**Safeguarding Policy and Procedure**

**Commitment**ACT are committed to ensuring the safety and welfare of all learners. ACT recognises that Safeguarding and promoting the welfare of our learners is everyone’s responsibility and we are committed to acting in the best interest of our learners at all times.

All staff have a duty to recognise, react, respond and report disclosures or concerns and work collaboratively in a multi-agency approach. All colleagues should make sure that their approach is at all times learner centred to address risks and prevent situations from escalating. This means that staff should consider at all times, what is in the best interest of the learner.

ACT adopts an open and accepting attitude towards our learners as part of its responsibility for pastoral care. Staff encourage learners to feel free to talk about any concerns and to see ACT as a safe place when there are difficulties. Learners worries and fears will be taken seriously and learners are encouraged to seek help from members of staff.

ACT will therefore:

* Ensure that all members of staff are aware of the signs of abuse, neglect and specific safeguarding issues, so that they are able to identify learners who may be in need of help, to report concerns to the Safeguarding Team;
* Ensure that staff members always act in the best interests of the learner;
* Ensure that all staff members are aware of the Safeguarding Policy as part of staff induction and revisited regularly, through making the policy accessible on Iris.
* Provide a safe environment in which learners can learn;
* Establish and maintain an ethos where learners feel secure and are encouraged to talk, and are listened to;
* Ensure that all learners know that there are staff members with whom they can approach if they are worried or are in difficulty;
* Include in the curriculum activities and opportunities for learners to develop the skills they need to stay safe from abuse (including online), and to know to whom they can turn for help;
* Have designated safeguarding team across all sites to provide support to staff members to carry out their safeguarding duties and who will liaise closely with other services;
* Have a designated safeguarding person and deputy who will be responsible for safeguarding overall;
* Recognise its duties to learners in need, providing early help and intervention, while also providing support for learners at risk. Early help means providing support as soon as a problem emerges at any point in a learner’s life, from adolescents into adulthood. In the first instance, staff should discuss early help requirements with a Safeguarding Team Member;
* Ensure that when anyone raises a concern about a learner’s welfare that a referral (if necessary) is made to the appropriate referral agency; Staff should discuss any potential referral with the designated safeguarding person, who in most instances would make the referral;
* Ensure every effort is made to establish effective working relationships with parents/carers/guardians and colleagues from other agencies where appropriate;

* Operate safer recruitment procedures and make sure that all appropriate checks are carried out on new staff and volunteers who will work with learners, including references and appropriate disclosure and barring checks (DBS);
* Keep up-to-date records on the My Concern system.

**Purpose**This policy and these procedures have priority over all other policies and procedures.

The purpose of this policy and the safeguarding handbook is;

* To protect learners who receive ACT’s services. This includes the children of adult learners.
* To provide staff, volunteers and parents (where necessary) with the overarching principles that guide our approach to safeguarding.

**This policy sets out ACT’s procedure for dealing with safeguarding and must be used in conjunction with the safeguarding handbook. It is each staff members responsibility to familiarise themselves with both the procedure and handbook.**

**Scope**This policy applies to anyone working on behalf of ACT, including Senior Managers, The Board of Directors, paid staff, volunteers, sessional workers, agency staff and students.

**Responsibilities**

* The Designated Safeguarding Peron has overall responsibility for this policy.
* The Deputy Designated Safeguarding Person, Safeguarding Team Members and Safeguarding board are responsible for supporting the Designated Safeguarding Person with the development and implementation of this policy.
* Line Managers are responsible for ensuring that their staff are aware of and follow this policy and handbook.

**Communication and Storage**This policy will be disseminated via read and accept and stored on Iris.

Our policy should be read in conjunction with Welsh Government guidance document no: 283/2022 [Keeping Learners Safe](https://gov.wales/sites/default/files/publications/2022-04/220401-keeping-learners-safe.pdf). The ACT Safeguarding Handbook should also be referred to for further information.

**Procedure**What follows bellows is ACT’s procedure for reporting safeguarding concerns. However, in an emergency, any staff member can contact the relevant emergency service, social services or adult services:

1. If staff members have any concerns (as opposed to a learner being in immediate danger - see point 5) about a learner, they should raise these concerns via the My Concern system.
2. The concern will be allocated by the DSP/DDSP or Provision Lead to a Safeguarding Team Member, who will decide on the most appropriate course of action to take and will provide ongoing support and advice to the member of staff who made the referral.
3. If a referral is appropriate, the Safeguarding Team Member should make it. However, anyone can make a referral and if for any reason a staff member thinks a referral is appropriate and one hasn’t been made they can and should consider making a referral themselves, or contact the Lead safeguarding Officer.
4. If after a referral the learner’s situation does not appear to be improving, the Safeguarding Team Member (or the person that made the referral) should press for re-consideration to ensure their concerns have been addressed, and most importantly the learner’s situation improves.
5. **If a learner is in immediate danger or is at risk of significant harm, a referral should be made to children/adult services and/or the police/emergency services immediately.** Anybody can make a referral.
6. It is important that all parties act swiftly and avoid delays.
7. Detailed records, including times and dates must be provided. The My Concern system will prompt you for this information, which must be completed the same day as the concern or incident.
8. In all cases, the best interest of the learner is the primary consideration
9. A referral to statutory agencies does not require parental consent for children, if there are reasonable grounds to believe that a child is at risk of significant harm.

**When is it suitable to inform parents/guardians of an allegation or concern of abuse?** The Safeguarding Team Member will use professional judgement regarding the suitability and timing of informing parents and/or guardians.

**Individual Staff/Volunteers/Other Adults - main procedural steps**

When a learner makes a disclosure, or when concerns are received from other sources:

* Take what the learner says seriously;
* Do not investigate, ask leading questions, examine learners, **or promise confidentiality**;
* Learner’s making disclosures should be reassured and if possible at this stage should be informed what action will be taken next;
* Listen carefully without interrupting;
* Remain calm and do not rush into action that may be inappropriate;
* Reassure the learner that he/she is not to blame;
* If you are in a group situation with a learner, arrange to see him/her on his/her own at the earliest possible opportunity;
* If the learner is in immediate danger or in need of emergency medical care, make sure the relevant emergency service is contacted;
* Let the learner know what you are going to do to help;
* Report what you have been told, it is advisable to do this via the My Concern system, however, you can also speak to a DSP if the concern requires immediate attention. This must always be done on the same day;
* Use the learner’s exact words wherever possible. Concerns about abuse must always be recorded;
* Keep the matter confidential to as few people who need to know;
* **If the allegation is about the DSP, the information should be passed to the Director with Safeguarding responsibility, Zoe Goodall;**
* If this has not already been done, inform the learner (or other party who has raised the concern) what action you have taken;
* **If a crime may have been committed, the matter should be reported to the Police.**

**Allegations against members of staff**

We have to notify the Local Authority Designated Officer for Child Protection (LADO) immediately if we

become aware of an allegation relating to a staff member where they have allegedly:

-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;

-or Behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they

work regularly or closely with children.

For more information, please click on the link below;

<https://www.gov.wales/sites/default/files/publications/2018-11/safeguarding-children-in-education-handling-allegations-of-abuse-against-teachers-and-other-staff.pdf>

**Document / Policy Change Request**Any changes to this document must be requested via the Designated Safeguarding Person Kelly Rowlands

**Document / Policy Reviewing and Approving**This policy and handbook will be reviewed annually by the Safeguarding Board

**References**

* Safeguarding HandbookCode of Safe Conduct
* ICT Policy
* Behaviour Policy [[1]](#footnote-1)
* Counselling policy
* Guest speaker risk assessment
* PREVENT Risk Assessment
* Raising Concerns Policy
* The Equality Act (2010)
* The Counter-Terrorism Act (2015)
* Section 175 of the Education Act (2002)
* The Protection of Freedom Acts (2012)
* Human Rights Act (1998)
* The Children’s Act (1989)
* The Prevent Strategy (2011)
* In safe hand: Implementing Adult protection procedures in Wales
* Prevent Duty Guidance for Further Education (2015)
* Wales Safeguarding Procedures
* Regional Safeguarding Board
* Keeping Learners Safe (2022) Circular No: 283/2022
* Safeguarding Children: Working together under the Children Act Circular No:12/2007
* Complaints Procedures for School Governing Bodies in Wales 2012
* Safeguarding Vulnerable Groups Act 2006
* Respecting others: anti-bullying guidance 2003
* Safeguarding Children in Education: handling allegations of abuse against teachers and other staff Circular no:009/2014
* Social Services and Well-being (Wales) Act 2014 (Part 7 of the Act relates to safeguarding)
* Education Safeguarding Guidance Coronavirus (2020)
* Keeping Children Safe in Education (2021)
* Common law duty of care
* The Children’s Rights Framework
* The United Nations Convention on the Rights of the Child (UNCRC)
* The Rights of Children and Young Persons (Wales) Measure 2011
* The Violence Against Woman, Domestic Abuse and SEXUAL Violence (Wales) Act 2015
* Child Practice Reviews: multi-agency professional forums
* Female Genital Mutilation Act 2003

**Glossary**

**Child or Children**: The Children Act 1989 defines a child as a person under eighteen for most purposes.

**Adult at Risk**: The new Social Services and Well-being Act introduces the concept of ‘adults at risk’, which is an adult who: “(a) is experiencing or is at risk of abuse or neglect (b) has needs for care and support (whether or not the authority is meeting any of those needs) (c) is unable to protect himself or herself against the abuse or neglect or the risk of it.”

**Section 31(9) of the Children Act 1989 states**

* **‘harm’** means ill-treatment or the impairment of health and development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another;
* **‘development’** means physical, intellectual, emotional, social or behavioural development
* **‘health’** means physical or mental health
* **‘ill treatment’** includes sexual abuse and forms of ill treatment which are not physical

**Significant Harm**

**Section 31(10) of the Children Act 1989 states that:** ‘Where the question of whether harm suffered by a child is significant turns on the child’s health and development, his health and development shall be compared with that which could reasonably be expected of a similar child.

**LSO**: Lead Safeguarding Officer

**DLSO**: Deputy Lead Safeguarding Officer

**DSP**: Designated Safeguarding person

Forms of abuse (The safeguarding guide provides further detail on all the below):

**Abuse**

Abuse is a form of maltreatment. Somebody may abuse or neglect a person by inflicting harm or by failing to act to prevent harm. Children/Young people/Adults at risk 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.

**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 person. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness.

**Emotional abuse**

Persistent emotional maltreatment of a person causes severe and adverse effects on emotional development. It may involve conveying to a person 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 person the 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 a person. These may include interactions that are beyond a person’s developmental capability as well as overprotection and limitation of exploration and learning, or preventing the person 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 the person to frequently feel frightened or in danger, or the exploitation or corruption of a person. Some level of emotional abuse is involved in all types of maltreatment of people, although it may occur alone.

**Sexual abuse**

Involves forcing or enticing a child, young person or adult at risk to take part in sexual activities, not necessarily involving a high level of violence, whether or not the person 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 the individual in looking at, or in the production of, sexual images, watching sexual activities, encouraging children, young person or adult at risk to behave in sexually inappropriate ways, or grooming a person 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.

**Neglect**

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

**Potential abuse**

Situations where individuals might not have been abused but where social and medical assessments indicate a high degree of risk that they might be abused in the future, including situations where another child/person in the household has been abused, or where there is a known abuser.

**Female Genital Mutilation**

* FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for nonmedical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls’ and women’s bodies. The practice causes severe pain and has several immediate and long term health consequences, including difficulties in childbirth also causing dangers to the child.
* FGM is illegal in the UK. For the purpose of the criminal law in England, Wales and Northern Ireland, FGM is mutilation of the labia majora, labia minora or clitoris. FGM is prevalent in 28 African countries as well as in parts of the Middle East and Asia.
* FGM constitutes a form of child abuse and violence against women and girls, and has severe short-term and long-term physical and psychological consequences

**Extremism**

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

To fulfil the Prevent duty at ACT, it is essential that all staff are able to identify learners who may be vulnerable to radicalisation, and know what to do when they are identified. Staff will receive training to ensure they have the ability to understand what may make individuals susceptible to radicalisation, as well as the confidence and ability to raise their concern when someone may be at risk.

At ACT staff are expected to be vigilant in assessing the risk of individual learners or groups of learners being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. Through staff training they are made aware of risks affecting children and young people in our area and understand how to identify individual learners who may be at risk of radicalisation and what to do to support them in an appropriate and proportionate way. At the same we are aware through liaison with the local authority and the local police of the increased risk of online radicalisation, as terrorist organisations such as ISIL seek to radicalise young people through the use of social media and the internet in our area.

The Prevent duty does not require teaching and assessing staff to carry out unnecessary intrusion into family life but as with any other safeguarding risk, at ACT, staff must act when they observe behaviour of concern and follow our existing safeguarding procedures.

 **Radicalisation**

This is defined as the process by which an individual or group comes to adopt increasingly extreme political, social, or religious ideals and aspirations.

**Peer on Peer Abuse**

Everyone should be aware that children can abuse other children. Peer-on-peer abuse can happen both inside and outside of a setting, face-to-face and online. Organisations working with children play an important role in preventing and responding to peer peer-on-peer abuse. As with any form of abuse, peer-on-peer abuse can result in significant, long-lasting trauma, isolation, physical harm, poor mental health, a child missing education, and poor outcomes.

Inappropriate behaviours between children that are abusive in nature including physical, sexual, or emotional abuse, exploitation, sexual harassment, all forms of bullying, coercive control, hazing/initiation rituals between children and young people, both on and offline (including that which is within intimate personal relationships).

**Child Exploitation**

Child exploitation is when someone uses a child for financial gain, sexual gratification, labour or personal advantage. Using cruel and violent treatment to force a child to take part in criminal or sexual activities often leads to physical and emotional harm to the child, to the detriment of their physical and mental health, education, and moral or social development.

The exploitation of children can take a number of different forms and perpetrators may subject children and young people to multiple forms of abuse at the same time, such as criminal exploitation (including county lines) and sexual exploitation.

**Child Sexual Exploitation (CSE)**

Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation does not always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. Some of the following signs may be indicators of sexual exploitation:

* Children who appear with unexplained gifts or new possessions;
* Children who associate with other young people involved in exploitation;
* Children who have older boyfriends or girlfriends;
* Children who suffer from sexually transmitted infections or become pregnant;
* Children who suffer from changes in emotional well-being;
* Children who misuse drugs and alcohol;
* Children who go missing for periods of time or regularly come home late;
* Children who regularly miss school or education or don’t take part in education.

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**Domestic Abuse**Everyone working with children should be alert to the frequent interrelationship between domestic abuse and the abuse and neglect of children. Where there is evidence of domestic abuse, the implications for any children in the household should be considered, including the possibility that the children may themselves be a victim of violence or other harm

1. [↑](#footnote-ref-1)