive behaviours. In respect of sexual abuse, it is necessary to distinguish between normal childhood sexual development and experimentation; and sexually harmful or aggressive behaviour;
- The context of the abusive behaviours;
- The child/young person's development, family and social circumstances;
- The need for services, specifically focusing on the child/young person's harmful behaviour as well as other significant needs; and/or
- The risks to self and others, including other children in the school, household, extended family, peer group and wider social network.

Noah's is committed to participating in plans both to provide children who are at risk from other children and those children who may present a risk to other children with appropriate services to address any concerns.

## **26. Child sexual exploitation and child criminal exploitation**

Child sexual exploitation (CSE) is a form of child sexual abuse. Child criminal exploitation (CCE) is a form of child abuse. Both occur where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual and/or criminal activity:

- a) In exchange for something the victim needs or wants; and/or,
- b) For the financial advantage or increased status of the perpetrator or facilitator.

The victim may have been sexually and/or criminally exploited even if the sexual/criminal activity appears consensual. CSE and CCE do not always involve physical contact; they can also occur through the use of technology. Victims of CSE and CCE can be boys or girls. Children and young people are often unwittingly drawn into sexual and/or criminal exploitation through the offer of friendship and care, gifts, drugs, alcohol and sometimes accommodation.

Sexual exploitation is a serious crime and can have a long-lasting adverse impact on a child's physical and emotional health. It may also be linked to other criminal activity including trafficking and illegal drugs. Drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns.

Criminal exploitation may include activities such as:

- A child travelling outside the area in which she/he lives in order to transport, distribute or sell drugs for others by whom they are being exploited. This form of criminal activity and exploitation is referred to as county lines;
- A child committing crimes on behalf of or at the behest of others because they, their friends or relatives have been threatened, deceived or manipulated;
- A child being forced to commit crime in order to settle actual or fabricated debts;
- Gang membership, which may lead to the child being exploited to do something illegal or dangerous in return for kudos/status in the gang;
- A child being encouraged or manipulated to commit crime via social media; and,
- A child receiving food, money, kudos or status in return for storing a weapon or drugs for others.

All staff are trained to be vigilant about and report indicators of CSE and CCE, the DSL will then consider the need to make a referral to Children's Social Care via the MASH. Although the following vulnerabilities increase the risk of child sexual and/or criminal exploitation, not all children with these indicators will be exploited and child sexual and criminal exploitation can occur without any of these issues:

- Having a prior experience of neglect, physical and/or sexual abuse;
- Lack of safe/stable home environment, now or in the past (domestic violence or parental substance misuse, mental health issues or criminality, for example);
- Recent bereavement or loss;
- Social isolation or social difficulties;
- Absence of a safe environment to explore sexuality;
- Economic vulnerability;
- Homelessness or insecure accommodation status;
- Connections with other children and young people who are being sexually and/or criminally exploited;
- Family members or other connections involved in adult sex work and/or other criminal activity;
- Having a physical or learning disability; and,
- Being looked after (particularly those in residential care and those with interrupted care histories).

## **27. So-called 'honour based' violence**

So-called 'honour-based' violence (HBV) encompasses crimes which have been committed to protect or defend the honour of a family and/or community. Such crimes include Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving 'honour' often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors



when deciding what form of safeguarding action to take. Staff will be alert to the possibility of a child being at risk of HBV or already having suffered HBV.

All forms of so-called HBV are abuse (regardless of the motivation) and staff will record and report any concerns about a child who might be at risk of HBV to the Designated Safeguarding Lead as with any other safeguarding concern. The DSL will consider the need to make a referral to the Police and/or Children's Social Care as with any other child protection concern; and may also contact the Forced Marriage Unit for advice as necessary.

## **28. Female genital mutilation**

Female genital mutilation (FGM) is a form of child abuse. It is the collective name given to a range of procedures involving the partial or total removal of the external female genitalia for non-medical reasons or other injury to the female genital organs. It has no health benefits and harms girls and women in many ways. The practice, which is most commonly carried out without anaesthetic, can cause intense pain and distress and long-term health consequences, including difficulties in childbirth. FGM is carried out on girls of any age, from young babies to older teenagers and adult women, so staff are trained to be aware of risk indicators. Many such procedures are carried out abroad and staff should be particularly alert to suspicions or concerns expressed by female pupils about going on a long holiday during the summer vacation period.

In England, Wales and Northern Ireland, the practice is illegal under the Female Genital Mutilation Act 2003. Any person found guilty of an offence under the Female Genital Mutilation Act 2003 is liable to a maximum penalty of 14 years' imprisonment or a fine, or both. If staff have a concern that a girl may be at risk of FGM, they will record their concern and inform the DSL as they would any other safeguarding concern, with the DSL contacting the Police. Staff can always make direct contact to the police if they have an immediate concern or it is not adequately followed up.

## **29. Forced Marriage**

A forced marriage is a marriage in which a female (and sometimes a male) does not consent to the marriage but is coerced into it. Coercion may include physical, psychological, financial, sexual and emotional pressure. It may also involve physical or sexual violence and abuse.

A forced marriage is not the same as an arranged marriage. In an arranged marriage, which is common in several cultures, the families of both spouses take a leading role in arranging the marriage but the choice of whether or not to accept the arrangement remains with the prospective spouses.

Children may be married at a very young age, and well below the age of consent in England. Staff should be particularly alert to suspicions or concerns raised by a child about being taken abroad and not being allowed to return to England. Since June 2014 forcing someone to marry has become a criminal offence in England and Wales under the Anti-Social Behaviour, Crime and Policing Act 2014.

### **30. Protecting Children from Radicalisation and Extremism**

Some children are vulnerable to extremist ideology and radicalisation. Protecting children from the risk of radicalisation is part of Noah's wider safeguarding duties and is similar in nature to protecting children from other forms of harm and abuse. As such, the Designated Safeguarding Lead is responsible for Noah's strategy for protecting children from these risks.

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. Extremism is the vocal or active opposition to fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces. Even very young children have been exposed, in rare circumstances, to extremism at home and elsewhere online.

As children get older, they look for adventure and excitement and they may start to ask questions about their identity and belonging. During that stage of their development they are vulnerable to extremist groups that may claim to offer answers, identity and a social network apparently providing a sense of belonging. Many of those extremist groups make sophisticated use of the internet and social media to target young people and spread their ideology, making young people more vulnerable to being influenced by extremist ideas. Young people who feel isolated or disaffected in some way are particularly vulnerable to radicalisation as they are other forms of abuse and exploitation.

During the process of radicalisation, it is possible to intervene to prevent vulnerable people being radicalised. Noah's promotes the values of democracy, the rule of law, individual liberty, mutual respect and tolerance of those with different faiths and beliefs by providing children with opportunities through the curriculum to discuss issues of religion, ethnicity and culture and learn how to discuss and debate points of view; and by ensuring that all pupils are valued and listened to.

Staff receive training that provides them with both the information they need to understand the risks affecting children and young people in this area; and a specific understanding of how to identify individual children who may be at risk of radicalisation and how to support them. Staff are trained to report all concerns about possible radicalisation and extremism to the DSL immediately as they would any other safeguarding concern, identifying early indicators of possible radicalisation including changes in behaviour and attitudes to learning; and expressions of interest in extremist ideas along with a tolerance towards potential violence to certain members of society.

Noah's will make appropriate referrals to the Police PREVENT team in respect of any child whose behaviour or comments suggest that they are vulnerable to being radicalised and drawn into extremism and terrorism in order to ensure that children receive appropriate support. Noah's will discuss any concerns about possible radicalisation identified with a child's parents/carers as with any other safeguarding or child protection issue unless there is reason to believe that doing so would place

the child at risk; and will also support parents/carers who raise concerns about their children being vulnerable to radicalisation.

Noah's expects all staff, volunteers, governors, visiting professionals, contractors and individuals or agencies that hire our premises to behave in accordance with Noah's Staff Behaviour Policy (code of conduct), will challenge the expression and/or promotion of extremist views and ideas by any adult on Noah's premises or at Noah events and, when necessary, will make appropriate referrals in respect of any such adult.

### **31. Children who are looked after or were previously looked after**

The most common reason for children becoming looked after is as a result of abuse or neglect. Children who were previously looked after potentially remain vulnerable.

A private fostering arrangement occurs when someone other than a parent or a close relative cares for a child for a period of 28 days or more, with the agreement of the child's parents. It applies to children under the age of 16, or under 18 if the child is disabled. Children looked after by the local authority or who are placed in a residential school, children's home or hospital are not considered to be privately fostered.

Private fostering occurs in all cultures, including British culture and children may be privately fostered at any age. Most privately fostered children remain safe and well but safeguarding concerns have been raised in some cases so it is important to be alert to possible safeguarding issues, including the possibility that a child has been trafficked into the country.

By law, a parent, private foster carer or other persons involved in making a private fostering arrangement must notify Children's Social Care as soon as possible. When Noah's becomes aware of a private fostering arrangement for a child that has not been notified to Children's Social Care, staff will encourage parents and private foster carers to notify Children's Social Care and will share information with Children's Social Care as appropriate.

### **32. Domestic Abuse**

Domestic abuse is defined as any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- Psychological;
- Physical;
- Sexual;
- Financial; and,
- Emotional abuse.

Exposure to domestic abuse and/or violence can have serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

All concerns about children being affected by domestic abuse will be reported to the DSL as with any other safeguarding concern. The DSL will respond to the report by consulting Children's Social Care in order to establish whether a referral is required or the situation should be managed by discussion with parents/carers.