

Introduction to Safeguarding at The SAND Project

The SAND Project team holds the protection, safety, health, well-being and welfare of all of its trainees as paramount. We believe that all children, young people and vulnerable adults have a right to protection from abuse and to the support they need to reach their full potential.

We follow the statutory guidance in 'Keeping Children Safe in Education' and 'Working Together to Safeguard Children' and recognise our responsibility under the Children's Act 1989 and section 175 of the Education Act 2002, to have due regard to our responsibility to safeguard and promote the welfare and wellbeing of children and young people.

All staff at The SAND Project must read and digest at least Part 1 of Keeping Children Safe in Education and understand that this is updated annually.

In line with 'Keeping Children Safe in Education', we believe that everyone has a responsibility to actively safeguard children, young people and vulnerable adults, whatever their role; and we are committed to a 'whole organisation approach' to safeguarding. To this end we will ensure that all staff are trained in Safeguarding and Child Protection and also in preventing radicalisation, in line with the statutory guidance in the Prevent Duty 2015.

[Prevent duty training - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

We will take all child protection and safeguarding concerns seriously and will respond to them promptly, keeping the child/young person/vulnerable adult at the centre of all we do.

We will make information available on Safeguarding and Child Protection to trainees, parents and guardians and make sure that we keep up to date with changes in legislation.

The SAND Project provides a comprehensive wellbeing and welfare service to students. This includes support and signposting for: housing; financial support needs; medical and physical health needs and mental health and emotional wellbeing; all of which can impact on a trainee's health, well-being and safety.

Reporting concerns

If you are concerned about the safety of any child, young person or vulnerable adult during College hours, then please contact:

Designated Safeguarding Leads on 07707 967916, ask for Rachel McDonald-Taylor or Beki Tonks.

If you want to report a concern outside College hours:

16-18 year olds: (5.00pm-9.00am weekdays) or at weekends and bank holidays, please call [033 022 26664](tel:03302226664). [Raise a concern about a child - West Sussex County Council](#)

18-25 year olds: contact West Sussex County Council's Adult's CarePoint on **01243 642121**.

You can do this without giving your name. Make a note of your concerns, what has happened and anything you have done about it. If you are concerned about someone you know, try to speak to them to get their consent to share information, if it is safe to do so.

If you feel a trainee is at immediate risk of harm to themselves or others, please contact the emergency services on 999.

NSPCC Helpline 0808 800 5000

CEOP –Reporting online safety concerns

Safeguarding is everyone's responsibility

The college will always offer support to any trainee that may have been affected by these concerns.

Operation Encompass Statement

Operation Encompass is the reporting to schools and colleges, prior to the start of the next college day, when a child or young person has been exposed to, or involved in, any domestic incident.

Operation Encompass will ensure that a member of the college staff, known as a Key Adult (Rachel or Beki) is trained to allow them to liaise with the police and to use the information that has been shared, in confidence, while ensuring that the college is able to make provisions for possible difficulties experienced by young people, or their families, who have been involved in, or exposed to, a domestic abuse incident.

Safeguarding Policy

Written in Sept 2023, Review due September 2024

Designated Safeguarding Leads:

Rachel McDonald-Taylor and Beki Tonks.

Local Authority Designated Officers (LADO):

LADO for safeguarding children (under 18) Miriam Williams and Donna Tomlinson. Contact Number: 0330 222 6450

LADO for safeguarding adults: West Sussex Safeguarding Adults Board, Email us: safeguardingadultsboard@westsussex.gov.uk Telephone us: 03302 227952

1. Introduction. For the purposes of this policy- Children refers to trainees who are 16-18 years old.

1.1. The SAND Project is a place where trainees, staff, families and other visitors will be made welcome and comfortable and where we will treat each other with respect. We believe that all children, young people and young adults have the right to protection from neglect and abuse and that their welfare is of paramount importance. The SAND Project is a place where learning and personal development happens in a climate of trust and confidence and where we value everyone's unique contribution to our community.

1.2. Everyone has a responsibility for safeguarding and promoting the welfare of children, young people and young adults, and for ensuring that they are protected from harm.

1.3. We recognise that children and young adults with special educational needs and disabilities are more vulnerable to abuse and may be less able to tell people about abuse happening to them. It is essential that rigorous procedures are in place, especially with regard to recruitment checks on employees, whistle blowing policies, and having clear guidelines setting out acceptable behaviour by those working with our trainees, as set out in our Staff Code of Conduct.

1.4. The SAND Project is committed to safeguarding and promoting the welfare of all of our trainees and families. We recognise that in an ever changing and fast-moving world it is essential that we promote trainees' well-being, confidence and resilience, and that we provide them with up to date information and signpost them and their families to places where they can find support, where necessary.

2. Guiding Principles

2.1. All staff and volunteers working at The SAND Project have a duty to ensure that children, young people and young adults are safe and protected and, if there are any concerns relating to their welfare or safety, one of the Designated Safeguarding Leads will be alerted.

2.2. We will always work in **partnership with families**. Where there is conflict between the needs of the trainee and those of parents/carers or professionals, the needs of the trainee must come first.

2.3. We are committed to **safer recruitment and selection** procedures to ensure that all staff have been appropriately screened prior to appointment. We will provide appropriate safeguarding training through the staff induction programme and within continuing professional development opportunities. We will ensure that all adults within our organisation who have substantial access to children, young people and vulnerable adults have been recruited and checked as to their suitability in accordance with Keeping Children Safe in Education (2023) [Keeping children safe in education - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/100266/Keeping-children-safe-in-education-2023.pdf) and The Care Act (2014).

2.4 We understand the importance of safeguarding within the curriculum, which is the responsibility of all staff. Preventative education is most effective in the context of a whole college approach that prepares trainees for life in modern Britain and creates a culture of zero tolerance for racism, sexism, misogyny/misandry, homophobia, biphobic, transphobic and sexual violence/harassment. The SAND Project has a clear set of values and standards, upheld and demonstrated throughout all aspects of college life. These are underpinned by our Code of Conduct and pastoral support system, as well as by a planned programme of Life and Living sessions, delivered in regularly timetabled lessons, and reinforced throughout the whole curriculum. This program will tackle, at an age-appropriate stage, issues such as:

- healthy and respectful relationships
- boundaries and consent

- stereotyping, prejudice and equality
- body confidence and self-esteem
- how to recognise an abusive relationship, including coercive and controlling behaviour
- the concepts of, and laws relating to – sexual consent, sexual exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, so-called ‘honour’-based violence such as forced marriage and Female Genital Mutilation (FGM), and how to access support, and
- what constitutes sexual harassment and sexual violence and why these are always unacceptable.

2.5 Online safety It is essential that trainees are safeguarded from potentially harmful and inappropriate online material. An effective whole college approach to online safety empowers us to protect and educate trainees staff in the use of technology and establishes mechanisms to identify, intervene in, and escalate any concerns where appropriate. The breadth of issues classified within online safety is considerable and ever evolving, but can be categorised into four areas of risk:

- **Content:** being exposed to illegal, inappropriate, or harmful content, for example: pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation, and extremism. We reduce this risk by ensuring an effective system of filtering and monitoring.
- **Contact:** being subjected to harmful online interaction with other users; for example: peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes.
- **Conduct:** online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images (e.g. consensual and non-consensual sharing of nudes and semi-nudes and/or pornography, sharing other explicit images and online bullying)
- **Commerce:** risks such as online gambling, inappropriate advertising, phishing and or financial scams.

Our approach to Online safety will be reviewed annually.

3. Local and national guidance and procedures

3.1. This policy and the accompanying procedures have been developed in accordance with the following local and national statutory and non-statutory guidance, policy and procedures:

- The Children Act 1989
- The Children Act 2004- under section 14B of the Children Act 2004, as amended by the Children & Social Work Act 2017.
- Education Act 2002,2011
- The Prevent Duty June 2015
- Keeping Children Safe in Education (2023)
- Working Together to Safeguard Children (2018)
- What to do if you are worried a child is being abused (2015)
- The Education (Child Information) (England) Regulations 2005
- The Care Act 2014
- Care and Support Statutory Guidance (Dept. of Health & Social Care, 2018)
- Mental Capacity Act 2005
- Safeguarding Vulnerable Groups Act 2006
- Sussex Safeguarding Adults Policy and Procedures – May 2019
- Multi-agency statutory guidance on Female Genital Mutilation (FGM) 2016
- Pan Sussex Child Protection and Safeguarding Procedures Manual
- Human Rights Act (1998) which compels public organisations to respect and protect an individuals human rights when they make decisions about them
- The Equality Act (2010): understanding that protected characteristics may make a trainee more vulnerable to abuse and giving careful thought to how trainees can be proactively safeguarded and not discriminated against.

3.2 Links to our other policies

We will take account of the principles outlined in this policy and ensure that all other policies and procedures support the protection of children and vulnerable adults from harm or neglect, with particular emphasis on:

- Recruitment and selection: to ensure suitable staff are appointed
- Anti-bullying: including cyber bullying, prejudice- based and discriminatory bullying- to ensure physical and emotional security for all our trainees and staff

- Attendance and welfare: to ensure absence is followed up quickly and vulnerable children and adults are supported appropriately with referrals to Early Help and other teams as appropriate.
- Online Safety including use of social media to ensure trainees are safe online; links with Acceptable Use of ICT policy and the responsibility for all colleges to manage filtering and monitoring systems, blocking harmful and inappropriate content.
- Life and Living Curriculum: to assist trainees in understanding what is and is not acceptable behaviour towards them and staying safe, links with the trainees Code of Conduct
- Staff code of conduct- Including low- level concerns, allegations against staff and whistleblowing. We will ensure that throughout our other policies we are positively safeguarding and promoting the welfare of children and vulnerable adults in all areas of our practice.

4. Roles and responsibilities

4.1. Designated Safeguarding Leads (DSLs)

4.1.1. The Designated Safeguarding Lead will undergo child protection and safeguarding training, when appointed to post and then refreshed every two years. They will attend local updates as appropriate.

4.1.2. The key responsibilities include:

- Being the point of contact for staff who have concerns or information that a child, young person or young adult may be suffering abuse now, or has done in the past or is likely to in the future
- Making any necessary referrals to Early Help, social services and the police
- Overseeing the implementation of the internet filtering system, reviewing it at least annually to ensure it's fit for purpose.
- Providing information to the CEO and Managing Director regarding the number and nature of referrals (to enable them to monitor and evaluate the effectiveness of the policy in safeguarding and promoting the welfare of the trainees)

4.1.3. A more detailed list of responsibilities of the DSLs can be found at **Appendix 1**

4.2. Staff responsibilities:

4.2.1. Staff all have an active part to play in safeguarding, including:

- multi-agency working
- site security
- information sharing
- record keeping and data protection
- confidentiality
- whistle-blowing and complaints
- monitoring trainees when they are online to ensure they are staying safe
- considering whether a trainee would benefit from a referral to Early Help
- being aware of the signs and indicators of abuse and neglect
- safeguarding issues as outlined in Section 8
- Child on Child abuse (trainees who are under 18) and understand that this can happen both in College and outside, in person and online and not to dismiss abusive behaviour as “banter”.

4.2.2. Multi-Agency Working

We have effective working relationships with other agencies, including the Early Help and multi-agency safeguarding hub, Social Care teams, the police. We recognise that professional challenge and curiosity have an important role to play in ensuring effective safeguarding. We will ensure that relevant staff members participate fully in multi-agency meetings that support trainees and their families, including child/adult protection conferences and core groups, child in need network meetings, early help meetings, Safeguarding Adult meetings and strategy discussions. We will participate in serious case reviews, other reviews, and file audits as and when required to do so by the West Sussex Safeguarding Children and West Sussex Adult Safeguarding. If trainees come from neighbouring authorities, we will work in line with their processes and protocols. We will ensure that we have a clear process for gathering the evidence required for reviews and audits, embedding recommendations into practice, and completing required actions within agreed timescales.

4.3.3. Site Security

All staff members have a responsibility to ensure our buildings and grounds are secure and for reporting concerns that may come to light. Vigilance in the Cafes is essential, and

members of the public are not allowed to enter the College parts of SAND Bay and East Toast café. We check the identity of all visitors to the College. Visitors are expected to sign in and out in the office visitors' log and to display a visitor's lanyard while on site. Any individual who is not known or identifiable will be challenged for clarification and reassurance. We will not accept the behaviour of any individual, parent or any visitor that threatens security or leads others, trainees, or staff, to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse the person access to the College and Café sites.

4.3.4. Information sharing

At The SAND Project we share information with parents and partner agencies to:

- Support early intervention to help children, young adults and families who need additional services to achieve positive outcomes.
- Ensure we fulfil our duty to safeguard our trainees and promote their welfare. The Data Protection Act is not a barrier to sharing information but is in place to ensure personal information is shared appropriately. When sharing information or considering sharing information we will:
 - Explain openly and honestly to parents / carers at the outset what information will or could be shared, and why, and seek agreement, except where doing so puts the trainee or others at risk of significant harm. We explain that we may have information that the trainees tell us but we haven't got consent to share this with families (such as sexual preferences). Where we do not consider there to be a safeguarding risk, we will not share trainee pastoral information with parent/carers unless we have consent to do so.
 - The trainee's safety and welfare must be the overriding consideration when making decisions on whether to share information about them.
 - Ensure information is accurate, up to date, and necessary for the purpose for which you are sharing it, shared only with those who need it shared securely.
 - Respect the wishes of our trainees or families who do not consent to share confidential information unless you judge there is sufficient need to override that lack of consent. Log if you are sharing information without the trainee or family's consent, especially if they are over 18.

- Always record the reasons for your decision to share or not share information. Please use the “reporting a safeguarding concern” form (on Teams/Pastoral/safeguarding) and upload on Arbour, after alerting the DSLs so they can act.

4.3.5. Record Keeping and Data Protection in line with GDPR (2018)

The Data Protection Act states that: Personal information held by agencies must be obtained and processed fairly and lawfully and stored securely. It must be accurate, proportionate to the purpose, not held longer than necessary, and may only be disclosed in appropriate circumstances in line with GDPR requirements. The Administrator is responsible for keeping the single central record (SCR) updated and compliant. DSLs will check the SCR every half term. Record keeping is an important aspect of college life; staff keep records on all areas of trainee welfare, development and attainment. Where concerns arise about the safety or wellbeing of a trainee, or there are indications that the individual may be suffering or at risk of suffering significant harm, staff will record:

- The reason for the concern
- What was said or witnessed, and details of any other persons present
- Dates and times of incidents and when the notes were made
- Date, time and outcome of any discussion with the trainee, parent or carer
- Date, time and outcome of any discussion with the DSL social services staff or other relevant professionals consulted.

Staff will use Arbour and will be careful to distinguish between fact, opinion, and hearsay. Notes will be passed to the DSL who will be alerted and will keep all welfare concerns and Safeguarding concerns on Arbour.

Records form evidence and may be used in the child protection or safeguarding adults’ referral and any subsequent investigation or legal proceedings. They are exempt from the open file regulations and do not have to be made available to trainees, parents or carers requesting access to the trainee’s file.

4.3.6. Confidentiality

All members of The SAND Project are entitled to privacy. In general, confidential information about trainees, families or others within the organisation should be kept confidential and privacy respected in line with GDPR. Where there are concerns that a child or young adult is suffering or likely to suffer significant harm, information must be shared with the DSL in the first instance and will subsequently be shared with social services and the police. Other staff may need to be alerted to concerns about a trainee, possibly to monitor the concern or to gather further evidence prior to a referral being made, or to assist in providing appropriate

support to a trainee after a referral has been made. Information should only be shared on a strict need to know basis.

4.3.7. Whistle-Blowing and Complaints

We recognise that children and vulnerable adults cannot be expected to raise concerns in an environment where staff members fail to do so. We will ensure that all staff members are aware of their duty to raise concerns, where they exist, about the management of child protection and the protection of vulnerable adults, which may include the attitude or actions of colleagues. If necessary, they will speak with the DSLs, the CEO or Managing Director or the Local Authority Designated Officers.

Should staff not feel able to raise concerns they can call the NSPCC whistleblowing helpline on 08000 280 285 or the NHS and Social Care Whistleblowing Helpline on 08000 724 725.

We have a clear reporting procedure for trainees, parents, staff, and other people to report all concerns or complaints, including abusive or poor practice, low level concerns and those that meet the threshold as defined by KCSIE 23.

5. Recruitment, induction, and training

5.1. Recruitment

The Senior Leadership Team will ensure that our recruitment and selection policy is robust in following up references, ID checks and DBS checks. Every staff member will have a new DBS before they start working with us, as we recognise that we recruit from a wide pool, many of whom will have had long career gaps of over three months. All staff members will have their DBS checked every two years and at this point we will pay for them to join the update service. At least one member of the selection panel will have undertaken appropriate Safer Recruitment training to ensure that interviews to appoint staff reflect the importance of safeguarding children and young adults. [Safer recruitment training: online & in-person | NSPCC Learning](#)

5.2. Induction

- All staff will be given induction information regarding our safeguarding policy and training in Child and Vulnerable Adult Protection.
- This will include how to recognise signs of abuse, how to respond to any concerns, how to support local multi-agency procedures (e.g. providing information), online safety, familiarisation with our safeguarding policies, the staff and trainee behaviour/code of conduct and the role of the Designated Safeguarding Lead.

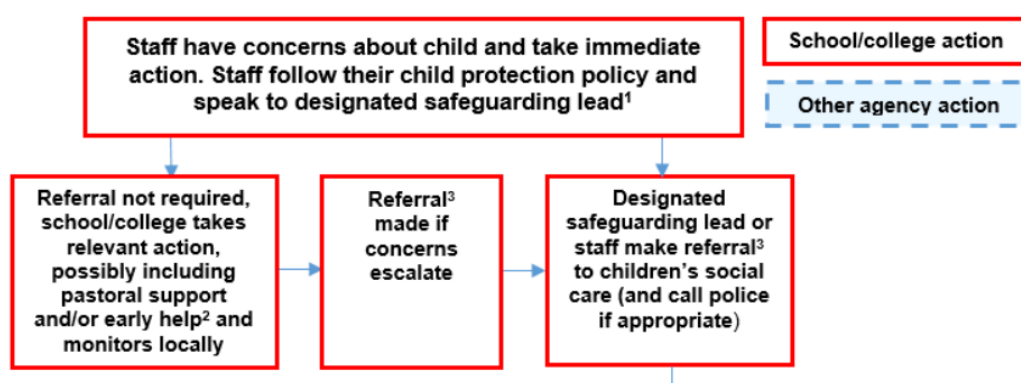
- We will ensure that staff understand the difference between a pastoral concern, a safeguarding concern and a child or young adult in immediate danger or at risk of significant harm.
- Our induction includes reading Part 1 of Keeping Children Safe in Education (KCSIE): Statutory Guidance for Schools and Colleges, September 2023 which is to read, digested and staff must then sign to say they have read and understood it.
- Induction also includes completing [Prevent duty training: Learn how to support people susceptible to radicalisation | Prevent duty training \(support-people-vulnerable-to-radicalisation.service.gov.uk\)](https://www.prevent.radicalisation.service.gov.uk)

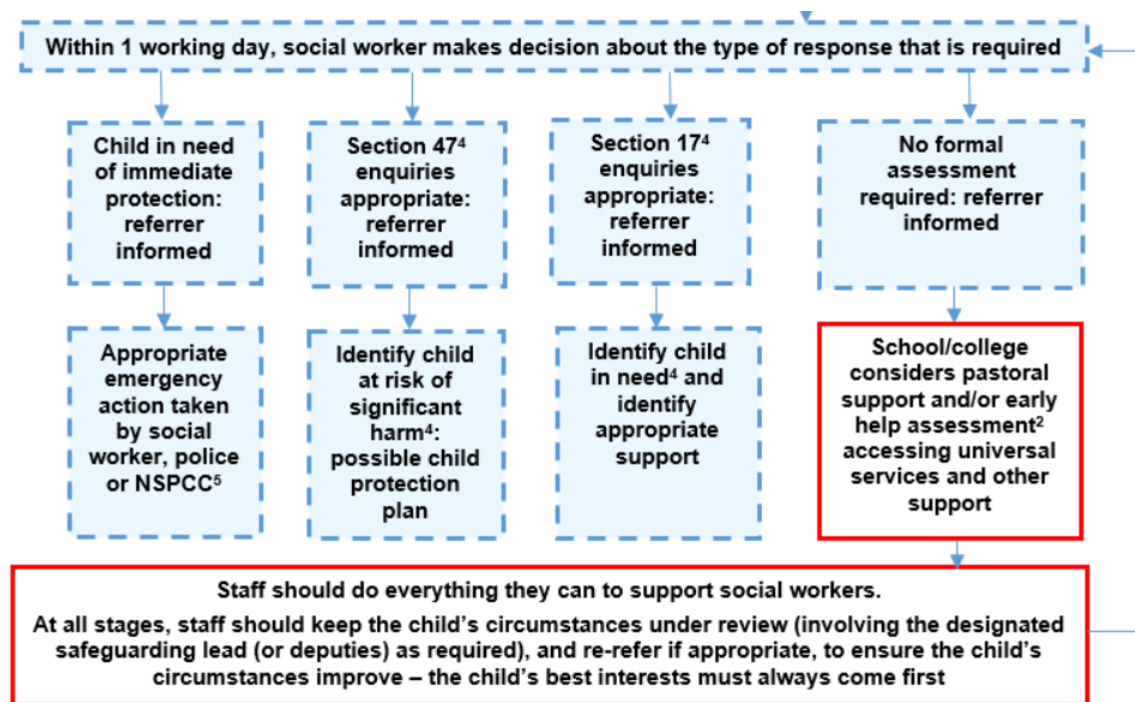
5.3. Training

- Staff at The SAND Project are trained to recognise and respond to the potential indicators of abuse. They are also trained to consider the particular presentation of the child or young adult and spotting changes on an individual basis. Some of our population may habitually appear “unkempt” - this may be due to sensory sensitivities rather than neglect.
- Staff members may refer to social care in the unlikely absence of the DSL, although we aim to have at least 1 DSL who is working on College site every day and is contactable if off site.
- Staff at The SAND Project are trained to record any concerns, injuries, disclosures or behaviour changes of the trainees in accordance with our safeguarding policy.

6. Procedure if concerned about a trainee’s safety

Actions where there are concerns about a child





6.1. All staff have a duty to be vigilant to the indicators of abuse and to refer concerns to the Designated Safeguarding Leads (DSLs). The abuse of children and vulnerable adults is a crime. It is not the role of College staff to investigate, but staff must be clear about their role and the procedure for reporting to the designated person.

6.2. Sometimes concerns that a child or young adult is suffering or is likely to be suffering some form of abuse will build up slowly over time, and some will be as a response to a trainee presenting an injury or mark or making a disclosure. All concerns should be logged on Arbour and should be referred to the DSL who will provide support and guidance and will make a referral to social services and/or the police as appropriate.

6.3. Disclosures:

6.3.1. Sometimes trainees who are suffering abuse will choose a trusted adult to tell. If a trainee discloses abuse in College, the person hearing the disclosure should:

- listen, allowing the trainee to recall freely.
- reassure them that they are doing the right thing by speaking up
- make notes as soon as possible recording as accurately as possible the words used by the trainee. Use the “reporting a safeguarding concern” form on Teams/Pastoral/Safeguarding and upload to Arbour: after telling the DSLs so they can act.
- but be clear with the trainee that the information will have to be passed on to the DSL
- refer to the DSL who will contact social services and the police if necessary.

6.3.2. Do not ask the trainee questions; this is the role of specially trained social workers and police officers. Others posing questions to the trainee could contaminate potential evidence of a crime.

6.3.3 DPA and UK GDPR do not prevent the sharing of information for the purposes of keeping children safe and promoting their welfare. If a trainee is over 18, we must ask for consent and record this decision, but we must always act if we feel safeguarding concerns are serious. If in any doubt about sharing information, staff should speak to the designated safeguarding lead. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare of children and young adults.

7. Recognising signs of abuse

7.1. We recognise the significant impact of trauma on children, young people, young adults and families. We recognise that children who are abused or witness violence are likely to have low self-esteem and may find it difficult to develop a sense of self-worth. They may feel helpless, humiliated and some sense of blame. The SAND Project may be the only stable, secure, and predictable element in their lives.

7.2. We accept that the behaviour of a child or young adult in these circumstances may range from that which is perceived to be “normal” to aggressive or withdrawn. We understand the need to work in a trauma-informed way with these children, young adults and their families. Operation Encompass will let us know of any incidence of domestic violence where the police have visited the trainee’s house.

7.3. We recognise that children and vulnerable adults can be at risk in a range of contexts (community, home, school, college) and from their peers and not just from adults. We understand that all trainees under 18 involved in child-on-child abuse need protection and support.

7.4. Through their day-to-day contact with trainees and direct work with families, all staff have a crucial role to play in noticing indicators of possible abuse or neglect and referring those concerns to the Designated Safeguarding Lead.

7.5. Detailed information about categories and indicators of abuse can be found at Appendix 4.

8. Aspects of risk requiring special attention- see Appendix 3 for more information.

8.1. Staff should be aware of these specific safeguarding issues. The College should ensure that, where such risks may be more likely, staff are guided on how to understand and act accordingly:

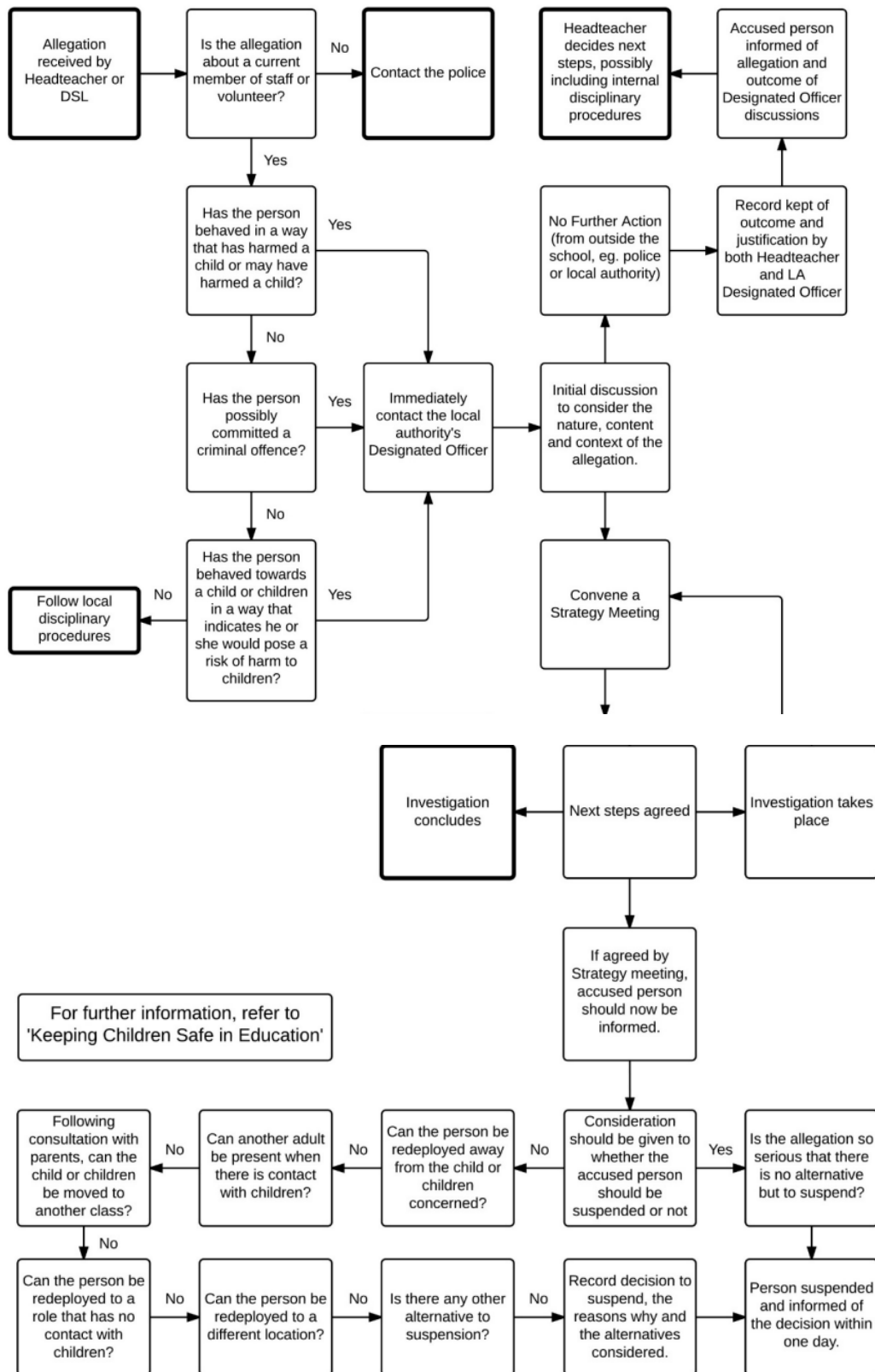
- child sexual exploitation (CSE) in person or online- this includes 16 and 17 year olds who can legally consent to have sex who do not realise they are being exploited.

- Child Criminal exploitation (CCE) where an individual or group take advantage of an imbalance in power to coerce children into participating in criminal activity, usually for a reward
- bullying including cyberbullying (online abuse)
- harmful online challenges - advice on online challenges and hoaxes, sharing information with parents and carers and where to get help and support.
- discrimination
- domestic abuse
- fabricated or induced illness
- faith abuse
- female genital mutilation (FGM) – see also Appendix 3
- forced marriage
- gangs and youth violence
- gender-based violence/violence against women and girls (VAWG)
- mental health
- modern slavery
- organisational abuse
- private fostering
- radicalisation
- youth/self-produced sexual imagery- (nudes and semi nudes) and sharing of this.
- teenage relationship abuse
- trafficking
- self-harm
- self-neglect
- county Lines - see also Appendix 3
- children missing in education - see also Appendix 3
- child on child (under 18 year olds) abuse including sexual violence and sexual harassment
- trainees who have a social worker, are LAC and previously LAC, identify as LGBTQ+ are vulnerable groups who need specific additional monitoring.
- homelessness - see also Appendix 3

- up skirting for sexual gratification or to cause humiliation, distress or alarm
- Initiation/hazing type violence and rituals- either in person or online

9. Allegations against Staff

Flowchart for the initial management of allegations about staff or volunteers



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9.1. The SAND Project believes that all members of the organisation are entitled to receive care and protection from harm. We will not accept inappropriate behaviour and will ensure that any concerns or allegations of impropriety are dealt with quickly, fairly and sensitively.

9.2. It is important that staff report low-level concerns, and this is within the staff code of conduct. The SAND Project seeks to create and embed a culture of openness, trust and transparency. All concerns must be reported to DSLs, including if staff feel something that may have been misinterpreted.

9.3. A low-level concern –does not mean that it is insignificant, it means that the behaviour towards a trainee does not meet the threshold set to refer to the LADO. A low-level concern is any concern, that an adult working in or on behalf of the college may have acted in a way that; causes a sense of unease or a ‘nagging doubt’, is inconsistent with the staff code of conduct, including inappropriate conduct outside of work. The Leadership team will work with the DSLs to decide the most appropriate course of action, which may include further training or a disciplinary. When in doubt, the DSL will take advice from the LADO.

9.4. If an allegation of abuse is made against a member of staff or other adult in The SAND Project, the Head of Education will seek advice from the Local Authority Designated Officer (LADO) and will agree the procedure to be followed (the LADO details on the front page of this document.)

9.5. Any staff disclosing information regarding inappropriate behaviour by colleagues will be listened to and supported. Where a staff member feels unable to raise an issue at The SAND Project, or feels that their genuine concerns are not being addressed, other whistleblowing channels are open to them:

- the NSPCC Whistleblowing Advice Line is available as an alternative route for staff who do not feel able to raise concerns regarding child protection failures internally or have concerns about the way a concern is being handled by their school or college. Staff can call 0800 028 0285 and the line is available from 08:00 to 20:00 Monday to Friday, and 09:00 to 18:00 at weekends. The email address is: help@nspcc.org.uk

9.6. Parents/carers of a trainee allegedly abused by a member of staff or other adult in the College will be kept informed of the progress and outcome of any investigation, as appropriate in line with LADO recommendations.

9.7. Any member of staff facing investigation into an allegation of abuse will be subject to the procedures set by the joint DfES –NEOST guidance and will be offered appropriate access to professional and personal support networks, and will be kept informed of the progress and outcome of any investigation.

9.8. The DSL may report to Social Care if a member of staff or volunteer is suspended following an allegation.

9.9. Where an allegation is substantiated, and the individual is dismissed or resigns and they are a qualified teacher (even if they are not working as a teacher with The SAND Project) the

DSL will refer the matter to the Teaching Regulation Activity (TRA) for consideration for a prohibition order.

9.10 The SAND Project will make a referral to the Disclosure and Barring Service (DBS) if an employee has been dismissed or removed due to safeguarding concerns or would have been had they not resigned. This is a legal duty and failure to do so is a criminal offence.

9.10 The SAND Project will make every effort to maintain confidentiality and guard against unwanted publicity whilst an allegation is being investigated or considered. We will take advice from the LADO, the police and social care in managing all aspects of the case and the outcome, including any lessons learned.

10. Working with other agencies

10.1 The SAND Project is committed to working in partnership with the LA, social services, health and the police.

10.2. Through the DSL we share appropriate information with investigating teams, and contribute to child/adult protection conferences, core groups and care plans.

10.3 Any incident requiring advice from, or referral to, social services and arising out of normal College hours will be referred directly to the emergency/out of hours team or failing that directly to the police, child protection or safeguarding vulnerable adults team. Contact details on the front page.

10.4. Contractors, Service and Activity Providers

- We will ensure that contractors are aware of our safeguarding policy and procedures. We will require that employees provided by these organisations use our procedure to report concerns. This will include our expectation of their conduct whilst on site.

- Contactors should wherever possible carry out their work outside trainee contact hours. Where this is not possible, their visits will be booked in with our admin team and they will be given a visitor lanyard and supervised.

10.5 . Adults who supervise children on Work Experience and Work Engagement.

- 16–18-year-olds have access to supported work engagement visits

- 18+ year olds are given appropriate work experience placements. All work experience placements share their environmental risk assessments (including tools, machinery, and the use of PPE), health and safety procedures and a named welfare contact prior to the placement starting. We also ask them all to complete our SAND onboarding document which includes our safeguarding procedures and who to contact if they have a concern.

- The majority of trainees are supported by a job coach when on work experience. The job coach has a DBS and always wears an ID badge. They meet with the trainee before the placement to complete the One-Page profile and the Contract of Independence which

covers expectations and who to contact with any welfare concerns. This is then shared with the family, and they are given a chance to ask any questions about it. The WEX team meet the trainee and the job coach on the first day of the placement to clarify roles and expectations any questions. The work engagement lead then sets up regular reviews to ensure the success of the placement for the trainee and the business. There is information sharing by the job coach, trainee, family and work engagement lead, this includes any issues with attendance which is followed up by the work engagement lead, following the same system as we have on College site.

- Some of our experienced older trainees undertake work experience without a job coach. Prior to the placement starting the work engagement team meet with the family and the trainee to complete the One Page profile and the Contract of Independence. This assures all parties that the risks of this are planned for and managed and all parties are confident in both the trainee and the placement.
- No work placement has the permission to take our trainees off site in a vehicle.
- All trainees have a work experience pathway target on Earwig

11. Quality Assurance

11.1. We will ensure that systems are in place to monitor the implementation of and compliance with this policy and accompanying procedures.

11.2. We will complete an audit of the organisation's safeguarding arrangements at frequencies specified by the West Sussex Local Safeguarding Children Board and Safeguarding Adults Board (and any successor bodies), using the audit tool provided for this purpose.

11.3. The Senior Leadership Team including the CEO, Managing Director and the DSLs will ensure that action is taken to remedy without delay any deficiencies and weaknesses identified in our child/adult protection and safeguarding arrangements.

12. Policy Review

12.1 This policy and the procedures will be reviewed every academic year. All other linked policies will be reviewed in line with the policy review cycle.

12.2. The Designated Safeguarding Leads will ensure that staff members are made aware of any amendments to policies and procedures.

Appendix 1

The Role of the Designated Safeguarding Lead See also Keeping Children Safe in Education September 2023 Annex C: Role of the Designated Safeguarding Lead.

The designated safeguarding lead should take lead responsibility for safeguarding and child protection (including online safety and understanding the filtering and monitoring systems and processes in place). This should be explicit in the role holder's job description. The designated safeguarding lead should have the appropriate status and authority within the school or college to carry out the duties of the post. The role of the designated safeguarding lead carries a significant level of responsibility, and they should be given the additional time, funding, training, resources and support they need to carry out the role effectively. Their additional responsibilities include providing advice and support to other staff on child welfare, safeguarding and child protection matters, taking part in strategy discussions and inter-agency meetings, and/or supporting other staff to do so, and contributing to the assessment of children.

Availability During term time the designated safeguarding lead (or a deputy) should always be available (during school or college hours) for staff in the school or college to discuss any safeguarding concerns. Beki is full time on College Site and Rachel is 3 days a week on College site. Both can be contacted by phone and both can quickly (within minutes) be at any of the satellite sites if needed.

Manage referrals The designated safeguarding lead is expected to refer cases:

- of suspected abuse and neglect to the local authority children's social care as required and support staff who make referrals to local authority children's social care
- to the Channel programme where there is a radicalisation concern as required and support staff who make referrals to the Channel programme
- where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required, and
- where a crime may have been committed to the Police as required.

Working with others

The designated safeguarding lead is expected to:

- act as a source of support, advice and expertise for all staff
- act as a point of contact with the safeguarding partners
- liaise with the headteacher or principal to inform him or her of issues- especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations. This should include being aware of the requirement for children to have an Appropriate Adult. Further information can be found in the Statutory guidance - [PACE Code C 2019 \(accessible\)](#) - [GOV.UK \(www.gov.uk\)](http://GOV.UK)

- as required, liaise the local authority designated officer(s) (LADO) for child protection concerns in cases which concern a staff member
- liaise with staff on matters of safety and safeguarding and welfare (including online and digital safety) and when deciding whether to make a referral by liaising with relevant agencies so that trainee's needs are considered holistically
- liaise with the LA senior mental health lead and, where available, the mental health support team, where safeguarding concerns are linked to mental health
- promote supportive engagement with parents and/or carers in safeguarding and promoting the welfare of trainees, including where families may be facing challenging circumstances
- taking lead responsibility for promoting educational outcomes by knowing the welfare, safeguarding and child/adult protection issues that trainees in need are experiencing, or have experienced, and identifying the impact that these issues might be having on attendance, engagement and achievement at College. This includes: ensuring that the school or college knows who its cohort of children who have or have had a social worker are, understanding their academic progress and attainment, and maintaining a culture of high aspirations for this cohort, and supporting staff to provide additional support or reasonable adjustments to help trainees who have or have had a social worker reach their potential, recognising that even when statutory social care intervention has ended, there is still a lasting impact on their education.

Information sharing and managing the child/adult protection file

The designated safeguarding lead is responsible for ensuring that child protection files are kept up to date. Information should be kept confidential and stored securely. They should ensure the file is only accessed by those who need to see it and where the file or content within it is shared, this happens in line with information sharing advice as set out in Part one of KCSIE 23.

Where trainees leave The SAND Project (including in year transfers) the designated safeguarding lead should ensure their child/adult protection file is transferred to the new college as soon as possible, and within 5 days for an in-year transfer or within the first 5 days of the start of a new term. This should be transferred separately from the main pupil file, ensuring secure transit, and confirmation of receipt should be obtained.

Raising awareness

The designated safeguarding lead should:

- ensure each member of staff has access to, and understands, The SAND Project's child/adult protection policy and procedures, especially new and part-time staff
- ensure The SAND Project's Child/adult protection policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and work with the CEO and Managing Directors regarding this

- ensure the child/adult protection policy is available on the website and parents know that referrals about suspected abuse or neglect may be made and the role of the school or college in this
- link with the safeguarding partner arrangements to make sure staff are aware of any training opportunities and the latest local policies on local safeguarding arrangements, and
- help promote educational outcomes by sharing information about welfare, safeguarding, and child/adult protection issues that trainees who have or have had a social worker are experiencing with facilitators and college leadership.

Training, knowledge, and skills

The designated safeguarding lead should undergo training to provide them with the knowledge and skills required to carry out the role. This training should be updated at least every two years. The designated safeguarding lead should also undertake Prevent awareness training. Training should provide designated safeguarding leads with a good understanding of their own role, how to identify, understand and respond to specific needs that can increase the vulnerability of trainees, as well as specific harms that can put them at risk, and the processes, procedures and responsibilities of other agencies, particularly local authority children's/adults social care, so they:

- understand the assessment process for providing early help and statutory intervention, including local criteria for action and local authority children's social care referral arrangements
- have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so
- understand the importance of the role the designated safeguarding lead has in providing information and support to local authority children/adults social care in order to safeguard and promote the welfare of the trainees
- understand the lasting impact that adversity and trauma can have, including on children's behaviour, mental health and wellbeing, and what is needed in responding to this in promoting educational outcomes
- understand the importance of information sharing, both within College and with the safeguarding partners, other agencies, organisations and practitioners
- understand and support the school or college with regards to the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation
- are able to understand the unique risks associated with online safety and be confident that they have the relevant knowledge and up to date capability required to keep trainees safe whilst they are online at college

- can recognise the additional risks that children with special educational needs and disabilities (SEND) face online, for example, from bullying, grooming and radicalisation and are confident they have the capability to support children with SEND to stay safe online
- obtain access to resources and attend any relevant or refresher training courses, and
- encourage a culture of listening to trainees and taking account of their wishes and feelings, among all staff, in any measures the college may put in place to protect them. In addition to the formal training set out above, their knowledge and skills should be refreshed (this might be via e-bulletins, meeting other designated safeguarding leads, or simply taking time to read and digest safeguarding developments) at regular intervals, as required, and at least annually, to allow them to understand and keep up with any developments relevant to their role

Providing support to staff

Training should support the designated safeguarding lead in developing expertise, so they can support and advise staff and help them feel confident on welfare, safeguarding and child/adult protection matters. This includes specifically to:

- ensure that staff are supported during the referrals processes, and
- support staff to consider how safeguarding, welfare and educational outcomes are linked, including to inform the provision of academic and pastoral support.
- Have an understanding of Harmful Sexual Behaviour and how this can look in 16-18 year olds and young adults.

Understanding the views of trainees

It is important that all trainees feel heard and understood. Therefore, designated safeguarding leads should be supported in developing knowledge and skills to:

- encourage a culture of listening to trainees and taking account of their wishes and feelings, among all staff, and in any measures the college may put in place to protect them,
- understand the difficulties that trainees may have in approaching staff about their circumstances and consider how to build trusted relationships which facilitate communication.

Holding and sharing information

The designated safeguarding lead should be equipped to:

- understand the importance of information sharing, both within college, and with other schools and colleges on transfer including in-year, and with the safeguarding partners, other agencies, organisations and practitioners

- understand relevant data protection legislation and regulations, especially the Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR), and
- be able to keep detailed, accurate, secure written records of concerns and referrals and understand the purpose of this record-keeping

Safeguarding in the curriculum

The DSL should oversee safeguarding in the curriculum, which is taught through Life and Living sessions and reinforced throughout the day.

Associated policies

- To review and update the Safeguarding Policy annually
- Ensure the Anti-Bullying Policy is in place
- Ensure the Online Safety policy including use of Social Media is updated annually and kept in line with current developments
- Ensure a “Use of trainee photographs” policy and individual consents is in place

Appendix 2

Responsibilities of those responsible for governance and oversight- the “management committee”.

- Ensuring that effective Safeguarding policies are in place, reviewed annually and provided to all staff on induction and that staff are kept up to date with changes.
- Challenging the DSL to work with other agencies - providing a coordinated offer of early help when additional needs of trainees are identified.
- Appointing a designated member of staff for child/adult protection who should undergo refresher child protection training every two years.
- Ensuring that The SAND Project creates a culture of safe recruitment and adopt recruitment procedures that help deter, reject or identify people who might abuse children or vulnerable adults (Safer Recruitment. Keeping Children Safe in Education, Safeguarding Vulnerable Groups Act 2006).
- Ensuring that at least one member of an appointing panel will have attended Safer Recruitment training.
- Ensuring that The SAND Project keeps an up-to-date single central record of all staff and the dates of all appropriate safeguarding checks.

- Making sure that the Safeguarding policy is available to parents on request and is on the website.
- Ensuring that this policy and practice complements other policies e.g. Antbullying including cyber bullying, Online safety, Social Media, Health and Safety, to ensure safeguarding culture is in place.
- Prioritising the welfare of children, young people and young adults and creating a culture where staff are confident to challenge senior leaders over any safeguarding concerns.
- Giving consideration as to how our trainees may be taught about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum.
- Should be doing all that they reasonably can to limit trainee’s exposure to risks from The SAND Project’s IT system. As part of this process, leaders should ensure the college has appropriate filters and monitoring systems in place and regularly review their effectiveness. They should ensure that the leadership team and relevant staff have an awareness and understanding of the provisions in place and manage them effectively and know how to escalate concerns when identified. Those responsible for governance should consider the age range of their trainees, the number of trainees, how often they access the IT system and the proportionality of costs verses safeguarding risks
- Checking with the DSL that all separate bodies providing placements or activities within school/college have appropriate policies and procedures in place for safeguarding and that there are arrangements to liaise with the provider on these matters where appropriate.
- Those responsible for governance should be aware of their obligations under the Human Rights Act 1998, the Equality Act 2010, (including the Public Sector Equality Duty), and their local multi-agency safeguarding arrangements.

Appendix 3

Understanding specific safeguarding issues (for children and adults)

Child on Child Sexual Violence and sexual harassment

Sexual violence and sexual harassment can occur between two or more children of any age and sex, from primary through to secondary stage and into college. It can occur also through a group of children sexually assaulting or sexually harassing a single child or group of children. Sexual violence and sexual harassment exist on a continuum and may overlap; they can occur online and face-to-face (both physically and verbally) and are never acceptable.

The SAND Project is aware of the importance of:

- making clear that there is a zero-tolerance approach to sexual violence and sexual harassment, that it is never acceptable, and it will not be tolerated. It should never be passed off as “banter”, “just having a laugh”, “a part of growing up” or “boys being boys”.

Failure to do so can lead to a culture of unacceptable behaviour, an unsafe environment and in worst case scenarios a culture that normalises abuse, leading to children accepting it as normal and not coming forward to report it

- recognising, acknowledging, and understanding the scale of harassment and abuse and that even if there are no reports it does not mean it is not happening, it may be the case that it is just not being reported
- challenging physical behaviour (potentially criminal in nature) such as grabbing bottoms, breasts and genitalia, pulling down trousers, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them.

Sexual violence

The SAND Project is aware of sexual violence and the fact children can, and sometimes do, abuse other children in this way and that it can happen both inside and outside of school/college. When referring to sexual violence in this advice, we do so in the context of child-on-child sexual violence. When referring to sexual violence we are referring to sexual offences under the Sexual Offences Act 2003 as described below:

Rape: A person (A) commits an offence of rape if: he intentionally penetrates the vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration and A does not reasonably believe that B consents.

Assault by Penetration: A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of her/his body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.

Sexual Assault: A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching and A does not reasonably believe that B consents. (NOTE we are aware that sexual assault covers a very wide range of behaviour so a single act of kissing someone without consent or touching someone's bottom/breasts/genitalia without consent, can still constitute sexual assault).

Causing someone to engage in sexual activity without consent: A person (A) commits an offence if: s/he intentionally causes another person (B) to engage in an activity, the activity is sexual, B does not consent to engaging in the activity, and A does not reasonably believe that B consents. (NOTE – this could include forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party).

What is consent?

Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs. Someone consents to vaginal, anal

or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.

- a child under the age of 13 can never consent to any sexual activity
- the age of consent is 16
- sexual intercourse without consent is rape.

Further information about consent can be found here: Rape Crisis England & Wales – [What is sexual consent? | Rape Crisis England & Wales](#)

Sexual harassment

When referring to sexual harassment we mean ‘unwanted conduct of a sexual nature’ that can occur online and offline and both inside and outside of The SAND Project. When we reference sexual harassment, we do so in the context of child-on-child sexual harassment. Sexual harassment is likely to: violate a child’s dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.

Whilst not intended to be an exhaustive list, sexual harassment can include:

- sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names
- sexual “jokes” or taunting
- physical behaviour, such as: deliberately brushing against someone, interfering with someone’s clothes.

The staff at The SAND Project need to understand and consider consent. This will be especially important if a child is reporting they have been raped or sexually assaulted in any way.

PSHE Teaching about consent from the PSHE association provides advice and lesson plans to teach consent at Key stage 3 and 4. [Teaching about consent \(pshe-association.org.uk\)](#) It is important to differentiate between consensual sexual activity between children of a similar age and that which involves any power imbalance, coercion or exploitation.

Sexual Violence

Sometimes sexual activity crosses a line into sexual violence – it is important to talk to and consider the experience of the victim.

- displaying pictures, photos or drawings of a sexual nature
- upskirting (this is a criminal offence)
- online sexual harassment. This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence. It may include: consensual and non-consensual sharing of nude and semi-nude images and/or videos. Taking and sharing nude photographs of those aged under 18 is a criminal offence.

The SAND Project will consider sexual harassment in broad terms. Sexual harassment (as set out above) creates a culture that, if not challenged, can normalise inappropriate behaviours and provide an environment that may lead to sexual violence.

Harmful sexual behaviour

Children's sexual behaviour exists on a wide continuum, ranging from normal and developmentally expected, to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. A useful umbrella term is "harmful sexual behaviour" (HSB). The term has been widely adopted in child protection and is used in this advice. HSB can occur online and/or face-to-face and can also occur simultaneously. The Voyeurism (Offences) Act 2019 which amends the Sexual Offences Act 2003 to make upskirting a specific offence of voyeurism. The Act came into force on 12 April 2019. Project deSHAME from Childnet [Project deSHAME | Childnet](#) provides useful research, advice and resources regarding online sexual harassment.

Consensual image sharing, especially between older children of the same age, may require a different response. It might not be abusive – but children still need to know it is illegal whilst non-consensual is illegal and abusive. HSB should be considered in a child protection context. When considering HSB, both ages and the stages of development of the children are critical factors. Sexual behaviour between children can be considered harmful if one of the children is much older, particularly if there is more than two years' difference or if one of the children is pre-pubescent and the other is not. However, a younger child can abuse an older child, particularly if they have power over them, for example, if the older child is disabled or smaller in stature.

Child Criminal Exploitation

Child Criminal Exploitation involves exploitative situations, contexts, and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual and other exploitative activities. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. Sexual exploitation involves varying degrees of coercion, intimidation, or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. It is important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

Children missing in Education

Staff have a duty to record trainees's attendance in College and to follow up any absences. Repeated patterns of absence should be referred to DSL who will have oversight of the

family and will make a referral as required. Trainees who are not in College are vulnerable as they are not seen as regularly by professionals and increasingly isolated.

County Lines

'County Lines' is a term used when drug gangs from cities expand their operations to smaller towns, suburban areas, rural areas and market and seaside towns, often using violence to drive out local dealers and exploiting children and vulnerable people to sell drugs. These dealers will use dedicated mobile phone lines, known as 'deal lines', to take orders from drug users. A common feature in county lines drug supply is the exploitation of young and vulnerable people. The dealers will frequently target children and adults - often with learning difficulties, mental health or addiction problems - to act as drug runners or move cash so they can stay under the radar of law enforcement. People exploited in this way will quite often be exposed to physical, mental, and sexual abuse, and in some instances will be trafficked to areas a long way from home as part of the network's drug dealing business. Children and vulnerable adults often don't see themselves as victims or realise they have been groomed to get involved in criminality. More information can be found on the National Crime Agency website.

Discrimination

Discriminatory abuse exists when the values, beliefs or culture result in a misuse of power that denies mainstream opportunities to some groups or individuals. It includes discrimination based on age, disability, gender, pregnancy, maternity, race, religion or belief, sex or sexual orientation and includes hate crime incidents.

Domestic abuse

Domestic abuse covers people 16 years or older who are or have experienced an incident or pattern of incidents of controlling, coercive or threatening behaviour, violence, or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality. People below the age of 18 years are supported by the Sussex Child Protection Procedures. Adults who meet the three key tests will be covered by the Sussex Safeguarding Adults Policy and Procedures.

Female Genital Mutilation (FGM)

Female genital mutilation (FGM) is a procedure where the female genitals are deliberately cut, injured or changed. FGM is an illegal, extremely harmful practice and a form of child abuse and violence against women and girls. There is no medical reason for this to be done. It is also known as female circumcision or cutting, and by other terms, such as sunna, gudniin, halalays, tahur, megrez and khitan, among others. Trainees at The SAND Project may have experienced FGM in their younger years, so it's important we know about it.

- FGM is usually carried out on young girls between infancy and the age of 15, most commonly before puberty starts.
- It is illegal in the UK and is child abuse.

- It is very painful and can seriously harm the health of women and girls.
- It can also cause long-term problems with sex, childbirth and mental health.
- The practice is mainly concentrated in the Western, Eastern, and North-Eastern regions of Africa, in some countries the Middle East and Asia, as well as among migrants from these areas. FGM is therefore a global concern.
- Female Genital Mutilation is not a religious requirement or obligation. FGM has no link with Islam. Globally most Muslims do not practise FGM. Indicators that FGM may already have occurred include prolonged absence from school, college or other activities with noticeable behaviour change on return, possibly with bladder or menstrual problems. Some teachers have described how children find it difficult to sit still and look uncomfortable, or may complain about pain between their legs, or talk of something somebody did to them that they are not allowed to talk about. Further guidance is available in the Multi-Agency Statutory Guidance document. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and social care. Anyone concerned a case of FGM has happened or may happen should contact the police directly as well as the DSL and report it as a crime. [HM Government - Multi-agency statutory guidance on Female Genital Mutilation \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/61222/multi-agency-guidance-on-female-genital-mutilation.pdf)

Homelessness

DSLs should be aware of the contact details and referral routes of the Local Housing Authority to enable them to raise concerns. Referrals to the Local Housing Authority should not replace referrals to social care where a child or vulnerable adult is being harmed or at risk of harm. For 16 and 17-year-olds homelessness may not be family-based, and the DSLs should ensure appropriate referrals to social services are made where necessary.

Modern slavery

The Modern Slavery Act categorises offences of Slavery, Servitude and Forced or Compulsory Labour and Human Trafficking. Practice guidance relating to the national strategy to respond to Modern Slavery and human trafficking includes details of the Duty to Notify and explains how to refer victims into the National Referral Mechanism. Specific public authorities, which include the police and local authorities, are required to notify the Home Office about any potential victims of modern slavery they encounter in England and Wales. If the potential victim does not want to be referred to the National Referral Mechanism, then an MS1 form should be completed and sent to dutytonotify@homeoffice.gsi.gov.uk The MS1 form can be anonymous. The MS1 form and guidance is available [Modern slavery victims: referral - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/61222/modern-slavery-victims-referral-GOV.UK.pdf)

Organisational abuse

Organisational abuse occurs when the organisation's systems, processes and management fails to safeguard a number of adults leaving them at risk or causing them harm.

Organisational abuse happens when the routines, systems and values of an organisation override the needs of those it is there to support. For example, verbal abuse of trainees by staff, the misuse of dangerous restraints, punishments and degrading treatment.

Radicalisation

Schools and colleges have a duty in the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism. Operation "Prevent" outlines the responsibilities local authorities have in this. We ensure that trainees are safe from terrorist and extremist material when accessing the internet College via our Smoothwall filter system. We aim to build resilience in our trainees by providing a safe environment and promoting spiritual, moral and cultural development, and within this fundamental British values - which include tolerance. We are aware of white British far right extremism and aim to counter this alongside any other forms of extremism. Throughout our daily curriculum, we aim to promote curiosity and understanding of others perspectives in ways individualised to each trainee. We have close links with our families and aim to build strong and trusting relationships with them. Any concerns in this area will be directed to our DSLs.

Staff can also report concerns directly to: Email counter.extremism@education.gov.uk

Telephone 020 7340 7264

Self-neglect

Self-neglect is now included in the Sussex Safeguarding Policy and Procedures. An individual may be considered as self-neglecting when they are:

- Unable or unwilling to provide adequate care for themselves
- Unable or unwilling to obtain necessary care to meet their needs
- Refusing essential support to meet their health and safety needs

Categories and Indicators of Abuse

Physical abuse

Physical abuse 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 in their child.

Indicators in the child, young person or young adult:

Bruising It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non-accidental unless there is evidence or an adequate explanation provided:

- Bruising in or around the mouth
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally, for example the back, mouth, cheek, ear, stomach, chest, under the arm, neck, genital and rectal areas
- Variation in colour, possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Linear bruising at any site, particularly on the buttocks, back or face
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks to the upper arms, forearms or leg
- Petechae haemorrhages (pinpoint blood spots under the skin.) Commonly associated with slapping, smothering/suffocation, strangling and squeezing

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. It is unlikely that a child or young adult will have had a fracture without the carers being aware of their distress. If the child or young adult is not using a limb, has pain on movement and/or swelling of the limb, there may be a fracture. There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick.
- Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually witnessed, the child or young adult will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

Fabricated or Induced Illness

Professionals may be concerned at the possibility of a child or young adult suffering significant harm as a result of having illness fabricated or induced by their carer. Possible concerns are:

- Discrepancies between reported and observed medical conditions, such as the incidence of seizures, fainting etc
- Attendance at various hospitals, in different geographical areas
- Development of feeding / eating disorders, as a result of unpleasant feeding interactions
- The child or young adult developing abnormal attitudes to their own health
- Non organic failure to thrive - a child does not put on weight and grow and there is no underlying medical cause
- Speech, language or motor developmental delays without an organic route could be relayed to lack of stimulation, nurture and care
- Dislike of close physical contact
- Attachment disorders
- Low self esteem
- Poor quality or no relationships with peers because social interactions are restricted
- Poor attendance at college and under-achievement

Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child. A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite. GP should see any bite mark that breaks the skin.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded. Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid. Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation.

Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath. The following points are also worth remembering:

- A responsible adult checks the temperature of the bath before the child or vulnerable adult gets in.
- A child or young adult is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet.
- A child or young adult who experiences physical difficulties getting into too hot water of his or her own accord will struggle to get out and there will be splash marks.

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, or unusually shaped, may suggest abuse. Other indicators

Emotional / behavioural presentation

- Refusal to discuss injuries
- Admission of punishment which appears excessive
- Fear of parents being contacted and fear of returning home
- Withdrawal from physical contact
- Arms and legs kept covered in hot weather
- Fear of medical help
- Aggression towards others
- Frequently absent from College
- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Indicators in the parent
- May have injuries themselves that suggest domestic violence
- Not seeking medical help/unexplained delay in seeking treatment
- Reluctant to give information or mention previous injuries
- Absent without good reason from medical appointments
- Disinterested or undisturbed by accident or injury
- Aggressive towards child or others
- Unauthorised attempts to administer medication
- Tries to draw their child into their own illness

- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
- May be over involved in participating in medical tests, taking temperatures and measuring bodily fluids
- Observed to be intensely involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care.
- May appear unusually concerned about the results of investigations which may indicate physical illness in the child
- May have convictions for violent crimes

Indicators in the family/environment

- Marginalised or isolated by the community
- History of mental health, alcohol or drug misuse or domestic violence
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child or vulnerable adult such as to cause severe and persistent adverse effects on their emotional development or wellbeing. It may involve conveying 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 or young adult opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature developmentally inappropriate expectations. These may include interactions that are beyond the child or young adult's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing them participating in usual social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children or young adults frequently to feel frightened or in danger, or the exploitation or corruption of children or vulnerable adults. Some level of emotional abuse is involved in all types of maltreatment of a child or vulnerable adult, though it may occur alone.

Indicators in the child or young adult

- Developmental delay

- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- Child or young adult scapegoated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self-esteem, lack of confidence, fearful, distressed, anxious
- Poor peer relationships including withdrawn or isolated behaviour • Over-reaction to mistakes • Fear of new situations
- Inappropriate emotional responses to painful situations
- Behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
- Self-harm
- Fear of parents being contacted
- Extremes of passivity or aggression
- Drug/solvent abuse
- Chronic running away
- Compulsive stealing
- Low self-esteem
- Air of detachment – ‘don’t care’ attitude
- Social isolation – does not join in and has few friends
- Depression, withdrawal

Indicators in the parent

- Domestic abuse, mental health problems and substance misuse
 - Abnormal attachment e.g. overly anxious or disinterest in their child
 - Scapegoats one child in the family
 - Imposes inappropriate expectations on the child e.g. prevents the child’s developmental exploration or learning, or normal social interaction through overprotection
- Indicators of in the family/environment

Lack of support from family or social network

- Marginalised or isolated by the community
- History of mental health, alcohol or drug misuse or domestic violence

- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

Neglect

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

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

Indicators in the child or young adult

- Physical presentation
- Failure to thrive or, in older children, short stature
- Underweight
- Frequent hunger
- Dirty, unkempt condition
- Inadequately clothed, clothing in a poor state of repair
- Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold
- Swollen limbs with sores that are slow to heal, usually associated with cold injury
- Abnormal voracious appetite
- Dry, sparse hair
- Recurrent / untreated infections or skin conditions e.g. severe rash, eczema or persistent head lice / scabies/ diarrhoea
- Unmanaged/untreated health conditions including poor dental health
- Frequent accidents or injuries

- General development delay, especially speech and language delay
- Inadequate social skills and poor socialisation

Emotional/behavioural presentation:

- Attachment disorders, identified through behaviours and presentation, difficulty in forming relationships and trusting adults.
- Absence of normal social responsiveness
- Indiscriminate behaviour in relationships with adults
- Emotionally needy
- Compulsive stealing
- Constant tiredness
- Frequently absent or late
- Poor self esteem
- Destructive tendencies
- Thrives away from home environment
- Aggressive and impulsive behaviour
- Disturbed peer relationships
- Self-harming behaviour.

Indicators in the parent

- Dirty, unkempt presentation
- Inadequately clothed
- Inadequate social skills and poor socialisation
- Abnormal attachment to the child e.g. anxious
- Low self-esteem and lack of confidence
- Failure to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene
- Failure to meet their child's health and medical needs e.g. poor dental health; failure to attend or keep medical appointments; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy
- Child or vulnerable adult left with adults who are intoxicated or violent
- Child or vulnerable adult abandoned or left alone for excessive periods.

Indicators in the family/environment

- History of neglect in the family
- Family marginalised or isolated by the community
- Family has history of mental health, alcohol or drug misuse or domestic violence
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Family has a past history of abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement
- Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals
- Poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating
- Lack of opportunities for child or young adult to play and learn.

Sexual abuse

Sexual abuse involves forcing or enticing a child, young person or vulnerable adult to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child, young person or young adult 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, young people or vulnerable adults in looking at, or in the production of, sexual images, watching sexual activities, encouraging them to behave in sexually inappropriate ways, or grooming a child, young person or young adult 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 and young people.

Indicators in the child, young person or young adult

Physical symptoms

- injuries to the genital or anal area
- bruising to buttocks, abdomen and thighs
- sexually transmitted infections, presence of semen or blood on vagina, anus, external genitalia, underclothes or clothing
- Urinary infections, bleeding or soreness in the genital or anal areas

- Recurrent pain on passing urine or faeces
- Pregnancy in a younger girl where the identity of the father is not disclosed or there is secrecy or vagueness about the identity of the father

Emotional / behavioural presentation

- Makes a disclosure
- Demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
- Inexplicable changes in behaviour, such as becoming aggressive or withdrawn
- Self-harm - eating disorders, self-mutilation and suicide attempts
- Poor self-image, self-harm, self-hatred
- Reluctant to wear short sleeves etc in summer
- Running away from home
- Poor attention / concentration (world of their own)
- Sudden changes in school work habits, become truant
- Withdrawal, isolation or excessive worrying
- Inappropriate sexualised conduct
- Sexually exploited or indiscriminate choice of sexual partners
- Wetting or other regressive behaviours e.g. thumb sucking
- Draws sexually explicit pictures

Indicators in the parents

- Comments made by the parent/carer about the child or young person
- Lack of sexual boundaries
- Wider parenting difficulties or vulnerabilities
- Grooming behaviour
- Parent is a sex offender

Indicators in the family/environment

- Marginalised or isolated by the community
- History of mental health, alcohol or drug misuse or domestic violence

- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement
- Family member is a sex offender.

Financial abuse of vulnerable adults (+18 trainees)

Financial abuse is: "The unauthorised and improper use of funds, property or any resources belonging to another individual". Everyone has the right to live in safety, free from financial abuse. Financial abuse can occur anywhere: at home or a public place, in hospital or attending a day centre, or in a college or care home. Vulnerable adults may be living alone or with others. The person causing the harm may be a stranger but, often, vulnerable adults will know and feel safe with them. They're usually in a position of trust and power, such as a health or care professional, relative or neighbour.

Financial abuse includes:

- Someone stealing money or other valuables from the vulnerable adult
- Someone appointed to look after the vulnerable adult's money on their behalf is using it inappropriately
- Preventing someone buying goods, services or leisure activities
- Wrongfully controlling access to money or benefits
- Being deliberately overcharged for goods or services, or being asked to part with money under false pretences
- Exploitation
- Someone coercing the vulnerable adult to spend it in a way they are not happy with in relation to an adult's financial affairs or arrangements, such as connection with wills, property, inheritance or financial transactions, or the misuse of property, possessions or benefits
- Fraud, postal, telephone, internet scams and doorstep crime (e.g. where the person has interacted with someone and has lost money)

Who is likely to perpetrate financial abuse?

Financial abuse is most frequently perpetrated by a person acting in a trusted capacity, for example, a family member or friends and neighbours or care workers / other professionals. Examples include:

- Staff in care establishments exploiting residents by gaining their trust and taking over their finances unlawfully
- Care providers invoicing for services not provided
- Powers of attorney exploiting their position by misappropriating funds.
- Some families may have a view that the income of individual family members, including benefits for disabled adults, should be pooled into the family income
- The person managing a direct payments account (which can include the client) engaging in false accounting through the forgery of accounting records / payslips, to allow monies to be misappropriated.

Financial abuse more commonly perpetrated by a stranger includes mass marketing fraud, identity theft or rogue trading.

Indicators of financial abuse:

The list below includes a range of possible indicators. It should not be considered an exhaustive list.

- Unexplained withdrawals from a person's bank account
- Cheque withdrawals to unknown businesses / persons
- An unexplained shortage of money, despite an adequate income or immediately following benefit day
- Unpaid or a sudden inability to pay bills
- Payment of client contribution suddenly stops
- Disparity between assets and satisfactory living conditions
- The person lacks belongings or services which they can clearly afford
 - Reluctance on the part of family, friends or the person controlling funds to pay for replacement clothes or furniture
- Items purchased which are not appropriate for the person.
- Home improvements or repairs that are 'out of fashion' with the person's lifestyle or are 'worrying' the person or staff
- Loans or credit being taken out by a person in circumstances that give cause for concern, such as the alleged reason for the loan
- Pressure by family members and others to sign over assets or alter wills
- Recent change of deeds or title of house

- A person's inability to explain what is happening to their own income
- The disappearance of bank statements, other documents or valuables
- Carer asking only financial questions of the work, rather than about care
- Lack of records within supporting living accommodation, such as time sheets, invoices, receipts etc